

Rochester State Hospital (Minn.). Patient Case Books.

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From 272

John Erickson #3

1894 cont'd

Apl 30 — & improved any. Patient is inclined to be dull. Talks to himself, a good deal. Generally understands when spoken to, but does not answer. Inclined to be also destructive & dirty. Physical condition seems good.

May 1/19/31 — May 1/94. Wt 143 pds. Pulse 76. May 19/94. No noticeable change. Transferred to B3 today. May 31/94. Occasionally restless, at night, sleeping poorly. Appetite good, at times; again, at others, very poor: occasionally misses 3 or 4 meals. Rarely ever speaks; does no work; untidy about clothes, sometimes destructive; habits filthy. Does not seem to improve.

June 1/30 — June 1/94. Wt 137 pds. Pulse 75. June 30/94. Has been restless nearly all night, as each of past 3 nights & last night, nurse could not keep him in bed. Started to run away while out walking today; was caught and brought back, but not without a struggle as he showed fight. In all respects, is about the same.

July 2/16 — July 2/94. Wt 134 pds. Pulse 112. July 16/94. made his Escape while out on the grounds today. —

" 17/19 — July 17/94. Was returned today. July 19/94. Very restless, last night; would not stay in bed: when told by N.W. to remain in bed, he became fugacious; help was at hand & patient put to bed. July 29/94. Continues restlessly behaved: always wandering aimlessly about the ward; when out walking requires very close watching for fear of his escaping.

" 27

" 31 — Speaks but very little; actions stupid. Slouchy in dress; habits filthy. July 31/94. Keeps about same for several months past.

(carried to Transfer Book "A" page 110)

From 263.

Irving O. Sweetzer

B

1894

Feb 28 — Feb 28/94. Behavior not good at all times. Has spells of talking about all sorts of foolish things. Plays some games. Works fairly well on the ward. Appetite good; bowels regular. Habits are clean and tidy. —

Mar 2/30 — March 2/94. Wt 114½ pds (has gained considerably in flesh during the past month). Pulse 92. May 31/94. Has again taken an idle turn; sits about in a seat most of the time; will not assist with the work; plays games & reads some.

Apl 2/30 — April 2/94. Wt 127 pds. (a gain of 12½ pounds in the past month). Pulse 90. Apl 30/94. No very noticeable change in patients condition since last report. Still sits idly about. Is full of delusive ideas. Habits are cleanly.

May 1/31 — May 1/94. Wt 129 pds. Pulse 70. May 9/94. Was most rest, extremely noisy; cursing & blaspheming; is again so today. May 27/94. When coming in from a walk, heran ahead up to B1; became violent & resisted being brought back. May 31/94. General Conduct and behavior do not change any. He is cranky, of a mean disposition; still holds delusions. Works some in the hall.

June 2/30 — June 2/94. Wt 131½ pds. Pulse 74. June 30/94. Conduct behavior & disposition do not change any. Mentally, also about same.

July 2/31 — July 2/94. Wt 129 pds. July 2/94. Attendants has trouble with patient at bed time, last evening. Very cranky.

" 31 — July 31/94. Apparently, rests & sleeps well. Keeps about as usual, by day. Obstinate & very abusive, at times. —

(carried to Transfer Book "A" page 124)

From 280

Dana Bush

Feb 1/28 — Feb 1/94. Wt 202 pds. Pulse 72. Feb 28/94. Seems to rest & sleep well, at night. Appetite good: bowels regular. Is always quiet & well-behaved; causes no trouble. Habits are neat & clean. Physical conditions very good.

Mar 1/31 — March 1/94. Wt 200½ pds. Pulse 86. March 31/94. Always pleasant & sociable. Clean & of good personal habits. Talks freely & quite sensibly. Has helped, willingly, with any work asked of him. Does not appear to have any delusions of late; at least does not express any. Occasionally asks "if you think he will be sent over the river".

Apl 2/30 — April 2/94. Wt 205½ pds. Pulse 74. April 30/94. Seems quite contented here. Does not change any.

May 31 / June 30 / July 31 — During these 3 months, there has been no apparent change in either his general conduct & behavior, or his mental condition. Physical health is very good. Wt 3/1 209 pds. Wt 7/1 215 pds. Wt 7/31 215 pds. P. about normal. Does not frequently speak about his "affair". Works some on ward. Habits neat & tidy. —

Aug 1/28 — Aug 1/94. Wt 218 pds. Pulse 68. Aug 25/94. Appetite good; bowels regular. Behavior very quiet, the last 30 or 40 days: hardly speaking to any one unless he does it in an incoherent manner; lying lazily around on the seats; sleeping part of the time: appears as though he were meditating very strongly upon something, as he, at times, entirely unconscious of his surroundings, & of what is going on about him.

" 31 — Aug 31/94. Does not seem to improve any; still continues in a stupid way; hardly ever speaking to any one; seems as if he were worrying over something; seems "lost", at times. Habits are clean. Works some on ward.

(carried to Transfer Book "A" page 111)

From 388.

Harry Jamison

Apl 1/30 — April 1/94. Wt 147 pds. Pulse 82. April 30/94. Convulsions still continue to occur. The following are reported as nocturnal ones — viz: 1, April 1st; 1 April 2nd; 7, April 3rd; 2, April 4th; 1, April 5th; 2, April 14th; 2, April 26th; 6, April 27th; 1, April 28th; 2, April 29th; and the following, by day; 1 on April 5th; 1 on 27th & 1 on April 28th. Patient is somewhat restless; walks about the hall a good deal. Talks to himself. Looks same.

May 1/31 — May 1/94. Wt 142 pds. Pulse 72. May 27/94. Has had 21 nocturnal convulsions this month, so far; —

" 27 — May 27/94. Was throwing food about, in the dining room & had the fit over it. Refused to go out walking

" 30 — also was put in B3 in the meantime. June 30/94. Manner, conduct & disposition do not change much. Is, quite often, cranky & mean in disposition. Makes no complaints. Helps some with the work.

June 2/30 — June 2/94. Wt 144 pds. Pulse 80. June 30/94. Has had 74 nocturnal convulsions & 1 convulsion by day during this month. In other respects, no special change, except he has been somewhat better behaved of late.

July 2/31 — July 2/94. Wt 144 pds. July 31/94. 14 Convulsions by night and 2, by day, are reported for this month. He is very cranky after he has a convulsion. Walks out daily; works a little; habits are cleanly.

(carried to Transfer Book "A" page 126)

Y
Z

Nels. N. Helland

Room 70 –

1894 cont'd

March 31 in

Apl 2/6 A

" 7/8 A

" 9 Con

" 30 Ap

May 1 C

" 17 w

" 15 pe

" 18 a

" 19 C

" 24 y

" 23/24

" 25/26

" 27 a

" 28

" 29

" 30

Vol 20-17
3072

CASE RECORD.

Patient's Name Nels N. Helland Name Disease ..... Name Physician .....

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
May 1894						
29 1.25 P.M.					On Special diet.	Suffering from pain in abdomen. Applied hot cloths.
7 A.M.				Medicine		Seemed to relieve him.
12 M.				"		Groaning, very weak
6 P.M.				"		
30. 1 A.M.						Died.
1.45 "						

Recorded by T. A. Spillane Nurse.

Personal and Medical History of Michael Murphy D

Room 252.

1893

Nov 1/ C

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Nels. H. Helland

CASE RECORD.

Patient's Name Nels. H. Helland Name Disease ..... Name Physician .....

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
May. 1894						
25. 7. A.M.	102.2	116	28		Our special diet	Night. Has been very
5. P.M.	99.4	112	32		Egg nog 6.30 P.M.	restless while awake.
						Appears quite weak
						to day.
7. A.M.				Medicine		
12.30 P.M.				"		
6.30 "				"		
26. 7. —	102.	120	28		" " "	Night. 12oo Passage, strea
5. —	101,6	112	32			ked with blood.
7 A.M.						
12.30 M.						
1.30 P.M.						
2.30 "						Passage.
27. 7. —	102.2	120	28		" " "	Complains of pain in
5. —	100.2	104	30			Abdomen.
7.30 A.M.				Medicine.		
28. 7. —	108.2	116	30	Sponge bath 8 A.M.	" " "	Visited by Brother -
5. —	102.2	120	36			in - Law.
12.30 M.				Medicine.		
5.45 P.M.						Groaning, complains
6.30 "				"		of pain in abdomen.
7. P.M.						Still groaning etc.
29. 7. —		124	36		" " "	
5. —	100.6	128	44			
2.30 A.M.						Was taken with se-
7 "				"		vere pain in stomach
12.30 M.				"		and bowels was very
6.30 P.M.				"		restless during night.
7.30 A.M.						Suffering from pain
						in abdomen. applied
						hot cloths.

Recorded by T. R. Spellane Nurse.

Personal and Medical History of Michael Murphy D

From 252.

Nov 1/95 C
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Nels. H. Helland

CASE RECORD.

Patient's Name Nels H Helland Name Disease ..... Name Physician .....

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
May 19 7 A.M.	102.8	122	35	8 A.M. Bath.	On Special diet	Night-10.30 Had a very hard coughing spell.
5 P.M.	101.6	114	29			
7 A.M.				Medicine	Egg nog 6.30 P.M.	
1 P.M.				"		
20. 7 A.M.	103	122	32		" " "	
5 P.M.	98	102	28			
7.30 A.M.				"		
1.30 P.M.				"		
21. 7 A.M.	103.8	120	33	8 A.M. Sponge bath.	" " "	
5 P.M.	103.2	118	33			
7 A.M.				Medicine.		
10 P.M.				"		
7 "				"		
22. 7 A.M.	100.6	120	20		" " "	Seemed quite weak all night.
5 P.M.	102.4	108	30			Bowels moved.
3.30 A.M.						
7. "				"		
1 P.M.				"		
2 "						
3 "					" "	
7 "				"		Is passing some blood from bowels.
2.30 "					" " "	Hemorrhage from rectum.
23. 7. —	102.	116	26			Night. Very restless and
5. —	101.6	114	26			noisy while awake.
7 A.M.				"		
1 P.M.				"		
6.30 "				"		
24. 7. —	102.2	124	28			
5. —	102.2	128	30		" " "	Night 12.30 Passage.
7.30 A.M.				"		
1 and 6.30 P.M.				"		

Recorded by T. A. Spillane Nurse.

Personal and Medical History of Michael Murphy D

From 254.

1893

Nov 1 Ch

Nels. H. Helland

CASE RECORD.

Patient's Name Nels H. Helland Name Disease Name Physician

Date	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
May 13. 7.30 A.M.				Medicine.	On special diet	Night-Coughed a great deal.
1.30 & 6.30 P.M.				" 1.30 Wine ½		
11.30 "					Egg nog 6.30 P.M.	Bowels moved.
14. 7 "	99.6	108	24			
5 P.M.	101.4	112	29		" " "	
15. 7 A.M.		24		Medicine.		
5 P.M.		29		"		
7 "				"		
16. 7 —	101.2	108	38		" " "	Night Restless. Coughed all night.
5 —	100.4	96	29			
7 A.M				"		
10 P.M				"		
7 "				"		
17. 7. —	99.8	108	26		" " "	Night. Bowels moved.
5. —	99.4	102	28			
7 A.M				"		" "
10 P.M				"		
7 "				"		
18. 7 —	102.4	120	32		" " "	Night. Very restless.
5 —	101.8	102	25			
7 A.M				"		
10 P.M				"		
9.30 A.M						Bowels moved, streaked with blood. Appears very weak to day. Has taken but little nourishment

Recorded by J. A. Spillane Nurse.

Personal and Medical History of Michael Murphy D

Room 25.

Nels. H. Helland

CASE RECORD.

Patient's Name Nels H Helland. Name Disease ..... Name Physician .....

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
May 1894						
1. X 7 AM	101.2	92	29		On special diet	Had several severe Coughing spells during night
5 PM	104	116	28			
6.30 "					Egg nog.	Weight 100 lbs.
2. 7 AM	101	100	29		" "	
5 PM	103.2	118	27			
3. 7 AM	101.2	112	28		" "	
5 PM	103.2	110	27			
4. 7 AM	101.8	100	26		" "	
5 PM	102.6	108	32	1 and 7 P.M. Gave medicine		
5. 7 AM	101.2	112	26	7 A.M. 1 P.M. 7 P.M. " "	" "	
5 P.M.	103	114	33	8 " Bath		
6. 7 A.M	102	100	29	7.30 A.M. 1.30 and 7 A.M. Medicine	6.30 Egg-nog	9 P.M. Coughing spell.
5 PM	102.6	108	32			9 a.m. Severe " "
7. 7 —	101.2	116	27	Medicine 7 A.M.	" "	
5 —	99.8	96	29	" 1 P.M.		
8. 7 —	103	116	32	" 7 A.M	" "	
5 —	100.8	106	29	" 1 P.M.		
				" 7 "		
9. 7 —	102.6	116	28	" 7 A.M	" "	
5 —	99	92	25	" 1 P.M.		
10. 7 —	104	134	32	" 7 A.M.	" "	Had very hard coughing spells during night.
5 —	98.8	80	23	" 1 and 6.30 P.M.		
11. 7 —	103.2	120	35		" "	
5 —	102.6	102	28			
6.30 A.M.				"		
12. 7 —	102.6	100	27	8 a.m. Bath.	" "	Refused his food this morning.
5 —	103	102	30			
1 P.M				"		
7 "				"		
13. 7 —	100.2	110	22			
5 —	104	116	31		" "	

Recorded by T. R. Spillane Nurse.

Personal and Medical History of Michael Murphy D

Room 252.

Nels N. Helland

...etter, but he is yet quite lame. Appetete continues poor & he seems quite we...

...1/94. Lt 128½ (still loosing considerably in flesh). Pulse 98. Apl 6/94. Sick in bed - Pulse 95. -

" 7/8 Appetite poor. Patient has a dry cough. Apl 7/94. Pulse 92. T 100. Apl 8/94. Pulse 98 T 102. Appetite

" 9 Continues very poor. April 9/94. Pulse 98. T 103.2. Was, today, transferred to C. The sick ward, and was

" 30 put to bed three. Coughs & raises sand phlegm. Complains of pain in left lung. April 30/94. So steadily confined to his bed. Has been sleeping, in the average, about 6 hours nightly. His rest is much disturbed by coughing spells which are quite severe. These also trouble him by day. Complains, quite often, of pain in lung, also of pain in stomach; bowels have been fairly regular. Appetite is improving some, of late. Patient appears to be growing weaker, daily (see Nurse's record attached). —

May 1 May 1/94. Had several severe "coughing spells" during the night. Wt. today, 100 lbs. (Has lost very markedly

" 14 in flesh, the past month) May 14/94. Continues to have some bad "coughing spells" by day & by night. He

" 15 refused his food, this morning. Patient is on special diet, Eggnogs &c. May 15/94. Is restless, at night,

" 18 and has some severe "coughing spells". Bowels are irregular. May 18/94. Bowels moved freely, the past

2 nights. Was very restless, last night. At 9.30 Am, had a passage; same streaked with blood;

" 19 Patient appears very weak today, has taken but little nourishment. May 19/94. At 10.30 last night

" 22 he had a very bad "coughing spell". May 22/94. Seemed quite weak, all night. Bowels moved.

Is passing some blood, from bowels, this evening: Had hemorrhage of the nose, last night. —

" 23/24 May 23/94. Was very restless, last night, and noisy, while awake. May 24/94. A passage, last night.

" 25/26 May 25/94. Was very restless while awake, last night. Appears quite weak, today. May 26/94. Had

" 27 a passage, streaked with blood, during the night. May 27/94. Complains of pain in abdomen

" 28 May 28/94. Visited by his brother-in-law. 5.45 Pm. Groaning: 6.30 Pm. Complains of pain in abdomen.

" 29 7 Pm. Still groaning &c. May 29/94. 2.30 Am. Was taken with severe pain in the stomach, and bowels; was very restless, during night. Suffering from pain in abdomen; applied hot cloths. 7 Am - 12.30 M. Continued to suffer from pain in abdomen - applied hot cloths. 6.30 Pm. Pain

" 30 seems to have been relieved by such application. May 30/94. 1 Am. Is in great pain and groaning. Is very weak & failing fast. 1.45 Am. Continued to sink rapidly and died at this hour (see attached Nurse's record).

— Died —

Personal and Medical History of Michael Murphy

D

Room 252.

1893

Nov 1/...

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From 70 —

Nels N. Helland

Vol 20/17.
3072

DETAILED HISTORY OF SICKNESS OF MR. Nels N. Helland.
DIAGNOSIS.

1894 C2

DATE	HOUR	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
April 9	5	84		28			102.2	Came over ward from B. 1 Sick Put to bed. Coughs and raises some phlegm Complains of pain in left lung.
10	7	5	108	96	28	24	103	102.4	Coughed Considerable during night. Cough Considerable. Appetite not very good Bowels fairly good Condition.
11	7	5	102	106	28	30	102.8	103.4	7 A.M. Hemorrhage from nose. Coughs Considerable, and appears weak.
12	7	5	100	100	32	32	102.8	103.4	Has slept Quite a little to day. at times Coughs quite hard.
13	7	5	104	104	28	26	102.4	102.8	
14	7	5	92	108	24	28	100.6	103	
15	7	5	100	104	26	28	101.4	102.4	8 a. m. Complains of pain in Stomach Has gone quite hard Coughing spells.
16	7	5	102	82	28	30	101.6	101.6	
17	7	5	92	102	24	28	101.6	103.2	Night. Has had a hard coughing spells. Day Coughs Considerable. Respirations Craves by morning and afternoon seems to have some difficulty in breathing. Appetite not very good.
18	7	5	92	96	24	32	100.4	103	Slept on an average right thro from 9 to 5½ hours.
19	7	5	90	94	22	32	101.4	102	Appears to be growing weak daily. Poor Eat.
20	7	5	100	90	28	26	101	101.6	
21	7	5	100	90	26	24	102	100.4	Cough slightly during night at intervals.
22	7	5	108	96	26	26	102.8	101.4	Coughing a great deal to day.
23	7	5	104	88	26	24	101.8	101.8	Very quiet during the night.
24	7	5	104	92	28	2	101.8	101.4	3.45 A. M. Coughing spell.
25	7	5	108	94	30	25	100	101.2	Night - Two slight Coughing spells. Appetite Improving. Bowels regular. Coughs Considerable.
26	7	5	100	118	32	25	102.2	102.2	Had two Coughing spells during night. Back quite sore.
27	7	5	100	96	25	28	101.4	103.2	Night 1-2.30 And three of Coughing. Very quiet all day. Has Cough Not a little.
28	7	5	92	100	26	25	100.4	103.4	
29	7	5	84	98	28	28	100	103.4	2.30 a.m. Severe Coughing spell.
30	7	5	100	108	34	28	102.2	103.2	Very weak and Coughing Considerable. 10.30 P.M. Had Coughing spell.

From 252.

Personal and Medical History of Michael Murphy

Vol 20
3182.

DETAILED HISTORY OF SICKNESS OF MR. Mr Murphy
DIAGNOSIS.

1893-4 C.2.

November — 93.

DATE	HOUR	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
Dec 25	7	5	70	24				
26	7	5	60	68				Appetite not very good Bowels regular
27	7	5	66	68				
28	7	5	70	65				Ate no breakfast
29	7	5	66	70				Gave Pills
30	7	5	60	62				Appetite very poor Sleeps well Bowels Irregular
31	7	5	66	70				
Jan 1	7	5	70	28				Complains of feeling cold at times
2	7	5	72	80				
3	7	5	84	90				Eats but very little Conversses quiet Feels Bowels regular
4	7	5	100	90				
5	7	5	96	100				Ate no breakfast
6	7	5	108	110				Appetite not very good Bowels Irregular
7	7	5	128	100	28		101.2	
8	7	5	120	125	34		100	Lies on his steady talks quite rational
9	7	5	130	130	36	48	102.6	103.2 Has the least power of his limbs. Complains of cold at times
10	3.20							Appetite same Feels Bowels regular.
								Has been getting to get up and dress Drinks tea coffee &c says they are not good.

Rom 70 — Nels N. Helli...

1894 cont'd

March 31 ...

Apl 2/6 ...

" 7/8 ...

" 9 ...

" 30 ...

May 1 ...

" 12 ...

" 15 ...

" 18 ...

" 19 ...

" 24 ...

Dec 20/17.

3072

DETAILED HISTORY OF SICKNESS OF MR. Nels N. Helland
DIAGNOSIS.

1894 C 2

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Apl 6		5		84		28		102.2	Came upward from B. 1 Sick Rattle bed. Coughs and raises some phlegm Complains of pain in left lung.
7	7	5	98	76	28	24	103	102.4	Cough Considerable during night.
8	7	5	102	106	28	30	102.8	103.4	Cough Considerable. Appetite not very good. Bowels full, good Condition.
9	7	5	102	100	32	32	102.8	103.4	7 A. M. Nasal discharge from nose. Coughs Considerable and appears weak.
10	7	5	104	104	28	26	102.4	102.8	Has slept Considerable today at times cough quite hard.
11	7	5	92	108	24	28	100.6	103	
12	7	5	100	104	26	28	101.4	102.4	8 a. m. Complains of pain in stomach Has done quite hard coughing spells.
13	7	5	102	82	28	30	101.6	101.6	
14	7	5	92	102	24	28	101.6	103.2	Night - Has had a hard Coughing spells. Day Cough Considerable. Respirations increased by moving in bed. Attempts to Raise some difficulty in breathing. Appetite not very good.
15	7	5	92	96	24	32	100.4	103	Slight increase in weight from April 9 to 15 5 lbs four.
16	7	5	90	94	22	32	101.4	102	Appears to be growing lean daily. Ate but little.
17	7	5	100	90	28	26	101	101.6	
18	7	5	100	90	26	24	102.6	100.4	Cough slightly during night at intervals.
19	7	5	108	96	26	26	102.8	101.4	Coughing a great deal to day
20	7	5	104	88	26	24	101.8	101.8	Very quiet during the night.
21	7	5	104	92	28	24	101.8	101.4	3.40 A. M. Coughing spell.
22	7	5	108	94	30	28	100.4	101.2	Night - Two slight Coughing spells. Appetite improving. Bowels regular. Cough Considerable.
23	7	5	100	118	32	28	102.2	102.2	Had two Coughing spells during night. Back quite sore.
24	7	5	100	96	26	28	101.4	103.2	Night - 2.30 A.M. had spell of Coughing Very quiet all day. Had Cough but little.
25	7	5	92	100	26	28	100.4	103.4	
26	7	5	84	98	28	28	100	103.4	2.30 a.m. Fever. Coughing spell.
27	7	5	100	108	34	28	102.2	103.2	Very quiet and Coughing Considerable. 10.30 a.m. Had Coughing spell.

Medical History of Michael Murphy

(a loss of 3 pds. in past month). Jan 11 93. Apparently sleeps well, at night ... he occasionally refuses breakfast. Bowels regular. Lit...

3182

DETAILED HISTORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS.

1893 C 25

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Nov 28	7	5	72	72					November - 93. Appetite not very good. Bowels regular.
29	7	5	74	72					
30	7		70						Ate no breakfast.
Dec 1	7	5	60	70					Have Cold.
2	7		76						Appetite very poor. Sleeps well. Bowels regular.
3	7	5	62	70					
4	7	5	70	70					Complains of being cold at times.
5	7	5	60	76					
6	7	5	64	78					
7	7	5	64	70					Eats but very little. Conscious quiet. Daily Bowels regular.
8	7	5	70	68					
9	7	5	80	68					
10	7		60						Ate no breakfast.
11	7	5	76	72					
12	7		84						Appetite not very good. Bowels regular.
13	7	5	66	64					
14	7	5	72	64					Lies on back steadily. Talks some incoherent.
15	7	5	60	76					
16	7	5	65	70					Has but little power of his limbs.
17	7	5	70	74					
18	7	5	64	74					Complains of cold at times.
19	7	5	68	67					
20			66	70					
21	7	5	68	65					Appetite small. Bowels regular.
22	7		70						
23									
24	7	5	72	84					Has been getting to get up and dress. Drinks tea coffee or soup. They are not good.

Ward 70 — Nels N. Ole

Vol 20/17.

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DETAILED HISTORY OF SICKNESS OF MR. Nels N. Stee
DIAGNOSIS.

1894 Oct 2

DATE	HOUR	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Apl 19	5	84		28			102.2	Can pro-ward from B. 1 Sick Put to bed. Coughs and raises some phlegm. Complains of pain in left lung.
20	7	5	101	96	28	24	103	102.4 Coughed Considerable during night. Coughs Considerable. Appetite not very good. Bowels fairly good Condition.
21	7	5	102	106	28	30	102.8	103.4 7 A. M. Hemorrhage from nose. Coughs Considerable and appears weak.
22	7	5	100	100	32	32	102.8	103.4 Has slept Quite a little during day. At times Coughs quite hard.
23	7	5	104	104	28	26	102.4	102.8
24	7	5	92	108	24	28	100	103
25	7	5	100	104	26	28	101.4	102.4 8 a. m. Complains of pain in stomach. Has some quite hard Coughing spells.
26	7	5	102	82	28	30	101	101.6
27	7	5	92	102	24	28	101	103.2 Night. Has had a hard Coughing spell. Day. Coughs Considerable. Respirations Cramped by moving in bed. Attempts seems to have some difficulty in breathing. Appetite not very good.
28	7	5	92	96	24	32	100.4	103 Left lung average roughly from April 9 to 19th 5½ fours.
29	7	5	90	94	22	32	101.4	102 Appears to be growing weak daily. Poor Eater.
30	7	5	100	90	28	26	101	101.6
21	7	5	100	90	26	24	102	100.4 Cough Slightly during night at present.
22	7	5	108	96	26	26	102.8	101.4 Coughing a great deal to day.
23	7	5	104	88	26	24	101.8	101.8 Very quiet during the night.
24	7	5	104	92	28	2	101.8	101.4 3.40 A. M. Coughing spell.
25	7	5	108	94	30	28	100	101.2 Night. Very light Coughing spells. Appetite Improving. Bowels regular. Cough Considerable.
26	7	5	100	118	32	28	102.2	102.2 Had two Coughing spell during night. Each quite severe.
27	7	5	100	96	25	28	101.4	103.2 Night 1.30 A.M. had spell of Coughing. Very quiet all day. And Cough Just little.
28	7	5	92	100	26	25	100.4	103.4
29	7	5	84	98	28	28	100	103.4 2.30 a.m. Severe Coughing spell.
30	7	5	100	108	24	28	102.2	103.2 Very weak and Coughing Considerable. 10.30 P.M. Bad Coughing spell.

May 1 · 17 · 15 · 18 · 19 · 24 · 23/24 · 25/26 · 27 · 28 · 29 · 30

Medical History of Michael Murphy D

(a loss of 3 pds. in past month). Nov 15/93. Apparently sleeps well at night. for the occasionally refuses breakfast [illegible]

31 82

DETAILED HISTORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS.

November — 93

DATE	HOUR	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Nov 1	7	6	64	72				Appetite not very good Bowels irregular
2	7	6	76	72				
3	7	6	80	70				Ate no breakfast
4	7	6	78	74				Some better
5	7	6	70	68				Appetite very poor. Sleeps well. Bowels Irregular
6	7	6	78	72				
7	7	6	68	70				Complains of feeling cold at times.
8	7	6	64	70				
9	7	6	66	70				Eats but very little. Conscious quiet
10	7	6	70	72				Fairly Bowels regular.
11	7	6	72	78				
12	7	6	68	70				Ate no breakfast
13	7	5	68	70				
14	7	5	60	66				Appetite not very good. Bowels regular.
15	7	5	60	68				
16	7		66					
17	7		66					Lies on his back steadily talks quite rational.
18	7	5	74	74				
19	7		63					Has the last power of his limbs.
20	7		84					
21	7	5	66	78				Complains of cold at times
22	7	5	76	66				
23	7	5	62	67				Appetite small Tells Bowels regular.
24	7	5	70	66				
25	7	5	64	66				
26	7	5	68	68				Has been asking to get up and dress Drinks tea coffee at any time they are not good.
27	7	5	74	76				

C

Nels A. Helland

From 7

1894 cont'd

March 31

Apl 2/6

" 7/8

" 9

" 30

May 1

" 12

" 15

" 18

" 19

" 24

" 25

" 27

" 28

" 29

" 30

Personal and Medical History of Michael Murphy

D

From 252.

1893

Nov 1/93 Nov 1/93. Wt 95 lbs. (a loss of 3 lbs. in past month). Nov 15/93. Apparently sleeps well at night. Appetite is very poor & occasionally refuses breakfast. Bowels regular. At times, makes his old Complaint "of feeling cold"; Converses quite freely. Nov 27/93. Lies steadily & quietly in bed, all along; appetite is somewhat better of late. Talk seems quite rational. Patient has but little power in his limbs. He has been asking, for some time, to be allowed to get up & dress. Drinks no coffee or tea; says "they are not good". (See attached clinical records). Nov 28/93. Can see but very little change, from day to day. Nov 30/93. Continues about the same. Sleeps from 5 to 7 hours, nightly.

Dec 3/93. Complains, today, of a paralytic feeling in left side. Dec 4/93. Wt 94 pounds. (Patient is losing in flesh). Dec 10/93. Appetite fairly good. Bowels regular. Talks quite freely, at times. Dec 15/93. Appetite continues fairly good. Bowels regular. Complains of the Cold. Says "it brings on a paralytic feeling". Dec 21/93. Patient sleeps from 5 to 7 hours, nightly, as a rule. Dec 22/93. Ate no supper, this evening. Dec 26/93. Has been quite restless for some days past. Does not talk as much as usual & sleeps a great deal, during the day. Dec 31/93. Since last noted, has been sleeping rather poorly, only 4 to 6 hours, nightly. Does not seem as bright, of late, as in the past.

Jany 2/94. Appetite fairly good. Bowels regular. Talks quite rationally, at times. Weight, today, 96 pounds. Jany 3/94. Not so well as usual. Ate nothing today. Appears as though a paralytic stroke was coming on. Jan 4/94. Has lost control of left leg and arm; also has a bed sore coming on. Appears quite Stupid. Visited by Rev. Father Riordan. Jan 5/94. Appears some better this morning: Is taking a fair amount of nourishment. — Jan 6/94. 10 A.M. Cannot pass his urine. Bladder quite full. About 2 quarts drawn from him by Dr. Eby. Appears very Stupid, today. Takes nothing but eggnog. Jany 7/94. Had about 3 pints of urine drawn from him, today. Jan 8/94 Again drew 3 pints of urine from him, today; same was of a dark red color & of a very bad odor. Bed sore is growing larger & deeper. Respiration very hard and rapid. Patient appears to be failing. Jan 9/94. He appears some brighter, this morning. Talks a little, at times. Takes a little stimulant. About a quart of urine drawn from him. 9 P.M. Has taken some wine. Respiration hard & labored. Throat seems to be filled up with phlegm. 1 P.M. About a quart of urine drawn from him. (See attached Record) — January 10/94. Patient continued to fail during the night, and died at 3.20 A.M.

Friends were advised by telegram of his death. Remains were removed by a brother.

— Died —

Personal and Medical History of Charles Swanson #2

Whole No. 3066

Residence, 205 Smith St. St. Paul, Minn

Date Admission, 2nd July 1892

Admitted by, Dr. A. F. Kilburne Hour, 7.00 PM

How Sent, John. B. Olivier J.P. Ramsey County

Sex, Male

Age, 28

Civil Condition, Single

Children, none

Age Youngest Child, —

Occupation, Carpenter

Degree Education,

Profession Religion, Not a church member

Habits, Seem good.

Nativity, Sweden

Physicians Committing, Geo. J. Hanley ; Oride Martel

Correspondents,

Brother's address John Swanson, North Oaks, Minn

No. for Year, 283

Insane Relatives, none

Cause Exciting, Religion supposed to be.

Cause Predisposing,

Form, acute mania (delirious)

Accompanying Bodily Disorder,

Suicidal or Not, no; but has threatened it.

Date of this Attack, about July '90

Duration, 2 years or so.

No. of Attack, 1st (is acute in form)

No. of Admissions,

Age First Attack, 26

Time of Leaving, Sept. 7th '92,

Time in Hospital, 2 m. 5 d.

Result, Improved

EXAMINATION ON ADMISSION.

Exd by Dr. Baker, July 9/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, at present somewhat sluggish

MEMORY:

Past Events,

Recent Events, probably poor

Special Subjects,

PERCEPTIVITY:

Alert or Dull, ordinary observation slight; answers questions hesitatingly;

Correct or Illusive, realizes own condition poorly.

REASONING POWER:

Ordinary Subjects, } Probably Entirely suspended

Own Mental State, } at present.

Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

Is probably temperate; Refuses to try "tests", thinking that Dr. is fooling him. Resists being moved from place to place; resists examination; Hesitates to answer questions; Answers in fewest words possible, in indistinct and unanimated tones;

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, has been;

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, That he is God or Jesus.

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent, Talks very little; answers usually relevant. (pays very little attention to those about him, sitting with eyes closed, in fixed position). Has at times talked quite freely.

Personal and Medical History of Charles Swanson #2

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6½ in WEIGHT, 123 pounds (on adm.) NUTRITION, Rather poor; is pale.

WOUNDS OR ABNORMALITIES, has some bruises on body.

TONGUE, Tremors, yes Coatings, yes Promptness Movement, slow, hesitating

PUPILS, Equality, Equal Size, somewhat dilated

Response Light, some Accommodation, yes

SIGHT, probably good

HEARING, probably good

COORDINATION, Arms, by tests seem good

Legs, " " "

TREMORS, Hands, Tongue, yes

Facial Muscles, General,

REFLEXES, Patellar, equal; slightly exaggerated.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, no; fairly good.

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Good

LUNGS, Seems normal

July 23/92 EXAM. URINE, Color light yellow; reaction acid; Spec. grav. 1030; albumen, none; urea 1.6%; sediment,

Dr M. some cloudy —

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, yes Careless,

BOWELS, Normal, Constipated, some Irregular,

APPETITE, Good, Medium, Poor, and irregular

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow, probably.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Charles Swanson #2

1892. This man was brought by Deputy Sheriff Kinney and R. Palen (attendant at this Hospital) with the following history; Insanity was first manifested about two years ago and is now manifested in subject of religion; has shown no disposition to injure others; has threatened suicide; no disposition to filthy habits, destruction of clothing &c.; did not shew any peculiarities of temper, habits &c before the symptoms of insanity appeared, nor any predominent passion, religious impressions &c. Was two days in jail before being brought here; Has not been under medical treatment.

July 3 July 3/92. Was very noisy; talking, crying, & restless, yawning and kicking and wriggling around on the floor; got out of bed very often and resisted strenuously being put back. Slept none at all. Had been comparatively quiet at the hour of admission. AM. Denudes himself; is excited and noisy and is shut in a room. Tongue is coated. 4 PM Pulse 111.

" 4 July 4/92. Was extremely noisy nearly all last night, sleeping but one hour. AM. Pulse 101. (& when quiet). T(R) 101·5; has refused breakfast, but drank a little milk. PM. Pulse 98. —

" 5 July 5/92. Was extremely noisy again and slept but about one hour, last night. AM. Bowels moved yesterday, passage quite hard. Is out in the hall, dressed. Will say nothing. Straightens himself out and stiffens himself rigidly, by spells. In these spells, pulse is 114 to 120; rather unwilling drinks some milk, fairly willingly, and quite suddenly resists taking any more. Takes no other food. PM. Pulse 128. T(R) 101·2. Drank some milk.

" 6 July 6/92. Not so loudly noisy, but restless, sleeping but 2 hours, last night. Has a hypodermic at bed-time. AM. Is restrained in bed today; not making much effort to get out. Pulse 84, quite strong. T(R) 102. Drank some milk but took no other food. Is constipated. PM. Soup; drank milk quite freely; will not say much. Pulse 96. Strikes by-standers without warning.

" 7 July 7/92. Quite noisy all last night, and out of bed, sleeping once at all. AM. Pulse 98. T(R) 98.6. Soup, dressed, but lies upon a bench. Pulse 78. Bowels moved fairly well. PM. Pulse 96. T(R) 98.8. Ate with the rest of men in dining-room today. Talks a little. Still stiffens himself out occasionally. ——

" 8 July 8/92. Was quiet and slept 9 hours last night. AM. Is in his room lying on a mattress, eyes are closed. Pays very little attention to the entrance of others. Refuses to keep his clothes on. Ate irregularly but quite well, at times. PM. Talks, when on his feet, apparently making no effort to stand. Lies quietly in bed. Eats — AM. Pulse 76. T(R) 98.6. PM. Pulse 84. T(R) 98.6. —

" 9 July 9/92. Somewhat restless and slightly noisy, sleeping 7 hours last night. AM. Is on the hall and comparatively quiet. Pulse 86. T(R) 98.8.

" 10 July 10/92. Restless for no hours, sleeping 8 hours, last night. AM. Pulse 80. PM. Pulse 64.

" 11 July 11/92. Slept 9 hours last night. AM. Pulse 66. PM. Pulse 66.

" 12 July 12/92. Slept 9 hours last night. Is constipated and was given pills. AM. Pulse 66.

" 13 July 13/92. Slightly restless one hour, sleeping 8 hours last night. AM. Bowels have not moved.

" 15 AM. Pulse 72. PM. Pulse 67. July 15/92. Has slept well the past two nights. Pulse normal. Has eaten quite well, but refused supper last night and breakfast today. Has been moved to C[2] —

" 18 Is constipated. July 18/92. Sleeps well nightly. Eats well & regularly. July 22/92. Is eating

#2

DETAILED HISTORY OF SICKNESS OF MR. Chs Swanson
DIAGNOSIS .

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
July 14		6 30		50		18			admitted 1 PM July 14th attended by Moore
" 15	7		52		15				refuses food
									can not be coaxed to eat. eat neither
									coffee or breakfast bot. forty dinner

Room 3 #11. Louis Swanson

Feb 30 1893 — Now become excellent. Talks little, but intelligibly. Weak-minded & childish. Well. Hard up, with the ball, for hours, at a time. Habits cleanly.

Oct 3/31 — Oct 3/93. A decided gain (17 pounds) in weight, shown during past 4 weeks. Oct 31/93. Well-behaved. Works well. Habits cleanly. Is allowed to be allowed to leave Hospital. Nov 2 93 Wt 160 Pulse 70. Nov 29. Appetite very good & fast abnormal, while 4 mos ago he could not be induced to eat scarcely anything. Weight increased 17 lbs. Sept 4 to Oct 6th. Bowels reg. Quiet & well behaved. Anxious to work. Is very timid & afraid to offend. Talks little but rationally. Habits clean. Dec 2 93 Wt 176 Dec 30 93 No change since 1 94 Wt 162 lbs. P 74. Eye quite free. Discharge. Antiseptic wash provided.

Jany 10/31 — Jany 10/94. Wash applied to eye with marked improvement. Discharge almost gone. Jany 31 94 Only a slight discharge from Eye. Otherwise no change. Feb 1/94. Wt 159½ lbs. Pulse 68. —

Feb 28/94. Appetite good; bowels free. Bodily health seems good. Behavior is good; he makes no complaints. Talks, when spoken to, in a rational manner. Is very timid & nervous. Wishes to get out & make money to send home to his family. Is very eager to work & is always busying himself this way, on the ward. Has to be watched closely as he is inclined to run away. Patient appears to be childish & simple-minded. Habits are cleanly. His eye seems very much improved. —

Mar 1 — March 1/94. Wt 151 lbs (has lost considerably in flesh, the past month, yet does not complain of any ill feeling). " 31 Pulse 92. Was successfully vaccinated on 26th Febry. March 31/94. No noticeable change, this date.

Apl 1/30 — April 1/94. Wt 158 lbs. (has about regained his lost weight). Pulse 68. April 30/94. No change, to note.

May 1 — May 1/94. Wt 160 lbs. Pulse 72. June 1/94. Wt 159 lbs. (quite a gain in flesh during month); Pulse 68

July 2/3 — July 1/94. Wt 158 " " 80. July 31/94. Patient is quiet & timid; makes no complaints. Works well at hall; when not working, stands about; cannot be got to sit down. He has begun, of late, to talk considerably more than heretofore but in a much more irrational manner. Speech incoherent & rambling. Habits clean. Health good.

(Carried to Transfer Book A page 128)

1892. This man was brought by Deputy
at this Hospital with the following his
about two years ago and is now ma
shown no disposition to injure others; has
filthy habits, destruction of clothing &c.; de per,
habits &c before the symptoms of insanity ap passion,
religious impressions &c. Was two days in jail. ce; Has not
been under medical treatment.

July 3 July 3/92. Was very noisy; talking, crying, & restless, pawing ing and wriggling around on the floor; got out of bed very often and resisted strenuously being put back. Slept none at all. Had been comparatively quiet at the hour of admission. AM. Denudes himself; is excited and noisy and is shut in a room. Tongue is coated. 4 PM. Pulse 111.

" 4 July 4/92. Was extremely noisy nearly all last night, sleeping but an hour. AM. Pulse 101. (At. when quiet). T(e) 101·5; has refused breakfast, but drank a little milk. PM. Pulse 96. —

" 5 July 5/92. Was extremely noisy again and slept but about an hour, last night. AM. Bowels moved yesterday, passage quite hard. Is out in the hall, dressed. Will say nothing. Straightens himself out and stiffens himself rigidly, by spells. In these spells, pulse is 114 to 120; rather excited. drinks some milk, fairly willingly, and quite suddenly resists taking any more. Takes no other food. PM. Pulse 128. T(e) 101·2. Drank some milk.

" 6 July 6/92. Not so loudly noisy, but restless, sleeping but 2 hours, last night. Has a hypodermic at bed-time. AM. Is restrained in bed today; not making much effort to get out. Pulse 84, quite strong. T(e) 102. Drank some milk but took no other food. Is constipated. PM. Soup; drank milk quite freely; will not say much. Pulse 96. Strikes by-standers without warning.

" 7 July 7/92. Quite noisy all last night, and out of bed, sleeping once at all. AM. Pulse 98. T(e) 98.6. Is up, dressed, but lies upon a bench. Pulse 78. Bowels moved fairly well. PM. Pulse 96. T(e) 98.8. Ate with the rest of men in dining-room today. Talks a little. Still stiffens himself out occasionally. ———

" 8 July 8/92. Was quiet and slept 9 hours last night. AM. Is in his room lying on a mattress, Eyes are closed. Pays very little attention to the entrance of others. Refuses to keep his clothes on. Ate irregularly but quite well, at times. PM. Falls, when on his feet, apparently making no effort to stand. Lies quietly in bed. Eats — AM. Pulse 76. T(e) 98.6. PM. Pulse 84. T(e) 98.6. —

" 9 July 9/92. Somewhat restless and slightly noisy, sleeping 7 hours last night. AM. Is on the hall and comparatively quiet. Pulse 86. T(e) 98.8.

" 10 July 10/92. Restless for no hours, sleeping 8 hours, last night. AM. Pulse 80. PM. Pulse 64.

" 11 July 11/92. Slept 9 hours last night. AM. Pulse 66. PM. Pulse 66.

" 12 July 12/92. Slept 9 hours last night. Is constipated and was given pills. AM. Pulse 66.

" 13 July 13/92. Slightly restless one hour, sleeping 8 hours last night. AM. Bowels have not moved.

" 15 AM. Pulse 72. PM. Pulse 67. July 15/92. Has slept well the past two nights. Pulse normal. Has eaten quite well, but refused supper last night and breakfast today. Has been moved to C[2] —

" 18 Is constipated. July 18/92. Sleeps well nightly. Eats well & regularly. July 22/92. Is eating

and sleeping well; works some in dining-room.

Aug 3/92. Weight 118 pounds. On the 5th was weighed 111 pounds. Aug 5/92. Visited today by his brother.

Aug 9/92. Continues quiet at night and sleeps well. Is quiet, clean, tidy and well-behaved by day. Takes food regularly and in fair quantities. Bowels are regular. Is inclined to be depressed, but very quiet, saying almost nothing, at times; again, talks a little more freely. Has been quite thin and pale, but is gaining some in flesh. Walks a little. Goes walking. Wrote me letter to his brother. Sept 2/92. Has been quiet at night and has slept quite well — 7 to 8 hours, since the last note. Made improvement in mental and physical activity, in freedom of conversation, until recently, when he was, one day, injured somewhat by a fellow-patient; since which time he has not done any work and has been sullen and refused to talk much. Is evidently holding the offices responsible, in his own mind. Injury is a slight one. Bodily health seems to be slightly improved.

Sept 5/92. Weight 119½ pds. Pulse 62. Sept 7/92. Has become a little livelier and more freely talkative; was today visited by his brother and taken home.

Discharged

From 3HH.

Louis Hedlund

1893 Dec 30 Confirmed. now become excellent. Talks little, but intelligibly. Weak-minded & childish. Will stand up, in the hall, for hours, at a time. Habits cleanly.

Oct 3/93. Decided gain (17 pounds) in weight, shown during past 4 weeks. Oct 31/93. Well-behaved. Works well. Habits cleanly. Is anxious to be allowed to leave Hospital. Nov 2/93. Wt 119 lbs 0 ozs.

Nov 2/93. Appetite very good & for past abnormal, while 4 mos ago he could not be induced to eat scarcely anything. Weight increased 17 lbs 4 Sept 4th & 6 Oct 6th. Bowels reg. Quiet and well behaved. Anxious to work. Is easy to lead & afraid to offend. Talks little but rationally. Habits clean. Dec 2/93. Wt 136 lbs 0 ozs.

Dec 30/93. No change since 1/94. Wt 162 lbs. Pupil. Eye quite sore. Discharge. Antiseptic wash provided.

Jany 10/94. Wash applied to eye with marked improvement. Discharge almost gone. Jany 31/94. Only a slight discharge from Eye. Otherwise no change. Feb 1/94. Wt 159½ pds. Pulse 68. —

Feb 28/94. Appetite good; bowels free. Bodily health seems good. Behavior is good; he makes no complaints. Talks, when spoken to, in a rational manner. Is very timid & nervous. Wishes to get out & make money to send home to his family. Is very eager to work & is always busying himself this way, on the ward. Has to be watched closely as he is inclined to run away. Patient appears to be childish & simple-minded. Habits are cleanly. His eye seems very much improved. —

March 1/94. Wt 158 pds (has lost considerably in flesh, the past month, yet does not complain of any ill feeling). Pulse 72. Was successfully vaccinated on 28th Febry. March 31/94. No noticeable change, this date.

April 1/94. Wt 158 pds. (has about regained his lost weight). Pulse 68. April 30/94. No change, to note.

May 1/94. Wt 160 pds. Pulse 72. June 1/94. Wt 159 pds. (Quite a gain in flesh, during month). Pulse 68.

July 1/94. Wt 158 " " 80. July 31/94. Patient is quiet & timid: makes no complaints. Works well at hall; when not working, stands about; cannot be got to sit down. He has begun, of late to talk considerably more than he did before but in a much more irrational manner. Speech incoherent & rambling. Habits clean. Health good.

(Carried to Transfer Book A page 178)

Personal and Medical History of R. H. Harvey

Whole No. 3067.

Residence, St. Paul, Minn

Date Admission, 2nd July 1892.

Admitted by, Dr A. F. Kilbourne Hour, 7.00 PM

How Sent, Jno. B. Olivier. J.P. Ramsey Co

Sex, male

Age, 35

Civil Condition, single man

Children, -

Age Youngest Child, -

Occupation, R. R man

Degree Education,

Profession Religion, not a church member

Habits, Good

Nativity, N. Y.

Physicians Committing, A. Macdonald & J.B. Brimhall

Correspondents,

Address – Chas. A. Upright, 406 Iglehart St. St Paul. Minn "a friend"



No. for Year, 284

Insane Relatives, None (Insanity not hereditary)

discharged as Conductor + put back to brakeman

ing,

Dementia.

odily Disorder, dont Know

no

ck, about march last

4 months or so ago.

1st, so far as known

s, 1st

35

Apr. 26. 1900

Result, Transferred To Fast Sup

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exds by Dr. Baker, July 15/92.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Good, he says

Recent Events, some inaccuracy

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Fair, not close; answers questions

Correct or Illusive, promptly and to point; says he is not as he used to be"

REASONING POWER:

Ordinary Subjects, } somewhat in error.

Own Mental State, }

Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

Drank moderately up to 3 months ago. He realizes he is not as he ought to be; he says "it is due to his heart": he has had spells of weakness; felt as though blood was running from it; knew under him did not do their work properly, as the dealing of freight cars.

EMOTIONAL STATE:

Normal, Calm, appears quite calm;

Indifferent,

Exalted,

Depressed, somewhat

DELUSIONS:

Systematized or Not,

Special Subjects, of persecution

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, quite free

R. H. Harvey

(Autograph July 15th 1892).

DMISSION—(Continued.)

TERISTICS.

nds NUTRITION, Fairly good.

Promptness Movement, rather deliberate; x

Size, normal

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Finger to nose, Eyes shut, good;

Legs, Standing on foot, quite firm; standing, Eyes shut, steady; turning quickly, little unsteadiness

TREMORS, Hands, Tongue, Marked, coarse.

Facial Muscles, Some General,

REFLEXES, Patellar, Equal and decidedly exaggerated – s –

Other Reflexes,

ARTICULATION, Hesitating, Slurred, No. Clear and distinct.

FACIAL EXPRESSION, Normal

SENSIBILITY,

HEART, Normal

LUNGS, Good; expansion 3½ inches.

July 21/92 (Dr. Me) EXAM. URINE, Color good; reaction, acid; Spec. grav. 1028; albumen none.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, Some	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, began 3 years ago. ONSET GRADUAL OR SUDDEN, Slow; has some dizziness now.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother died at 45 – paralysis probably.

Father or Pat. Relations, Father dead;

Brothers or Sisters, Two brothers; one sister dead

Personal and Medical History of R. H. Harvey

Whole No. 3067.

Residence, St. Paul, Minn

Date Admission, 2nd July 1897.

Admitted by, Dr. A. F. Kilbourne Hour, 7:00 PM

How Sent, Jno. B. Olivier. J. P. Ramsey Co.

Sex, male

Age, 35

Civil Condition, single man

Children, x

Age Youngest Child, —

Occupation, R. R. man

Degree Education,

Profession Religion, not a church member

Habits, Good

Nativity, N. Y.

Physicians Committing, A. Macdonald & J. B. Brimhall

Correspondents,

address – Chas. A. Upright, 406 Iglehart St. St Paul. Minn "a friend"



No. for Year, 284

Insane Relatives, None (Insane discharged as Conductor,

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Dementia.

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no

ck, about march last

4 months or so ago.

1st, so far as known

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35

Apr. 26. 1900

Result, Transferred to Hastings

EXAMINATION ON ADMISSION.

Evid by Dr. Baker, July 15/97.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Good, he says

Recent Events, some inaccuracy

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Fair, not close; answers questions

Correct or Illusive, promptly and to point; says he "is not as he used to be"

REASONING POWER:

Ordinary Subjects, } somewhat in error.
Own Mental State, }
Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

Drank moderately up to 3 months ago. He realizes he is not as he ought to be; he says "it is due to his heart"; he has had spells of weakness; felt as though blood was running from it; men under him did not do their work properly, as the dealing of freight cars.

EMOTIONAL STATE:

Normal, Calm, appears quite calm;

Indifferent,

Exalted,

Depressed, somewhat

DELUSIONS:

Systematized or Not,

Special Subjects, of persecution

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, quite free

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 3in WEIGHT, 137½ pounds (usually 145 lbs.) NUTRITION, Fairly good.

WOUNDS OR ABNORMALITIES, Probably none.

TONGUE, Tremors, marked, coarse Coatings, slight Promptness Movement, rather deliberate; protrudes somewhat to one side.

PUPILS, Equality, Equal Size, normal

Response Light, yes Accommodation, yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Finger to nose, Eyes shut, good;

Legs, standing on foot, quite firm; standing, Eyes shut, steady; turning quickly, little unsteadiness

TREMORS, Hands, Tongue, marked, coarse.

Facial Muscles, None General,

REFLEXES, Patellar, Equal and decidedly exaggerated – 8 –

Other Reflexes,

ARTICULATION, Hesitating, Slurred, no. Clear and distinct.

FACIAL EXPRESSION, Normal

SENSIBILITY,

HEART, Normal

LUNGS, Good; expansion 3½ inches.

July 21/97 (Orme) EXAM. URINE, Color good; reaction, acid; Spec. grav. 1028; Albumen none.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, yes	Careless,
BOWELS, Normal,	Constipated, None	Irregular,
APPETITE, Good, yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, began 3 years ago. ONSET GRADUAL OR SUDDEN, Slow; has some dizziness now.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother died at 45 – paralysis probably.

Father or Pat. Relations, Father dead;

Brothers or Sisters, Two brothers; one sister dead

1892. This man was brought here by Deputy Sheriff Kinney and R. Palen (attendant at this Hospital). The following history accompanied the Warrant &c. The first symptoms of insanity were manifested about 4 months ago; this attack now has the form of dementia per seclusion. Insanity is now manifested by the delusion that he believes he is persecuted by certain persons. Has shown no disposition to injure others. Is not suicidal. No disposition to filthy habits, destruction of clothing &c. Before the symptoms of insanity appeared, showed strict aversion to Catholics. Is not subject to any bodily disease: no restraint or confinement has been employed; has not been under medical treatment.

July 3 July 3/92. Was very quiet all night, sleeping 6 hours. Am. Pulse 74.

" 4 July 4/92. Slept 8 hours last night. Am. Pulse 70.

" 5 July 5/92. Was quiet and slept 8 hours last night.

" 6 July 6/92. Again quiet, and slept 7 hours last night. Am. Pulse 70. Weight 138 pounds.

" 7 July 7/92. Slept 8 hours last night. Am. Pulse 64.

" 8 July 8/92. Slept 7 hours last night. Am. Pulse 86.

" 19 July 19/92. Has been quiet at night, apparently sleeping well. Pulse has been 92. 76. 104. 96. 70. 72. 62. 56. 62. 84 and so in the past 10 and present mornings.

Aug 3 Aug 3/92. Weight 135 pounds. Pulse 70.

" 10 Aug 10/92. Up to the 3d inst. was quiet at night and appeared to sleep well; since that date, while not restless, and not at all noisy, he has slept only from 2 to 4 hours, each night. Does not, however, seem to feel the effects of loss of sleep much. Has, at all times, been clean, very tidy and well behaved; walks the floor a good deal; rarely begins conversation, or addresses anyone, but, when spoken to, responds quietly and pleasantly and in a few words. Is not apparently depressed, and seems contented here. Has lost some in weight. Does not, however, complain of feeling bodily ailment.

" 15 Aug 15/92. Has a tendency to constipation. Tongue is white-coated and tremulous.

Sept 6 Sept 6/92. Continues quiet and has lately rested & slept better at night. Habits continue good. Says and does almost nothing, sitting idly and in silence the greater part of the time. Claims that he feels fairly well, usually. Weight yesterday 136 pds. Pulse 66.

Oct 4 Oct 4/92. Wt 136 pds. Pulse 80. Oct 6/92. Has seemed to rest and sleep better at night for the past month. Sits daily on the same bench, in the same place, looking out of the window, speaking to no one, except he be first addressed. Bodily health fairly good.

Nov 4 Nov 2/92. Wt 135 pds. Pulse 72. Nov 4/92. Seems to rest and sleep well at night. By day, goes walking. While in the hall, sits in the same place all the time, looking steadfastly at the floor or out of the window. Says nothing unless spoken to. Appears indifferent rather than depressed.

Dec 5 Dec 5/92. Wt 132½ pds. Pulse 60. Has lost 2½ pds. during past month. Eats apparently very heartily & one would anticipate greater loss in weight. Was put on extra diet but he refused to touch it. Sits, in identically the same spot, with eyes cast upon the floor, in perfect stillness. Makes feeble response when spoken. Goes out walking. Does not complain of feeling ill & will say very little about himself. Dec 20/92. Transferred to B 3d.

1893

Jan 3/ Jan 3/93. Wt 134 pds. Pulse 96

NAME. Robt H Harvey
* in underclothing

DATE, 189 3.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	134	96	1½	....
Feby 3d	137½	78	3½	....
March 3d	135½	86	....	1½
* April 4th	120½	68	....	6½
* " 18th	123½	....	3	....
* " 28th	123½	....	....	....
* May 3d	122¾	70.	....	¾
(up) June 1st	114¾	—	13.	(Est'd)
" July 4th	150½	....	53¼	....
Aug 3	152	—	1½	....
Sep 8th	158	—	6	....
Oct 3d	157½	70	....	½

Jan 5/93. Perfectly quiet, apparently resting and sleeping
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this Hospital). The following history accompanied the Warrant &c. Ins
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dementia per seclusion. Insanity is now manifested by the delusion that
he is persecuted by certain persons. Has shown no disposition to injure others
not suicidal. No disposition to filthy habits, destruction of clothing &c. Before
symptoms of insanity appeared, showed strict aversion to Catholics. Is not subject
to any bodily disease: no restraint or confinement has been employed; has not been
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DETAILED HISTORY OF SICKNESS OF MR. R. H. Harvey
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
1893									
May 2	7	5	74	68					
3	7	5	70	66					
4	7	5	72	65					Appetite fairly good.
5	7	5	72	63					
6	7	5	68	60					
7	7	5	74	74					Appetite fairly good.
8	7	5	74	56					
9	7	5	76	72					
10	7	5	80	94					On Stool. — Unwilling to do anything but
11	7		76						sleep ate = Dont speak
15									Weight 139 lbs.
16					Jan Jan				Ins. 13.2.

Jan 5/93

...proclivities to injure others. Is ...aversion to petty habits, destruction of clothing &c. Before the symptoms of insanity appeared, showed strict aversion to Catholics. Is not subject to any bodily disease: no restraint or confinement has been employed; has not been under medical treatment.

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Dec Dec 5/92. Wt 132½ pds. Pulse 60. Has lost 2½ pds. during past month. Eats apparently very scantily & one would anticipate greater loss in weight. Was put on extra diet but he refused to touch it. Sits, in identically the same spot, with eyes cast upon the floor, in perfect stillness. Makes feeble response when spoken to.
" 20 Goes out walking. Does not complain of feeling ill & will say very little about himself. Dec 20/92. Transferred to B2.

Jan 3/93. Wt 134 pds. Pulse 96. Jan 5/93. Perfectly quiet, apparently resting and sleeping well at night. Sits, as described above, in one place, with eyes cast down, almost motionless, paying no heed to the presence of others.
Febr Feb 4/93. Apparently rests & sleeps well at night. By day, continues, quiet, silent and absent the same as described in last note. Has gained some in bodily weight.
Marc March 9/93. Went to bed today, of his own accord. Nothing definite the matter with him could be
" 16 found. Mar 16/93. Has up for a day or two after the last spell of confinement to his bed. Has now remained in bed since the 13th inst. Does not seem sick & in fact claims he is gaining some, seeming rather more cheerful & more communicative while in bed. Had varied very little up to the time of this recent attack of a desire to remain in bed. Mar 26/93. Tongue is quite heavily
" 26 white coated. Says he is constipated. Has kept his bed steadily since the last note. March 30/93. Appt. Pr
" 30 still remains in bed. —
Apr 8 April 8/93. Is quiet at night, apparently resting well. Lies in bed quietly by day; eyes closed & silent. Speaks and smiles some when addressed. Looks even more cheerful than while up. Takes food regularly but in small quantities. —
May 4 May 4/93. Remains quietly in bed, day & night. Does not want to get up. Seems a little more active, mentally.
For a long time, took only dry bread for food, refusing other food. Has lately taken eggnog. Is now on C2 —
" 17 May 17/93. Since last note, has continued to rest and sleep well at night, with the exception of only a few nights, on which he was quite restless & slept poorly. Appetite has been fairly good. Is unwilling to do anything, but sits up and will speak. Wt (dressed) 139 pds. (Has gained considerably). —
" 31 Was today transferred to B2. (See clinical record attached.). Has stayed a long time in bed, seemingly doing him no good. Was forced to get up today. May 31/93. Appetite good. Bowels are constipated, at times; no cough noticed. Has remained up daily. Sits quietly, apart by himself, on a bench. Speaks only when addressed. —
June 5/14 June 5/93. Has gained considerably in weight, lately. June 14/93. Has been talking some to himself,
" 30 & gesticulating, during the day. June 30/93. Appetite medium; bowels regular, as a rule. No cough noticed. Always sits by himself, in one place, while awake, not moving unless when pushed &. Is indifferent, & uninterested in his surroundings. Depressed.
July 14/31 July 14/93. Still continues to increase in flesh. July 31/93. Twisting & contorting his body, most of the time. Appetite good. bowels normal. Very quiet, keeping by himself; does not speak unless first spoken to. In other respects, no change to note. Has remained up daily, dressed & on the hall.
Aug 2/10 Aug 3/93. Has made a slight increase in weight, the past month. Aug 20/93. Writhing and
" 31 making contortions of the body, today. Aug 31/93. Still goes through his peculiar twisting movements of body. Talks but very little. Quiet & well-behaved. Appetite good. —
Sept 8/30 Sept 8/93. Has increased 6 pounds in weight, in past 5 weeks. Sept 30/93. Sits quietly & in one place apart from the others. Appetite continues good. Apparently rests and sleeps well at night. Bodily condition good.
Oct 3 Oct 3/93. Keeps in about his usual flesh. Sits while in the hall, all the time in the one place.
" 31 Does not walk about unless out-doors. Goes through his peculiar movements of body, from time to time. Is not communicative; only answers questions. Oct 31/93. No material change.

over to page 56.

Personal and Medical History of Adam Seifert

Whole No. 3069.
Residence, Stillwater, Minn
Date Admission, 6th July 1892.
Admitted by, Dr. R.M. Phelps Hour, 7.00 P.M.
How Sent, Rudolph Lehmicke, J.P. Washington Co.
Sex, male
Age, 35
Civil Condition, Single
Children, none
Age Youngest Child, —
Occupation, Farm-laborer
Degree Education,
Profession Religion, German-Lutheran
Habits, Good
Nativity, Posen, Germany
Physicians Committing, H. Clark; & B. J. Merrill
Correspondents,

John Bierbyr, Employer, Stillwater Minn, does him some money
(no relatives)

No. for Year, 288
Insane Relatives, not known (Insanity not known to be hereditary)
Cause Exciting, not known
Cause Predisposing,
Form, Chronic Melancholia.
Accompanying Bodily Disorder, not known
Suicidal or Not, Has tendency to suicide
Date of this Attack, In 1890
Duration, Two years or so
No. of Attack, 1st, as far as known
No. of Admissions, 1st
Age First Attack, 33.
Time of Leaving, 17th May 1896
Time in Hospital, 3 years: 10 mos 11 days.
Result, Died: Chronic Bright's Disease

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr. Baker, July 9/92.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Sluggish

MEMORY:

Past Events,

Recent Events, Seems impaired

Special Subjects,

PERCEPTIVITY:

Alert or Dull, ordinary observation seems slight; answers questions slowly; understands

Correct or Illusive, with difficulty: realizes own Condition fairly well.

REASONING POWER:

Ordinary Subjects,

Own Mental State, Seems impaired

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has some drink-habits — but moderately probably.
Says "he has pains in legs and has headaches".
Movements sluggish; "feels bad in head";
"all turned round"; "thinks people fool him".

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, probably

DELUSIONS:

Systematized or Not,

Special Subjects, of persecution

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent, Sluggish and hesitating

Personal and Medical History of Adam Seifert

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Poor; Complexion Sallow
WOUNDS OR ABNORMALITIES, Second finger of right hand gone; Scar on crown of head; Scar on leg (L)
TONGUE, Tremors, considerable Coatings, slight Promptness Movement, fair, some irregular.
PUPILS, Equality, Equal Size, about normal
Response Light, yes Accommodation, yes
SIGHT, Probably good (can't read)
HEARING, Seems impaired
COORDINATION, Arms, Finger to nose, Eyes shut, fairly good;
Legs, Standing on foot, some unsteady; Standing, Eyes Shut, fairly steady; turning fairly good quickly.
TREMORS, Hands, Tongue, Considerable
Facial Muscles, General, Some of head
REFLEXES, Patellar, unequal; left some exaggerated; right diminished
Other Reflexes,
ARTICULATION, Hesitating, foreign accent Slurred,
FACIAL EXPRESSION, dull
SENSIBILITY,
HEART, Seems normal
LUNGS, Seem normal
July 11/92 (W.M.) EXAM. URINE, Color pale; reaction, acid; Spec. grav. 1020. albumen, none.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, probably Constipated, Irregular,
APPETITE, Good, fair Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,
Father or Pat. Relations, Father died of cholera
Brothers or Sisters,

1892. This man was brought by C. O. Anderson, deputy Sheriff, with the following history; the first symptoms of disease were manifested by his having been of peculiar action and speech during the past two years; form has, apparently a tendency to melancholia (acute); has also a tendency to suicide. Insanity is now manifested in that he wishes to remove himself from the world. There is no particular subject upon which he has illusions (as far as examining physicians could find); has shown no disposition to injure others. About two weeks ago he took bottle of Antimony with suicidal intent. There is no disposition to filthy habits &c. Before symptoms of insanity appeared, showed no peculiarity except that he was very retiring and afraid of strangers.

July 7 July 7/92. Was perfectly quiet, sleeping 7 hours last night. AM. Pulse 56.

" 8 July 8/92. Groaned some, muttering words at times, said that he wanted to go back home"; was restless, sleeping but 3 hours. AM. Pulse 60.

" 9 July 9/92. AM. Pulse 52.

Aug 1 Aug 1/92. For the past 3 weeks has been perfectly quiet at night, and has apparently slept well. Pulse has been 60.(?).(?).72. 68. 64. 68.(?).76. 78. 76. 84. 72. 76. 76. 84. 80. 68. 68. 64. 72. 68. & 80. on the past 22 and present mornings.

" 3 Aug 3/92. Weight 162 pounds. Pulse 70.

" 10 Aug 10/92. Remains quiet at night and seems to sleep well. Is quiet, clean, tidy and well-behaved. Almost never enters into conversation with any of his companions in the hall, usually, however, greets the Dr and asks when he may go home. Walks the floor or sits on the bench with others, but without conversing with them. Does no work. Occasionally complains of constipation. Has a sallow, unhealthy color. Bodily health only fair.

Sept 5 Sep 5/92. Wt. 159½ pds. Pulse 70. Has gained in weight.

" 6 Sep 6/92. Is uniformly quiet, sleeping well at night. Conduct by day remains about the same.

" 14 Sep 14/92. For several days, has placed himself before a certain picture on his hall, and, today, has stood before it in wrapt, intense observation of it all day and would not leave it to go to dinner; had to be carried away from it, when he was taken to D3.

" 15 Sep 15/92. Cried some and was restless during last night, sleeping but 3 hours.

" 16 Sep 16/92. Was restless for a couple of hours, sleeping but 5 hours, last night.

" 24 Sep 24/92. Has been, almost nightly, more or less restless, sleeping from 4 to 6 hours, each night.

Oct 4 Oct 4/92. Weight 163 pounds. Pulse 80. Has lost 5½ pounds in last month.

" 6 Oct 6/92. Has complained of pain in his stomach and has tried to vomit, seemingly voluntarily in 2 or 3 different nights, claiming that he was constipated. Since the 24th ult. has rested and slept better at night. Is also behaving rather better by day; more sensible. Oct 11/92 Complains

Nov of being constipated. Nov 2/92 Wt 162½ pds. Pulse 70.

" 7 Nov 7/92. Is occasionally restless & somewhat noisy for a short time, at night; noise consisting of talking to himself. Has refused a few meals; on the whole, has eaten fairly well. Is anxious to work.

Dec 5 Dec 5/92. Wt 163½ pds. Pulse 72. Has gained 3½ pounds in past month.

" 6 Dec 6/92. Has been restless infrequently during the past 4 weeks; as a rule resting and

1893

NAME. Adam Seifert

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jan 3d	159½	68	6	
Feb 1st	190	100	½	
Mar 2nd	187	72		3
Apl 4th	190	72	3	
May 3d	186	70		4
June 5th	182	74		4
July 14th	194	64	11	

ibly and quietly behaved by day. Bodily health good.

6/93. Uniformly quiet, restful & sleeps well at night. sible and intelligent. Bodily health good.

& sleep well at night. Now sensible & active. Still works

ite active & sensible in Conduct.

Chews not working, sits apart, not engaging in conversation. iconfort in his abdomen, Eructations &c.

May 18/93. Has continued quite active & industrious g outside quite well. Is still inclined to be silent, yet seems eem Complaining of ill-feeling. In quite good bodily health. — severe pain in legs & back & has been confined to his bed Previously to taking to bed, had been doing considerable work been quiet & well-behaved & of good personal habits. —

to his bed until to-day, when he was got up. June 30/93. the 29th inst, patient has remained up & around daily. & legs, which make it very difficult for him to move goes out & sits in the grove. Appears somewhat stronger Contented here.

weight in the past month. July 31/93. Patient has had no ward. Has continued up & about daily. Still complains of troubled with constipation at times. Looks out at the grounds, 5. Is in quite good bodily health. Today moved to D6 East. health. Aug 31/93. No noticeable Change. —

atient. Works in the dining room. Complains steadily,

" 30 of disability in legs. In good flesh & strength. Feebleminded talks. Sep 30/93 No change. —

Oct 5 Oct 5/93. Has not felt very well of late & has been in bed a good deal of the time. —

" 31 Oct 31/93. Lays & about again for some time. Keeps about the same as above described.

Nov 30/93 Quiet & well behaved. Talks a little in a rational manner. Complains of rheumatic pains in limbs & back, otherwise appears to be in good health. Keeps a little to ward.

Dec 28 1893 In bed most of the time, occasionally comes down to a meal, but afterwards is completely exhausted & goes back to bed. Since 31/93 Up on ward at present. —

Jan 31 Keeps in about his usual health. Talks a little, in a rational manner. Still complains of his rheumatic pains.

Feb 28 Feb 28/94. No change to note. Still troubled with rheumatism & finds difficulty in getting about. Works a little.

Mar 31 March 31/94. Keeps about the same, from month to month. Seems quite contented here. Habits are cleanly

Apl 30 April 30/94 No change to call for remark. Helps a little with work. Still complains of rheumatic pains.

Talks a little, when addressed, in quite a rational manner. Still has much difficulty in moving about.

May 31 During this period, there is no apparent change to note. He is, at all times, quiet & well-behaved. —

June 30 Talks a little & quite rationally; complains quite often of rheumatic pains in back and

July 31 in limbs. Habits clean; dress neat and tidy. Physical health is fairly good. —

(Carried to page 108 Transfer Book A)

1892. This man was br
history; the first sy
action and speech du
melancholia (acute); h
that he wishes to remov
which he has illusions
dispisition to injure oth
suicidal intent. There is
insanity appears, showed
of strangers.

July 7 July 7/92. Was perfectly quiet, sleeping 7 hours last night. AM. Pulse 56.
" 8 July 8/92. Groaned some, muttering words at times, said "that he wanted to go back home"; was restless, sleeping but 3 hours. AM. Pulse 60.
" 9 July 9/92. AM. Pulse 52.
Aug 1 Aug 1/92. For the past 3 weeks has been perfectly quiet at night, and has apparently slept well. Pulse has been 60.(?).(?).72.68.64.68.(?).76.78.76.84.72.76.76.84.80.68.68.64.72.68.& 80. on the past 22
" 3 and present mornings. Aug 3/92. Weight 162 pounds. Pulse 70.
" 10 Aug 10/92. Remains quiet at night and seems to sleep well. Is quiet, clean, tidy and well-behaved. Almost never enters into conversation with any of his companions in the hall; usually, however, greets the Dr and asks when he may go home. Walks the floor or sits on the bench with others, but without conversing with them. Does no work. Occasionally complains of constipation. Has a sallow, unhealthy color. Bodily health only fair.
Sept 5 Sep 5/92. Wt. 169½ pds. Pulse 70. Has gained in weight.
" 6 Sep 6/92. Is uniformly quiet, sleeping well at night. Conduct by day remains about the same.
" 14 Sep 14/92. For several days, has placed himself before a certain picture on his hall, and, today, has stood before it in rapt, intense observation of it all day and would not leave it to go to dinner; had to be carried away from it, when he was taken to B².
" 15 Sep 15/92. Cried some and was restless during last night, sleeping but 3 hours.
" 16 Sep 16/92. Was restless for a couple of hours, sleeping but 5 hours, last night.
" 24 Sep 24/92. Has been, almost nightly, more or less restless, sleeping from 4 to 6 hours, each night.
Oct 4 Oct 4/92. Weight 163 pounds. Pulse 80. Has lost 6½ pounds in last month.
" 6 Oct 6/92. Has complained of pain in his stomach and has tried to vomit, seemingly voluntarily on 2 or 3 different nights, claiming that he was constipated. Since the 24th ult. has rested and slept better at night. Is also behaving rather better by day; more sensible. Oct 12/92 Complains
Nov of being constipated. Nov 2/92. Wt 162½ pds. Pulse 70.
" 7 Nov 7/92. Is occasionally restless & somewhat at noisy for a short time, at night; noise consisting of talking to himself. Has refused a few meals; on the whole, has eaten fairly well. Is anxious to work.
Dec 5 Dec 5/92. Wt 183½ pds. Pulse 72. Has gained 21 pounds in past months.
" 6 Dec 6/92. Has been restless infrequently during the past 4 weeks; as a rule resting and

sleeping well. Has been more sensibly and quietly behaved by day. Bodily health good.
Jan 3 Jan 3/93. Wt 189½ pds. Pulse 68. Jan 6/93. Uniformly quiet, restful & sleeps well at night. Works well. Seems somewhat more sensible and intelligent. Bodily health good.
Feb 6 Feb 6/93. Apparently continues to rest & sleep well at night. Now sensible & active. Still works well. Bodily health good.
Mar 18 Mar 18/93. Seems quite cheerful, quite active & sensible in Conduct.
April 10 April 10/93. Quiet, fairly industrious. Mews not working, sits about, not engaging in conversation. Recently complained of Constipation & medicine for in his abdomen, Eructations &c.
May 11/18 May 11/93. Was today moved up to B¹. May 18/93. Has continued quite active & industrious and for the past 2 weeks or so has been working outside quite well. Is still inclined to be silent, yet seems somewhat more cheerful & has not lately been Complaining of ill-feeling. In quite good bodily health. —
" 31 May 31/93. Has been complaining of a severe pain in legs & back & has been confined to his bed for the past 6 days, on this account. Previously to taking to bed, had been doing considerable work outside, upon the grounds. Has always been quiet & well-behaved & of good personal habits. — Bowels are, at times, Constipated.
June 14/20 June 14/93. Has remained confined to his bed until today, when he was got up. June 30/93. Since the exception of 2 hours, in bed, on the 27th inst, patient has remained up & around daily. Is still troubled with pains in back & legs, which make it very difficult for him to move about much. Yet he, quite frequently goes out & sits in the grove. Appears somewhat stronger & is gaining in flesh. Seems quite contented here.
July 14/31 July 14/93. Has made a large gain in weight in the past month. July 31/93. Patient has had no "active spell" since his return to this ward. Has continued up & about daily. Still complains of severe pains above mentioned. Still troubled with Constipation, at times. Goes out with ground, but finds great trouble in getting around. Is in quite good bodily health. Today moved to D² East.
Aug 5/31 Aug 5/93. Keeps in about his usual health. Aug 31/93. No noticeable Change. —
Sep 17 Sep 1/93. A quiet, well-behaved patient. Works in the dining room. Complains steadily,
" 30 of disability in legs. In good flesh & strength. Feebleminded talk. Sep 30/93. No change. —
Oct 5 Oct 5/93. Has not felt very well of late & has been in bed a good deal of the time. —
" 31 Oct 31/93. Keeps & about again for some time. Keeps about the same as above described.
Nov 24/93 Quiet & well behaved. Talks a little in a rational manner. Complains of rheumatic pains in limbs & back, otherwise appears to be in good health. Helps a little at work.
Dec 28. 1893 In bed most of the time, occasionally comes down to a meal, but afterwards is completely exhausted & goes back to bed. Dec 31/93 Up on ward at present. —
Jan 31 Keeps in about his usual health. Talks a little, in a rational manner. Still complains of his rheumatic pains.
Feb 28 Feb 28/94. No change to note. Still troubles with rheumatism & finds difficulty in getting about. Works a little.
Mar 31 March 31/94. Keeps about the same, from month to month. Seems quite contented here. Habits are cleanly
April 30 April 30/94. No change to call for remark. Helps a little with work. Still complains of rheumatic pains. Talks a little, when addressed, in quite a rational manner. Still has much difficulty in moving about.
May 31 During this period, there is no apparent change to note. He is, at all times, quiet & well-behaved. —
June 30 Talks a little & quite rationally; complains quite often of rheumatic pains in back and
July 31 in limbs. Habits clean; dress neat and tidy. Physical health is fairly good. —

(Carried to page 105 Transfer Book A)

Personal and Medical History of Sylvester Kennedy

Whole No. 3070.

Residence, Dodge County

Date Admission, 9th July '92

Admitted by, Dr. R. M. Phelps Hour, 7.30 PM.

How Sent, E. F. Wray, J. P. Dodge County

Sex, male

Age, 58

Civil Condition, married

Children, 2

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Yes; is church member

Habits, Good

Nativity, New York

Physicians Committing, S. H. Van Cleve & Peter J. Schwarg

Correspondents,

No. for Year, 287.

Insane Relatives, none

Cause Exciting, nervous debility & jealousy

Cause Predisposing, not heredity

Form, Paranoia.

Accompanying Bodily Disorder, no

Suicidal or Not, has threatened it

Date of this Attack, 1st Symptoms, 15 years ago

Duration, for time last above mentioned

No. of Attack, has had attacks at different times

No. of Admissions,

Age First Attack, 43

Time of Leaving, Aug. 10" 92

Time in Hospital, 1 mo. 1d.

Result, Improved

EXAMINATION ON ADMISSION.

Exd by Dr. Phelps, July 9/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Quick.

MEMORY:

Past Events, Says good (seems good)

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Seems good; realizes own condition

Correct or Illusive, except as to his wife's fidelity.

REASONING POWER:

Ordinary Subjects, Good

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Brother died in San Francisco, of nervous debility; son, heart disease; daughter, heart disease; the only question seems to be his irritability and delusion as to wife's fidelity; claims wife cohabited with cousin 1 year ago; again this year with another relative

EMOTIONAL STATE:

Normal, Calm, Calm and quiet

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, believes his wife unfaithful.

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent,

Personal and Medical History of Sylvester Kennedy

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 1/2 in WEIGHT, 131 1/2 pounds. NUTRITION, Fair

WOUNDS OR ABNORMALITIES, wounds fair.

TONGUE, Tremors, none Coatings, Promptness Movement, Fair

PUPILS, Equality, Size,

Response Light, Accommodation,

SIGHT, Good

HEARING, Good

COORDINATION, Arms,

Legs, Standing on foot, some swaying. Standing, Eyes shut, fair.

TREMORS, Hands, none Tongue, none

Facial Muscles, General,

REFLEXES, Patellar, Right 1. Left 7 to 8

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Palpitates

LUNGS, Normal

July 21/92 (D.M.) EXAM. URINE, Color normal; reaction, slightly acid; Spec. grav. 1020. albumen, none; sugar, none.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow growth — 15 years; partial invasion of mental field.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") Eccentric inheritance (hints of)

Mother or Mat. Relations, mother died of old age.

Father or Pat. Relations, Father died of apoplexy;

Brothers or Sisters, Brother died of nervous debility.

1892. This man was brought here by W. A. Houston, Sheriff; the following is the accompanying history. The form of this attack is paroxysmal; first symptoms of disease were manifested about 15 years ago, and appear to have been Continuous since. Insanity is now manifested on the subject of jealousy of wife; thinks she is immoral; has threatened to kill his wife; his family are afraid to stay with him. Has said he would hang himself; has no disposition to filthy habits, destructiveness &c Is not subject to any bodily disease; has not been restrained or confined; has not been under medical treatment. Has threatened to take his life within two weeks. Thinks his wife is having sexual intercourse with other men and seems to be insane on this subject.

July 10 July 10/92. Slept 8 hours (about) last night. Ann. Pulse 84.
" 11 July 11/92. Was restless for a couple of hours, very restless at times; slept about 5 hr hours last night. Ann Pulse
" 12 July 12/92. Was restless for one hour, sleeping 7 hours, last night. Ann. Pulse 80. States that he has been troubled with constipation for some time and is now.
" 13 July 13/92. Was out of bed some, sleeping about 7 hours last night. Ann. Pulse 82.
" 14 July 14/92. Slept about 8 hours last night. Ann. Pulse 74.
" 15 July 15/92. Was restless for one hour, out of bed a couple of times, sleeping 7 hours, last night. Ann. Pulse 76.
" 16 July 16/92. Slept about 8 hours last night. Ann. Pulse 80.
" 18 July 18/92. Slept 8 and 7 hours on past 2 nights, respectively. Ann. Pulse 96.
" 19 July 19/92. Slept 8 hours last night. Ann. Pulse 84.
" 23 July 23/92. Was today visited by his son. On the night of the 19th was restless for one hour.
" 27 July 27/92. Was restless for a couple of hours last night, sleeping 6 hours.
" 28 July 28/92. Slept 6 hours last night. Was today visited by friend.
" 30 July 30/92. Was restless for a couple of hours last night, sleeping 6 hours.
Aug 3 Aug 3/92. Weight 132½ pounds. Pulse 80
" 4 Aug 4/92. Complains of hoarseness and a dryness of throat.
" 8 Aug 8/92. Visited by 3 neighbors today.
" 10 Aug 10/92. Visited by wife and daughter. See attached copy of notes taken by Dr. Phelps of wife's statement concerning her husband's conduct, which led up to his being committed to this Hospital. —

Patient's conduct, since coming here, is, in part, found described in the above ~~described~~ notes. Has been but slightly restless at night, usually sleeping well. Has been up daily, arising at the rising hour. Has taken food regularly and in fair quantities; has been clean and tidy in personal habits and dress; quiet and well-behaved in conduct; quite free & calm in conversation; having spent his time in reading & occasionally writing letters; fully realized where he is and why sent here. Is physically not strong, apparently, being rather thin & pale; troubled with constipation, somewhat. Firmly holds to his idea that his wife has been unfaithful. One morning, called the Dr. into his room, and gave him a detailed account of the circumstances which led up to this idea concerning his wife. He claims that his suspicions were first aroused concerning his cousin's relations with his wife by the former's conversation;

SOME STATEMENTS CONCERNING MRS. KENNEDY, MADE BY WIFE AND DAUGHTER.

AUGUST 15 1892.

Was first violent about six years ago. Accused me of being intimate with gentlemen, got angry and beat me, and I lay in bed for 3 days at this time. Again, about 4 years ago was very angry, he and son were trying to catch colt, colt got into the wire fence, and was tripped. He was very angry accusing son, and threatened to get fire arms, and said that "the two black headed ones would catch it." "The two black headed ones" was the phrase he used for her son and herself. He said there would be blood-shed in the family. His attacks of passion would sometimes last a day, sometimes three or four weeks. Patient began to fail about 15 or 16 years ago. Has shown this extreme feeling of jealousy for about 12 years. Had the La Grippe 2 years ago, at one time Mr. Kennedy stepped up behind son with a sledge hammer, and seemingly was going to strike him. Son turned around, dropped the hammer, and struck at him with fist. Patient has named 25 or 30 men, at different times, as those of whom he was jealous. These men being neighbors, and in many different businesses. Cousin came here about 2 years ago, got along very nicely at first. Came at patients request and bought land. Something about the lease was wrong, however, and Mr. Kennedy would not give up the papers after it was fixed. Cousin he wanted to take the stock, and refused to give a mortgage, and finally the cousin had to get a Justie and have the papers served, before he could get the money, from Mr. Kenned

This seemed to be the beginning of the jealousy, directed against him. The other person, a nephew, came to this country, his health was poor, and Mr Kennedy, himself, induced him to come, and said would help him. Had only been there 8 or 10 days before he began to be jealous of him. Wife states that although patient had spoken many times of being jealous of him, and was continually twiting wife and daughter of them, that he had only mentioned definitely three outside, as far as she knew; Cartwright, the cousin and nephew. He stated also that the Sunday night before, the neighbors were angry because she did not take Mr. Kennedy out and taken the son and cousin from the house, and applied a coat of tar, to them.

Sylvester Kennedy

Dec 2 Found Nov 23. No improvement noticeable. Dec 2 93. Wt 163 lbs P 72. Restless & noisy & destructive during night. Dec 3 93 - Very excited & ugly spell during night, destroyed his bedding, struck the night watch, locked himself up in the water closet, broke brooms & mops, threw burning material over the transom into the hall. Very finally quieted down. Dec 4 93 Noisy & destructive during night. Noisy all day. Dec 5 93 Appetite very good Fed on hall Phys. cond very good Bowels reg. Behavior restless, noisy & destructive. Sometimes talks quite rationally, but generally incoherently. Has illusions & delusions. Habits dirty & destructive. Visited by friend 2 & 28 Dec 29. No improvement noticeable. Jany 2 94 Wt 165. P 64. Jany 10 94 Very noisy for past 5 days

over to page 332.

1892. This man was bro
accompanying his
disease were manif
since. Insanity is
immoral; has th
Has said he wou
be not subject to
not been under
Thinks his wife
on this subject

July 10 July 10/92. Slept
" 11 July 11/92. Was
" 12 July 12/92. Wa
troubled with c
" 13 July 13/92. S
" 14 July 14/92.
" 15 July 15/92.
" 16 July 16/92
" 18 July 18/92
" 19 July 19/9
" 23 July 23/
" 27 July 27
" 28 July 2
" 30 July 7
Aug 3 Aug 7
" 4 Aug
" 8 Aug
" 10 Aug 10/92. Was Phelps
of wife's statement concerning committed
to this Hospital. —

Patient's conduct, since coming here, is, in part, fou notes. Has been but slightly restless at night, usually sleeping well. Has been n arising at the rising hour. Has taken food regularly and in fair quantities; has been clean and tidy in personal habits and dress; quiet and well-behaved in conduct; quite free & calm in conversation; having spent his time in reading & occasionally writing letters; fully realized where he is and why sent here. Is physically not strong, apparently, being rather thin & pale; troubled with constipation, somewhat. Firmly holds to his idea that his wife has been unfaithful. One morning, called the Dr into his room, and gave him a detailed account of the circumstances which led up to this idea concerning his wife. He claims that his suspicions were first aroused concerning his cousin's relations with his wife by the former's conversation;

he, among other things, stating "that women can't help themselves". This latter statement attributed to the cousin seems to have been the patient's strongest ground for belief in his wife's infidelity. He also states, in addition, that the wife and daughter tried to get away to the neighbors and into town, without his knowledge and without his company, at different times. Patient was tried for insanity about one year ago, and it seems, was quite apprehensive of being taken up on the same charge, at various times since. He states that his son has repeatedly said to him "that he ought land in the Insane Asylum, if he did not do differently". — Patient has been on B. and A. during his stay here.

Was today taken home by his wife & daughter.

Discharged Nov. 9th 92.

from 76. **Christopher H. Carli**

1893

Aug 1/19 Aug 1/93. Is gaining in weight. Aug 19/93. Had a violent spell: pounded the wall with his fists; screamed loudly & tore his clothing. Is always more or less destructive. Also dirty.

" 31 Aug 31/93. Reliable boy at himself & has to be fed out in the hall. Has improved a little, or at least, is not so bad as last month. Talk is generally incoherent & rambling. Habits are very dirty, still. Has been visited this month; (by wife on 3d & by friends on 23d). —

Sep 3/30 Sep 3/93. Physical condition good. Sep 20/93. Conduct & behavior, about as last month. Talk, incoherent & very rambling. Has many delusions.

Oct 1/10 Oct 1/93. Continues to gain in flesh. Oct 10/93. Has been visited by wife, the past 3 days. —

" 31 Oct 31/93. Is still noisy, mischievous & destructive. Possibly some improvement, the past month.

Nov 1/93 Wt 171 lb. P. 79/Resp. 10. 93 Has not been working for past few days. Sits on seat most of time, complains of [illegible] Appetite good Does not talk at all. Nov 30 93 Walks on ward at times, never speaks Eats well most of time. Appetite good Dec 1 93 Wt 180. P 72.

Dec 31 93 Better than he was, talks freely. Appetite good Works on ward. Physical condition good No complaint. Jany 2 94 Wt 176½ P. 72. Jany 31 94 Talks - works - walks - Restless. Appetite good. Feby 1 94 Wt 175 lb.

Nov 2 93. Wt 161½ P. 86. Nov 15 93. Restless & noisy this during night. Nov 21 93 Noisy & restless this during night Nov 27 93 Destructive & noisy this. Nov 28 93 Restless this during night. Nov 30 93 Same. Appetite good Bowels reg. Phys. Cond. good. Fed on hall Behavior restless & destructive. Sudden outbursts of anger without cause Talks. Has rational spells of short duration but periods of silly. Has illusions & delusions Craves for tobacco & whiskey Visited by wife Nov 28 29 & 30. By friend Nov 23. No improvement noticeable. Dec 2 93. Wt 163½ P 72. Restless & noisy this during night Dec 3 93 Very Excited & ugly spell during night, destroyed his bedding struck the night watch, locked himself up in the water closet, broke brooms & mops, threw burning material over the transom into the hall. Very finally quieted down. Dec 4 93 Noisy this during night. Noisy all day. Dec 8 93 Appetite very good Fed on hall Phys. Cond. very good Bowels reg. Behavior restless, noisy & destructive. Sometimes talks quite rationally, but generally incoherently. Has illusions & delusions. Habits dirty & destructive. Visited by friends 21 & 28 inst. No improvement noticeable. Jany 2 94 Wt 165. P. 64. Jany 10 94 Very noisy for past 5 days

over to page 332.

Personal and Medical History of Nels H. Helland

Whole No. 3077.

Residence, Kenyon, Goodhue Co.

Date Admission, July-11-1892

Admitted by, Dr. A. F. Kilbourn Hour, 730 PM.

How Sent, S.J. Nelson J. of P. Goodhue C

Sex, Male

Age, 33 years

Civil Condition, Single

Children, One (in the old country)

Age Youngest Child,

Occupation, Laborer

Degree Education,

Profession Religion, No

Habits, Intemperance

Nativity, Norway

Physicians Committing, Otis J. Bonnell & Ad McKinley

Correspondents,

John Munnedal or Knute Broven, Kenyon, Goodhue Co. Minn

(relatives or friends)

Entered by Dr. Baker July 19/92.

No. for Year, 289.

Insane Relatives,

Cause Exciting, A blow on the head

Cause Predisposing, Intemperance

Form, Acute Melancholia.

Accompanying Bodily Disorder, Has had stomach trouble

Suicidal or Not,

Date of this Attack, abont 3 weeks ago.

Duration, 3 weeks

No. of Attack, 1st

No. of Admissions, 1st

Last Attack, 33

Date of Leaving, 30th May 1894

Time in Hospital, 1 Year - 10 mos - 19 Days.

Result, Died; pulmonary tuberculosis

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, somewhat sluggish

MEMORY:

Past Events, Recent Events, Special Subjects, } seems good; fairly accurate, but somewhat uncertain.

PERCEPTIVITY:

Alert or Dull, ordinary observation fairly poor; realizes his condition fairly well -

Correct or Illusive, Answers questions poorly, possibly because he does not understand English well -

REASONING POWER:

Ordinary Subjects, Slow

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Claims that religion has worked upon him.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not,

Special Subjects, That people are "down on him" because he thought badly of them.

Transitory or Not,

HALLUCINATIONS: "of hearing"

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, wont talk, only in answer to questions; quite freely then.

Says he was sick last fall; 4 weeks before Christmas. the result of injury to the lower part of his abdomen by some accident from a threshing machine. Was in bed part of time; claims he was able to work some;

Personal and Medical History of Nels H. Helland

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 in WEIGHT, 142 pounds NUTRITION, Rather Poor

WOUNDS OR ABNORMALITIES, of head (left frontal); abnormalities, probably none.

TONGUE, Tremors, Coarse Coatings, medium Promptness Movement, prompt; some irregular

PUPILS, Equality, Equal Size, about normal

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Finger to nose, eyes shut, good;

Legs, Standing on foot, good; standing, eyes shut, good; turning quickly, good.

TREMORS, Hands, Tongue, Coarse

Facial Muscles, General, very little except of tongue

REFLEXES, Patellar, Equal; only obtained by re-inforcement

Other Reflexes,

ARTICULATION, Hesitating, clear but rather slow Slurred,

FACIAL EXPRESSION, rather dull

SENSIBILITY,

HEART, Sounds strong; seems clear.

LUNGS, (?). expansion small.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, yes Careless,

BOWELS, Normal, probably Constipated, Irregular,

APPETITE, Good, Medium, Poor, probably

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

had no previous attack; has had vertigo; Is intemperate;

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or ~~Mat. Relations~~, Still living; claims she is well

Father or Pat. Relations, Father " " he is well.

Brothers or Sisters,

Personal and Medical History of Nels H. Helland

1892 This man was brought by a deputy-Sheriff, with the following history. Has been drinking, more or less, about three years. First symptoms of disease was manifested about 3 weeks ago; he was seized with a great dread; believed some one was going to hurt him, and he has not slept for a long time. Insanity is now manifested in that he still fears some one is going to do him harm. Then he sings, prays & talks. Has shown no disposition to injure others; no disposition to filthy or destructive habits. Is not subject to any bodily disease. Has not been restrained or confined. Was under medical treatment last winter for spitting blood (treated by Dr. Gronwald) –

July 12 July 12/92. Was quite restless for 4 hours, sleeping 3 hours, last night. Am. Pulse 100.

" 13 July 13/92. Vomited early last evening, coughed some, and complained of feeling sick to his stomach. Was restless for 4 hours, sleeping 4 hours. Am. Pulse 80.

" 14 July 14/92. Was uneasy most of the night, sleeping but 3 hours. Am. Pulse 83.

" 15 July 15/92. Was much less restless, sleeping 7 hours, last night. Am. Pulse 78.

" 16 July 16/92. Was out of bed but once last night; sleeping 8 hours. Am. Pulse 82.

" 17 July 17/92. Was quiet and slept 8 hours last night. Am. Pulse 79.

" 18 July 18/92. Was restless between an hour and two last night; slept about 6½ hours. Am. Pulse 76.

" 25 July 25/92. Is usually somewhat restless each night; sleeping from 6 to 8 hours. Pulse has been 82. 76. 72. 80. 72. 88. and 80, on the past 6 and present mornings.

Aug 1 Aug 1/92. Is comparatively quiet at night. On a couple of occasions has coughed some and once pounded on his door at night. Pulse has been 96. 88. 86. 80. 92. 92. and 88 on the past 6 and present mornings.

" 3/9 Aug 3/92. Weight 144½ pounds. Pulse 90. Aug 9/92. Pulse has ranged from 72 to 78. Was today moved to A¹ –

" 11 Aug 11/92. Has been comparatively quiet, resting and sleeping well at night. Has been quiet, clean, tidy and well-behaved by day. Has not talked much with his companions, but answers greetings promptly and freely. Has lately done some work. Seems also rather more cheerful – Is quite thin and anaemic in look. Does not complain however of feeling bodily ill.

Sep 5 Sep 5/92. Wt. 153 pds. Pulse 96. Has gained in weight.

" 12 Sep 12/92. Is quiet and sleeps well at night. Works quite well. Talks quite freely when conversation is begun; seems to be gaining.

Oct 4/92 Oct 4/92. Wt 156½ pds. Pulse 80. Oct 12/92. Continues quiet and well behaved. Works quite willingly and well. Seems cheerful and is fairly active. Bodily health good. Oct 25/92. Visited by a cousin's husband today; patient has been resting and sleeping so well, and behaving so well, by day, that, although still quite stupid at times, and manifestly not well, he was permitted to go home with his relative. Oct 29/92. Was returned today. Was put upon B².

Nov 2 Nov 2/92. Wt 157 pds. Pulse 92. Has been resting and sleeping well since his return.

" 12 Nov 12/92. Continues to rest and sleep well. Is quiet and well-behaved by day. Works some.

" 13 Seems about as he was before going away. Bodily health good. Nov 13/92. Transferred to B².

Dec 5 Dec 5/92. Wt 150½ pds. Pulse 78.

" 12 Dec 12/92. Uniformly quiet, resting and sleeping well at night. Is in good physical condition.

Personal and Medical History of Nels H. Helland.

NAME. Nels H. Helland

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	157	96		3½
Feb 3d	150	80		7
Mar 3d	153	100	3	
Apl 7th	155	96	2	
May 3	157	76	2	
June 5th	153	60	–	–
July 14th	150½	82+		1½
Aug 1st	143	82		7½
Sept 1st	145½	91	2½	
Oct 4th	147¾	100		2¾

ormal Habits are good.

3/93. Is quiet at night; has very little to say. Stands , when spoken to.

+ day. Is dull + stupid; saying but little; answers when al health, though he has been losing quite heavily in weight

et, inactive physically + mentally; Worksome. Talks

seem to be gaining. Apl 25/93. Am. Feels sick; chills Bed at B². (Later). Semi bed; has a little headache; e. P 100. Re) 99.6. Pm. P 98. Re) 99.4. Apl 26/93 6.30 am . Temp – While at this (B²) ward; has rested and slept B¹ today.

apparently good. No especial change to note in conduct Has been working outside some. Seems dull, stupid, ks when addressed. May 31/93. Appetite good; this in ding worker upon + about the grounds. Does not talk es no part in games. Keeps to good deal by himself. + behavior in the past month. Still works outside. weight + health. July 31/93. Patient does not seem to gain s around stupidly, or sits idly upon a bench; however, ements are inclined to be sluggish. Works outside daily.

Aug ut answers questions; hesitatingly, however. Seems " 3 ...m to understand. Very slow in action. Aug 31/93. Has "spells" in which he acts stupidly. Does not care to talk or do any work. —

Sep 1 Sep 1/93. Weight fluctuates a good deal; yet there has been a loss, on the whole, in past 10 months

" 30 Sep 30/93. Keeps about the same, all the time. Does not seem to improve any.

Oct 10 Oct 10/93. Always keeping apart from the others, generally sitting on a bench, while on hall.

" 31 Oct 31/93. Quiet + well-behaved. Used to work outside at one time, but has not done so for some months. Works, now, a little, at the ward. Appetite good. Health about as usual. Still keeps by himself, most of the time. Does not take any part in games etc. Has had no "spells" this month, but always has a dull, stupid way + manner about him. Nov 2 93 Wt 145 = 0 66

Nov 25 93 Has a spell + is dumpish + dull. Does not care to work or talk, but will sit on the bench. All day. Nov 2 93 Has about 2 such spells every month. Dec 2 93 Wt 145 = 0 100

Dec 30 / Jan 30 Same. Appetite poor. Works reg. Jany 2 94 Wt 145 Pg 4 Jany 30 94 No change. Is working in Kitchen. Very quiet. Inclined to be alone. Appetite Poor. Works reg.

Feby 2/94 / 28 Wt 141 R 80. Feb 5/94. Is now working in the kitchen. Feb 28/94. Continues quiet + well-behaved. Has "spells" when he wont speak or work. Very slow in getting around; seems very stupid + dull. Still works in the kitchen.

March 3/10 March 6/94. Wt 135 pds (is losing some in flesh). Pulse 94. March 16/94. Is not feeling well. Has a poor

" 28 appetite + is failing in flesh. Is on medicines. March 21/94. Has a sore leg; same somewhat swelled.

" 31 Is quite lame from it. Appetite still is poor. March 31/94. Patient is about the same. His leg is

(Carried to Back of page 1)

Personal and Medical History of

1892 This man was brought by a
drinking, more or less, about
about 3 weeks ago; he wo
to hurt him, and
that he still fe
Has shown
Is not subject
medical treatment

July 12 July 12/92. Was quite re — Pulse 100.
" 13 July 13/92. Vomited early — feeling sick to his stomach.
Was restless for 4 hours, sleep
" 14 July 14/92. Was uneasy most o — Am. Pulse 83.
" 15 July 15/92. Was much less restle — night. Am. Pulse 78.
" 16 July 16/92. Was out of bed but once — 8 hours. Am. Pulse 84.
" 17 July 17/92. Was quiet and slept 8 — ght. Am. Pulse 79.
" 18 July 18/92. Was restless between an hour — two last night; slept about 6½ hours. Am. Pulse 76.
" 25 July 25/92. Is usually somewhat restless each night; sleeping from 6 to 8 hours. Pulse has been 84. 76. 72. 80. 72. 88. and 80, on the past 6 and present mornings.

Aug 1 Aug 1/92. Is comparatively quiet at night. On a couple of occasions has coughed some and once pounded on his door at night. Pulse has been 96. 88. 88. 80. 92. 92. and 88 on the past 6 and present mornings.
" 3/9 Aug 3/92. Weight 144½ pounds. Pulse 90. Aug 9/92. Pulse has ranged from 72 to 78. Was today moved to A¹.—
" 11 Aug 11/92. Has been comparatively quiet, resting and sleeping well at night. Has been quiet, clean, tidy and well-behaved by day. Has not talked much with his companions, but answers greetings promptly and freely. Has lately done some work. Seems also rather more cheerful — Is quite thin and anaemic in look. Does not complain however of feeling bodily ill.
Sep 5 Sep 5/92. Wt. 153 pds. Pulse 96. Has gained in weight.
" 12 Sep 12/92. Is quiet and sleeps well at night. Works quite well. Talks quite freely when conversation is begun; seems to be gaining.
Oct 4/12 Oct 4/92. Wt 156½ pds. Pulse 80. Oct 12/92. Continues quiet and well behaved. Works quite willingly and well. Seems cheerful and is fairly active. Bodily health good. Oct 25/92. Visited by a Concinis husband today; patient has been resting and sleeping so well, and behaving so well, by day, that although still quite stupid at times, and manifestly not well, he was permitted to go home
" 29 with his relative. Oct 29/92. Was returned today. Was put upon B².
Nov 2 Nov 2/92. Wt 157 pds. Pulse 92. Has been resting and sleeping well, since his return.
" 12 Nov 12/92. Continues to rest and sleep well. Is quiet and well-behaved by day. Works some.
" 13 Seems about as he was before going away. Bodily health good. Nov 13/92. Transferred to B¹.
Dec 5 Dec 5/92. Wt 150½ pds. Pulse 78.
" 12 Dec 12/92. Uniformly quiet, resting and sleeping well at night. Is in good physical condition.

Personal and Medical History of Nels H. Nelland.

93 Is not gaining much mentally. Personal habits are good.
Jan 3/12 Jan 3/93. Wt 157 pds. Pulse 96. Jan 12/93. Is quiet at night; has very little to say. Stands around stupidly, brightening up a little, when spoken to.
Feb 12 Feb 12/93. Continues quiet both by night & day. Is dull & stupid; saying but little; answers when spoken to. Seemingly in good physical health, though he has been losing quite heavily in weight the past 2 months.
Mar 23 March 23/93. Is quiet at night. Quiet, inactive physically & mentally; worksome, talks very little. Health fairly good.
Apl 13/25 Apl 13/93. Dull & inactive. Does not seem to be gaining. Apl 25/93. Am. Feels sick; chills probably; Pulse 112; while up; was ordered to Bed as B³. (Later). Is in bed; has a little headache;
" 26 tongue is some coated; was given laxative. P 100. Te 99.5. Pm. P 78. Te 99.4. Apl 26/93 6.30 am Pulse 72. Te 99.4. Appetite good — 7.30 Am. Temp — While at this (B³) ward, has rested and slept
" 28 well, each night. Apl 28/93. Was sent to B¹ today.
May 18 May 18/93. Rest & sleep at night continue apparently good. No especial change to note in conduct or behavior by day, during the past 5 weeks. Has been working outside some. Seems dull, stupid,
" 31 and indifferent. Talks but little, but speaks when addressed. May 31/93. Appetite good; his in fair physical condition. Is a good willing worker upon & about the grounds. Does not talk much; merely replying when addressed. Takes no part in games. Keeps a good deal by himself.
June 30 June 30/93. No change to note in either conduct or behavior in the past month. Still works outside.
July 14/31 July 14/93. Maintains about his usual weight & health. July 31/93. Patient does not seem to gain very perceptibly. Is dull & inanimate. Stands around stupidly, or sits idly upon a bench; however, brightening up a little when spoken to. Movements are inclined to be sluggish. Works outside daily. Health about as usual. —
Aug 15 Aug 15/93. Is not inclined to talk much, but answers questions; hesitatingly, however. Seems
" 31 hard to make to understand. Very slow in action. Aug 31/93. Has "spells" in which he acts stupidly. Does not care to talk or do any work. —
Sep 1 Sep 1/93. Weight fluctuates a good deal; yet there has been a loss, on the whole, in past 10 months.
" 30 Sep 30/93. Keeps about the same, all the time. Does not seem to improve any.
Oct 10 Oct 10/93. Always keeping apart from the others, generally sitting on a bench, while on hall.
" 31 Oct 31/93. Quiet & well-behaved. Used to work outside at one time, but has not done so for some months. Works, now, a little, at the ward. Appetite good. Health about as usual. Still keeps by himself, most of the time. Does not take any part in games &c. Has had no "spells" this month, but always has a dull, stupid way & manner about him. Nov 2 93 Wt 145 Ob.
Nov 2 5 93 Has a spell & is dumpish & dull. Does not care to work or talk, but will sit on the bench all day. Nov 28 93 Has about 2 such spells every month. Dec 2 93 Wt 144 Ob 10 0
Dec 30 Jan 30 Same. Appetite poor. Bowels reg. Jany 2 94 Wt 145 Ob 96 Jany 30 94 No change. Is working in Kitchen. Very quiet. Inclined to be alone. Appetite Bowels reg.
Feb 27/94 Mar 28 Wt 141 Ob 80. Feb 5/94. Is now working in the kitchen. Feb 28/94. Continues quiet & well-behaved. Has "spells" when he wont speak or work. Very slow in getting around; seems very stupid & dull. Still works in the kitchen.
Mar 3/16 March 6/94. Wt 135 pds (is losing some in flesh). Pulse 94. March 16/94. Is not feeling well. Has a poor
" 21 appetite & is failing in flesh. Is on medicines. March 21/94. Has a sore leg; same somewhat swelled.
" 31 Is quite same from it. Appetite still is poor. March 31/94. Patient is about the same. His leg is

(Carried to Back of page 1)

Personal and Medical History of Daniel H. Newton

Whole No. 3074.

Residence, Minneapolis 6-8-10 Sth. S.

Date Admission, July-13-1892.

Admitted by, Dr. A. F. Kilbourne Hour, 1.00 Pm

How Sent, J. R. Corrigan, J. of P. Hennepin Co.

Sex, Male

Age, 42 years

Civil Condition, Married

Children, one (1)

Age Youngest Child,

Occupation, Salesman

Degree Education,

Profession Religion, Baptist

Habits, Good

Nativity, Mass.

Physicians Committing, E. T. Gibson, W. A. Jones

Correspondents,

Maria Newton, 58 South 10th St. (wife)

No. for Year, 291

Insane Relatives, Aunt and mother.

Cause Exciting,

Cause Predisposing, Heredity

Form, Acute Mania Rec.

Accompanying Bodily Disorder, Epilepsy

Suicidal or Not, Not

Date of this Attack, about 1 year ago (Continuous)

Duration, Continuous

No. of Attack, 2

No. of Admissions, 2 (Re-admitted)

Age First Attack, 41.

Time of Leaving, Died, Oct '92

Time in Hospital, 2 mo. 22 da

Result, Recd

EXAMINATION ON ADMISSION.

Exd by Drs Phelps + Baker July 13/92

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, has been very confused, at times

Quick or Sluggish,

MEMORY:

Past Events, Better

Recent Events, Poor; says, is confused; has to stop & recall things; many things come to mind confusedly

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Fair

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, fair, except books

Own Mental State, fair now

Special Subjects, oh! Books

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm, Calm now

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent, quite free; gives a quite clear account of all his doings; describes going to various cities looking for some lost books; couldn't tell why went there; (account seems accurate).

Personal and Medical History of Daniel H. Newton

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in WEIGHT, 161 pounds. NUTRITION, Good

WOUNDS OR ABNORMALITIES, Broken rib - abnormalities none.

TONGUE, Tremors, Coarse Coatings, heavy Promptness Movement, Prompt

PUPILS, Equality, Left a little the larger Size, normal

Response Light, Fair Accommodation, Fair

SIGHT, Good

HEARING, Fair

COORDINATION, Arms, Finger to nose, eyes shut, some impairment;

Legs, Standing on foot, not well; standing, eyes shut, not very good.

TREMORS, Hands, Some Tongue, Coarse

Facial Muscles, General,

REFLEXES, Patellar, 6-7

Other Reflexes,

ARTICULATION, Hesitating, Slurred, (?)

FACIAL EXPRESSION, Fair

SENSIBILITY,

HEART, 2nd Sound accentuated

LUNGS, Normal

July 30/92 Dr. W. EXAM. URINE, Color, yellow; reaction acid; Spec. grav. 1027; albumen none; urea 1%.

Aug 1/92 Color yellow; reaction acid; Spec. grav. 1027; albumen, none; urea 8%

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,	
BOWELS, Normal,	Constipated, Somewhat	Irregular,	
APPETITE, Good,	Medium,	Poor, very; Can't eat	
SLEEP, Good,	Poor, Can't sleep	Irregular,	
PULSE,	RESP.,	TEMP.,	

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow; has had convul-sions or vertigo - has not drunk of late - has not the habit.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Daniel. N. Newton

1892. This patient was brought by Mr. Mitchell (friend) with the following history. There is some history of Epilepsy; has fainting spells at times; wanders aimlessly; The first symptoms of the disease were manifested about a year ago (patient was then brought to this Hospital for treatment). He then thought his original head was gone. Lately, he imagines he has lost a book and has travelled to St. Paul, Hastings &c in the search for it. Attack is continuous; Insanity is now manifested in thinking he is and that he has lost something. Has shown no disposition to injure others; Is not suicidal and there is no disposition to filthy or destructive habits. Has, at times, a tendency to wander away in a partial state of unconsciousness. Was at this hospital (about a year ago(for two months.

July 15 July 15/92. Has slept but very little the past two nights, feeling nervous and restless. Has very poor appetite and eats poorly. Is badly constipated; bowels having moved almost none for 6 days. Was given dose of Hyoscine at bed-time, and a laxative.

" 16 July 16/92. Slept quite well last night; bowels moved freely; & he now feels better. (NW reports him sleeping 6 hrs)

" 17 July 17/92. Slept about 5 hours last night. Appetite is still poor. Put on milk diet, in part.

" 18 July 18/92. Slept about 4 or 5 hours last night. Appetite still poor. Put on a tonic.

" 19 July 19/92. Slept well last night.

" 20 July 20/92. Slept nearly all night, last night.

" 22 July 22/92. Sleeps well; bowels move; does not have a good appetite.

" 26 July 26/92. AM. Complains of headache; was given medicine. PM. Headache relieved.

" 27 July 27/92. Sleeps well; Eats better and fairly well. Is pleasant & cheerful.

Aug 3 Aug 3/92. Weight 161 pounds. Pulse 78.

" 13 Aug 13/92. Is quiet and rests well at night, sleeping well. Is of good personal habits & conduct. Good-natured; free and jolly in conversation. Reads a great deal and writes quite frequently. Mentally and physically active. Has done considerable clerical work in the Physicians's office; work requiring close application and accuracy. Talk perfectly coherent and free from irrelevancy

" 19 Aug 19/92. Has been visited yesterday & today by his wife.

Sep 5 Sep 5/92. Wt 164 pds. Pulse 100.

" 15 Sep 15/92. Is in quite bodily (good) health. Works occasionally at clerical work in the offices. Appetite has lately been excellent.

Oct 4/5 Oct 4/92. Wt 165 pds. Pulse 70. Oct 5/92. Was today discharged and take a situation in the employ of this Hospital.

Discharged

Personal and Medical History of H. H. Chamberlain.

Item page 72

1892

Nov 24 Nov 24/92. Today interfered while a patient was being put in seclusion, attempting to kick the door down, striking the attendants and fighting violently when interfered with, and after being put in seclusion breaking out the window-panes in the window of his room. Was put in restraint. Nov 25/92. Very noisy and restless last night. Dec 5/92. Wt (in undue clothing) 117 pds. Pulse 61. Dec 8/92. Has been kept in his room, at first locked in, now with the door unlocked, remaining in bed the greater part of the time, since the 24th ult. Was restless and noisy for several days after that trouble; gradually quieting down; is now comparatively quiet & calm. At various times complains of feeling badly; has vomited Considerable on 2 or 3 occasions & has sour stomach. Definite convulsions are almost never seen although he claims that he has fits. Dec 20/92. Has diarrhoea. Dec 23/92. Says he had one of his 'spells' this morning and that it was quite severe. Dec 24/92. Was somewhat noisy for a short time last night. —

" 25/26

" 28

1893

Jan 3/9 Jan 3/93. Wt 131 pds. Pulse 88. Jan 9/93. Has, within the past week or so, been noisy, for a short time, on several nights. Has also been quite irritable & troublesome by day, attacking fellow-patients for slight causes, Eg. for playing checkers & making a slight noise, and, when interfered with by the attendants, attacking them recently, fighting, kicking, biting and striking. Health is somewhat better. Jan 11/93. Today, struck a helpless fellow-patient on the head with a mop-handle, cutting him. Was put in seclusion, when he became noisy, pounding the pipes &c.. Jan 13/93. Threw a cup of tea in the face of one patients' face & was going to strike, with a pitcher, the attendant who interfered. Jan 14/93. Went in his room to-day, shut the door & fastened & barred it so that none could get in and then began to break the door to pieces. The door had to be forced open. Patient was then taken out and moved to C3; It taking one of the officers & 4 of the attendants to accomplish this. Patient bit one of them in the arm. Was then put in Seclusion. Jan 15/93. Refused food and medicine. Is wildly noisy, yet able to talk and argue. Jan 16/93. PM. Wildly noisy; ate no supper; continually noisy, destructive & still in Seclusion (past 2 days.). Jan 17/93. AM. Pulse not much accelerated; rather small. Eats poorly. Is constipated; given laxative. PM. Has been out in the hall, dressed, since 10 AM. Ate a good dinner. Was fighting in the supper room and again had to be secluded. Jan 19/93. PM. Pulse 110. Is hoarse. Tongue dry; was given salts. Abdomen some distended. Has a cough & expectorates some.

" 11

" 13

" 14

" 15

" 16

" 17

" 19

" 20/21 Jan 20/93. AM. Soup, but was taken back to bed. Pulse 108. Jan 21/93. AM. Complains of sore-throat; pains in hips, legs, back & chest. PM. Coughs less. Pulse 93. Is some better.

" 22/23 Jan 22/93. AM. Pulse 87. Still seems better. PM. Complains of headache. Jan 24/93. AM

" 25/26 Pulse 90. Still better. Jan 26/93. AM. Tongue is dark brown coated. Jan 27/93. AM. Asleep; is quiet & eats well. Jan 29/93. AM. Says he feels better. PM. Complains of pains in chest and all over body. Appetite poor. Has diarrhoea. Probably "Grippe"; given medicine. —

" 29/30

" 31 Jan 31/93. AM. Says he feels "quite badly". Talks incoherently.

Feb 2 Feb 2/93. AM. Is eating very poorly, but takes 2 glasses of milk at each meal.

" 3/9 Feb 3/93. Is better this morning. Feby 9/93. For an hour or so on 2 or 3 nights about the above transfer, was slightly noisy on retiring; since then, has been very quiet & sleeping 8 to 9 hours each night. Is still confined to his bed. By day, remains there fairly quietly,

(carried to page 212)

Personal and Medical History of Elisha Palmer

Whole No. 3075
Residence, County Poor farm, Havana
Date Admission, 13th July 1892.
Admitted by, Dr. Linton - Phelps Hour, 7.30 PM
How Sent, L. Hazen, J of P. Steele County
Sex, male
Age, 67
Civil Condition, married
Children, one boy, 23 years old
Age Youngest Child,
Occupation, a mason
Degree Education,
Profession Religion, a member of God's Church, Hesays
Habits, genually good, so far as known.
Nativity, Massachusetts
Physicians Committing, E. E. Bigelow & A. B. Stewart
Correspondents,

No. for Year, 292
Insane Relatives, Insanity, not hereditary as far as known
Cause Exciting, Paralysis
Cause Predisposing,
Form, Organic Dementia.
Accompanying Bodily Disorder, No
Suicidal or Not, Not
Date of this Attack, about 1 year ago
Duration, has continued since then
No. of Attack, 1st; has continued during past year
No. of Admissions,
Age First Attack, 66
Time of Leaving, July 31. 1893
Time in Hospital, 1 year 18 days.
Result, Transf to Fergus Falls

JK pm

EXAMINATION ON ADMISSION.

Exd by Dr. Baker, July 14/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, somewhat confused
Quick or Sluggish, Sluggish

MEMORY:
Past Events, Says, it is poor.
Recent Events, } Impaired
Special Subjects, }

PERCEPTIVITY:
Alert or Dull, } Poor
Correct or Illusive, }

REASONING POWER:
Ordinary Subjects, Poor
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Is temperate; upon dilatation, left pupil is larger; also left pupil elliptical; long diam. vertical R. artery stiff and tortuous.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Yes
Exalted,
Depressed,

DELUSIONS:
Systematized or Not,
Special Subjects, That he has been poisoned & is in danger of being killed
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, garrulous

Personal and Medical History of Elisha Palmer

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5 in. WEIGHT, 124 pounds NUTRITION, Fair
WOUNDS OR ABNORMALITIES, Fracture of L radius and scar on R. shin.
TONGUE, Tremors, slight Coatings, slight & fissured Promptness Movement, slow
PUPILS, Equality, unequal in some lights Size, about normal
Response Light, left good, but right impaired Accommodation, left good, but right impaired
SIGHT, Impaired; left markedly; right somewhat
HEARING, Right, almost deaf; left ear much impaired.
COORDINATION, Arms, finger to nose, Eyes shut, right arm slow and uncertain; left fair.
Legs, Standing on foot, unsteady; Standing, Eyes shut, rather unsteady.
TREMORS, Hands, Tongue, slight
Facial Muscles, Right side of face paralyzed. General,
REFLEXES, Patellar, Right 10. Left 8.
Other Reflexes,
ARTICULATION, Hesitating, Slurred, yes & thick
FACIAL EXPRESSION, one - sided
SENSIBILITY,
HEART, Second sound loud & accentuated
LUNGS, normal
July 15/92 (Dr. B.) EXAM. URINE, Color, deep yellow; spec. grav. 1031; albumen, decided trace; (microscopy) large numbers of uric acid crystals; a few oxalate calcium, and questionable tube casts.
July 28/92. (Dr. M.) Color pale; reaction, acid; spec. grav. 1025; albumen, none; urea 1.2%.
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, Yes	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 93	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Gradual

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

1892. This man was brought here by J. Z. Baucard, Sheriff, with the following history. First symptoms of insanity appeared about a year ago, and have continued since. Insanity is now manifested in the belief that poison is being put into his food, and that his room-mate tries to shoot him at nights and he fears that he will be injured. Has never shown any vicious habits, nor any disposition to filthy or destructive habits. He had the habit of moving his bed against the door of his room, fearing that he would become injured from outside. Cannot learn that he has been subject to any bodily disease. Has not been under medical treatment. Condition of mind considered the result of paralysis, followed by approaching dementia.

July 14 July 14/92. Was quiet and slept well all last night.
" 15 July 15/92. Was quiet again last night and slept well.
" 16 July 16/92. Slept only about 4 hours last night.
" 17 July 17/92. Slept about 5 hours last night; has not been noisy, however.
" 18 July 18/92. Slept well last night.
" 20 July 20/92. Has been quiet and slept quite well the past 2 nights.
" 24 July 24/92. Slept only 4 hours last night, but was quiet.
Aug 3 Aug 3/92. Weight 134 3/4 pounds; pulse 68; has gained about 10 pounds since admission.
" 15 Aug 15/92. Continues uniformly quiet at night, and appears to sleep well. Is quiet, fairly clean and tidy, and well-behaved. Talks almost none unless spoken to. Is dull & inactive mentally. Sits about in the hall and walks slowly and feebly about. Goes out walking with the others. Is unable to work. Face shows the one-sided paralysis very markedly. Bodily health is only fair. Seems contented here. Says he is getting better. Does not mention his delusions at all, when not questioned about them, and does not seem to shape them about individuals here. —

Sep 5 Sep 5/92. Wt 133 pds. Pulse 80.
" 15 Sep 15/92. Uniformly quiet at night. Has occasionally complained of feeling unwell. Is a quiet demented man.
" 28 Sep 28/92. Complains of diarrhoea today.
Oct 14 Oct 14/92. Wt 130 pds. Pulse 72. Oct 15/92. Is quiet at night, resting and sleeping well. Bodily health seems to fail slowly.
Nov 2 Nov 2/92. Wt 135 pds. Pulse 80. Has regained his lost weight.
" 16 Nov 16/92. Seems to rest and sleep well. Is quiet, night and day. Talks freely; shows marked confusion of mind; is rather feeble & tottering.
Dec 5 Dec 5/92. Wt 135 pds. Pulse 78. Dec 15/92. Seems about the same. At times, Complains of not feeling well. —
1893 Jan 3/16 Jan 3/93. Wt 139 pds. Pulse 90. Jan 16/93. Occasionally complains of headache; usually feels well. Urine contains albumen & tube-casts.
Feb 3/16 Feb 3/93. Wt 137 pds. Pulse 90. Feb 16/93. Occasionally quite or slightly noisy for an hour or 2 at night generally, however, resting and sleeping well. In other respects, about the same. Feb 21/93. Has erysipelas of the face — Put to bed & isolated. Feb 26/93. Has been doing well; erysipelas is

NAME. Elisha Palmer

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
January 3	139	90	4	
Feby 3	137	90		2
Mar 1 (3)	134	78		13
April 4th	135	96	11	
May 3d	138	84	3	
June 5th	137	—		1
July 6	138	88	1	

quite severe epistaxis today. Has been up from his bed
minded, feeble-bodied old man.
nice last note.
straight. Otherwise, no change to note. —
a fellow patient, on lip & wrist. —
seem normal. Has some cough, at times. Seems to be failing
day. Talking all the time about going home to see his wife.
side & lungs.
lastly described. If anything, somewhat better.
ght.
ing weaker. Complains frequently of headaches. Appetite, however,
ner; a simple, feeble-minded old man.
ints, today transferred to Hospital at Fergus Falls.

N. Soutter

times. Nov 30/93. Well-behaved though inclined
to be "cranky" at times. Still manifests delusions. Plays games. Reads some. Works well —
Dec 31 Dec 1/93. Physical condition seems quite good. Dec 31/93. Continues about the same as to his conduct & behavior. Reads, plays games &c, & does occasional work at tailoring & mending &c. Makes no complaints. Helps willingly with ward work well —
1894 Jan 7 Jan 1/94. Wt today, 128 pds. (a loss of 6½ pds). Pulse 78. Jan 7/94. Appetite not very good.
" 8 Has not been feeling well, of late, he says. Jan 8/94. Still complains of ill-feeling & was, today, transferred to 6z ("the sick-ward"). 7 Am. Pulse 94. T(e) 101. Was put to bed. Complains of pains
" 9 in head & chest. Coughs a great deal. 3 PM. Is vomiting. 5 PM. Pulse 92. Jan 9/94. 7 Am. Pulse 76. 5 PM. Pulse 60. Has remained in bed today, but is now feeling better. —
" 10/11 Jan 10/94. Is up, onward. Jan 11/94. Appetite good. Bowels regular. Says "he feels quite well".
" 15/31 Jan 15/94. Is again coughing & raising a good deal of phlegm. Jan 31/94. Is up & about as usual. Still inclined to be "cranky" at times. Evidently still holds to his delusions. —
Feb 2/3 Feb 2/94. Wt 123½ pounds (is still losing in flesh). Feb 3/94. Has a "spell" today. Is very
" 9 cross & will not eat. Feb 9/94. Is very noisy, today; continually talking. Was moved back to B2z
" 28 Feby 28/94. Patient has behaved well, since coming on to this ward. Talks freely; reads some; plays games. Does some work at tailoring. Habits are very neat and clean. Is in good physical condition. —
Mar 2/31 March 2/94. Wt 128½ pds. Pulse 100. March 31/94. Continues quiet & well behaved. Works some on the ward. Still somewhat inclined to be cranky, but less so than for some time past. Personal habits are good.
Apl 2/30 April 2/94. Wt 127 pds. Pulse 84. April 30/94. No material change to note. Talks freely; pleasant in manner.
May 1 Works some at tailoring. Habits neat & clean. Is in good bodily health. May 1/94. Wt 128 pds. Pulse 80.
" 2/20 May 2/94. Began working in Tailor-Shop today. May 6/94. Quit working; "had no time for smoke or exercise". May 20/94. Again at work.
" 31 May 31/94. Has continued to work well in tailor Shop; still holds to his peculiar ideas: boyant temper; health is good. —
June 1/7 June 1/94. Wt 124 pds. Pulse 82. June 7/94. Was very abusive to another patient (Seitz) who slapped him for it.
" 30 June 30/94. Works steadily in the tailor Shops. Gentlemanly in behavior — talking & talking. Still quite "queer". —

(Carried to page 30)

Personal and Medical History of

1892. This man was brought here by J. Z. Bau
First symptoms of insanity appeared about
Insanity is now manifested in the belief that
that his room-mate tries to shoot him at nights a
never shown any vicious habits, nor any dispositio
had the habit of moving his bed against the door of his
injured from outside. Cannot learn that he has been
been under medical treatment. Condition of mind
-lowed by approaching dementia.

July 14 July 14/92. Was quiet and slept well all last night.
" 15 July 15/92. Was quiet again last night and slept well.
" 16 July 16/92. Slept only about 4 hours last night.
" 17 July 17/92. Slept about 5 hours last night; has not been noisy, however.
" 18 July 18/92. Slept well last night.
" 20 July 20/92. Has been quiet and slept quite well the past 2 nights.
" 21 July 21/92. Slept only 4 hours last night, but was quiet.
Aug 3 Aug 3/92. Weight 134 3/4 pounds; pulse 68; has gained about 10 pounds since admission.
" 15 Aug 15/92. Continues uniformly quiet at night, and appears to sleep well. Is quiet, fairly clean and tidy, and well-behaved. Talks almost none unless spoken to. Is dull & inactive mentally. Sits about on the hall and walks slowly and feebly about. Goes out walking with the others. Is unable to work. Face shows the one-sided paralysis very markedly. Bodily health is only fair. Seems contented here. Says he is getting better. Does not mention his delusions at all, when not questioned about them, and does not seem to shape them about individuals here. —

Sep 5 Sep 5/92. Wt 133 pds. Pulse 80.
" 15 Sep 15/92. Uniformly quiet at night. Has occasionally complained of feeling unwell. Is a quiet demented man.
" 28 Sep 28/92. Complains of diarrhoea today.
Oct 14/15 Oct 14/92. Wt 130 pds. Pulse 92. Oct 15/92. Is quiet at night, resting and sleeping well. Bodily health seems to fail slowly.
Nov 2 Nov 2/92. Wt 130 pds. Pulse 80. Has regained his last weight.
" 16 Nov 16/92. Seems to rest and sleep well. Is quiet, night and day. Talks freely; shows marked confusion of mind; is rather feeble & tottering.
Dec 5/15 Dec 5/92. Wt 135 pds. Pulse 78. Dec 15/92. Seems about the same. At times, Complains of not feeling well. ~~~~
1893
Jan 3/16 Jan 3/93. Wt 139 pds. Pulse 90. Jan 16/93. Occasionally complains of headache; usually feels well. Urine contains albumen & tube-casts.
Feb 3/16 Feb 3/93. Wt 137 pds. Pulse 90. Feb 16/93. Occasionally quite or slightly noisy for an hour or 2 at night generally, however, resting and sleeping well. In other respects, about the same. Feb 21/93. Has erysipelas of the face — Put to bed & isolated. Feb 26/93. Has been doing well; erysipelas is

Personal and Medical History of Elisha Palmer

abort recovered from. Mar 17/93. Had quite severe epistaxis today. Has been up from his bed
25 for sometime. Mar 25/93. A feeble-minded, feeble-bodied old man.
Apl 18 Apl 18/93. No spell of restlessness at night since last note.
May 18 May 18/93. Seems, now, to rest & sleep well at night. Otherwise, no change to note. —
" 22 May 23/93. Was struck, in the night, by a fellow patient, on lip & wrist. —
" 31 May 31/93. Appetite quite good. Bowels seem normal. Has some cough, at times. Seems to be failing in strength. Is quiet & well-behaved by day. Talking all the time about going home to see his wife. Has been complaining of pain in left side & lungs.
June 30 June 30/93. Continues about the same as lastly described. If anything, somewhat better.
July 14 July 14/93. Keeps about his usual weight.
" 31 July 31/93. Has lately seemed to be getting weaker. Complains frequently of headaches. Appetite, however, is good. Is more foolish in his manner; a simple, feebleminded old man.
Was, with several other patients, today transfered to Hospital at Fergus Falls.

Albert N. Soutter

1893 Found page 2454.
Nov 10/30 cont'd Goes out walking. Talks too freely at times. Nov 30/93. Well-behaved though inclined to be "Cranky" at times. Still manifests delusions. Plays games. Reads some. Works well.
Dec 14/31 Dec 14/93. Physical condition seems quite good. Dec 31/93. Continues about the same as to his conduct & behavior. Reads, plays games etc, & does occasional work at tailoring & mending &c. Makes no complaints. Helps willingly with ward work well.
1894
Jan 7 Jan 1/94. Wt today, 128 pds. (a loss of 8 1/2 pds). Pulse 78. Jan 7/94. Appetite not very good. "Has not been feeling well, of late," he says.
" 8 Jan 8/94. Still complains of ill-feeling & was, today, transfered to 6th ("the sick-ward"). 7 Am. Pulse 94. Temp 101. Was put to bed. Complains of pains in head & chest. Coughs a great deal. 3 Pm. Is vomiting. 5 Pm. Pulse 92.
" 9 Jan 9/94. 7 Am. Pulse 76. 5 Pm. Pulse 60. Has remained in bed today, but is now feeling better. —
" 10/14 Jan 10/94. Is up, onward. Jan 11/94. Appetite good. Bowels regular. Says "he feels quite well".
" 15/31 Jan 15/94. Is again coughing, raising a good deal of Phlegm. Jan 31/94. Is up & about as usual. Still inclined to be "cranky" at times. Evidently still holds to his delusions. —
Febr 2/3 Feb 2/94. Wt 123 1/2 pounds (is still losing in flesh). Feb 3/94. Has a "spell" today. Is very cross & will not eat. Feb 4/94. Is very noisy, today; continually talking. Was moved back to 2nd.
" 9 Feby 28/94. Patient has behaved well, since coming in to this ward. Talks freely; reads some; plays games. Does some work at tailoring. Habits are very neat and clean. Is in good physical condition. —
" 28
Mar 2/31 March 2/94. Wt 128 1/2 pds. Pulse 100. March 31/94. Continues quiet & well behaved. Works some in the ward. Still somewhat inclined to be cranky, but less so than for some time past. Personal habits are good.
Apl 2/30 April 2/94. Wt 127 pds. Pulse 84. April 30/94. No material change to note. Talks freely; pleasant in manner.
May 1 Works some at tailoring. Habits neat & clean. Is in good bodily health. May 1/94. Wt 122 pds. Pulse 80.
" 2/20 May 2/94. Began working in Tailor-Shop today. May 6/94. Quit working; "had no time for such a exercise". May 20/94. Again at work.
" 31 May 31/94. Has continued to work well, in tailor Shop; still holds to his peculiar ideas; benevolent, pleasant; health good. —
June 2/7 June 2/94. Wt 124 pds. Pulse 82. June 7/94. Was very abusive to another patient (Seitz) who slapped him for it.
" 30 June 30/94. Works steadily in the tailor Shop. Demeanor well behaved — mixing, talking. Still quite "green". —

(Carried to page 30)

Personal and Medical History of William Mc Bride

Whole No. 3076

Residence, Montgomery Minn; (now at St Mary's Hosp)

Date Admission, 16th July 1892

Admitted by, Dr R. M. Phelps Hour, 7 P. M.

How Sent, J. P. Corrigan, J of P. Hennepin Co.

Sex, Male

Age, 27

Civil Condition, Single

Children, none

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Catholic

Habits, Good

Nativity, Minnesota

Physicians Committing, J. H. Dunn & W. A. Jones

Correspondents,

(Brother), C. B. Mc Bride; 102 E 3d St. St Paul

(mother) Mrs E. Mc Bride, Montgomery Minn

No. for Year, 293

Insane Relatives, None (Insanity not hereditary)

Cause Exciting, unknown

Cause Predisposing,

Form, Ac. Mania Recurrent.

Accompanying Bodily Disorder, Constipation; disordered digestion

Suicidal or Not, Not; but he talks of it.

Date of this Attack, 2 or 3 weeks ago

Duration, about 3 weeks

No. of Attack, 2nd

No. of Admissions, 2nd

Age First Attack, some years ago

Time of Leaving, May 3rd '93

Time in Hospital, 9 mos 15 ds.

Result, Impd.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Entirely Dr. Baker. July 19/92.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, Quite active

MEMORY:

Past Events, Seems good

Recent Events, rather inaccurate, possibly from inattention

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fair in ordinary observation; answers questions fairly; does not

Correct or Illusive, seem to realize own condition

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS: Does not drink.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not,

Special Subjects, denies any at present

Transitory or Not,

HALLUCINATIONS: yes "of hearing"

ILLUSIONS:

CONVERSATION: Quite free; articulation fair;

Coherent or Incoherent, coherent.

Voluble or Reticent,

Personal and Medical History of Wm Mc Bride

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7½ in WEIGHT, 138 pounds NUTRITION, Is thin; haggard

WOUNDS OR ABNORMALITIES, several small scars; abnormalities, probably none.

TONGUE, Tremors, coarse Coatings, coated heavily Promptness Movement, Slow

PUPILS, Equality, Equal Size, dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, finger to nose, Eyes shut, fair;

Legs, standing on foot, steady; standing, Eyes shut, some swaying;

TREMORS, Hands, some Tongue, coarse

Facial Muscles, of cheeks, on intention; General, of head.

REFLEXES, Patellar, equal; are diminished; 2 or 3.

Other Reflexes,

ARTICULATION, Hesitating, seems fair Slurred,

FACIAL EXPRESSION, Haggard; dull.

SENSIBILITY,

HEART, Seems good.

LUNGS, Seem good.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Constipated, yes Irregular,

APPETITE, Good, Medium, Poor, has been, but better now.

SLEEP, Good, Poor, Irregular,

PULSE, 72 RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow probably

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother still living.

Father or Pat. Relations, Father died a few years ago but living now (see note in history, next page)

Brothers or Sisters,

1892. This man was brought here by Chas. Miller, deputy Sheriff, with the following history; The form of this attack is acute, paranoiacal; first symptoms of the disease were manifested 2 or 3 weeks ago (the present attack) by depression, delusions, and insomnia. Some 2 years ago, was a patient for a number of months at this hospital (in Rochester). Insanity is now manifested by his refusing to eat or sleep, by delusions on religious subjects, and by fear; has shown no disposition to injure others; has not attempted suicide, but talks of it; no disposition to filthy or destructive habits; (no the point of bodily disease, see former history).

Exam. July 19/92 The following are remarks continued from examination of this date. On admission, manifested, very plainly, depression and fears; asking the Dr. if anything could be done for him; but, on examination today, denies having been depressed, refusal of food and insomnia, as stated in Committment papers. (There is some question as to his honesty of these denials). Took the examination as a sort of farce, and not a necessity; refusing to try some of the tests carefully (e.g: coordination and reflexes). Says father has been dead but is living now; is quite sure of this; explains this fact by saying he has seen him often since his death; he appears "as a man" — This, patient says, is not an unusual thing - Mother has never been dead; she is still living".

July/17 July 17/92. Was very uneasy and restless last night; getting up & dressing; obstinate about doing as requested; somewhat noisy and slept but 1 hour. Am. Pulse 90. Ate some last night and ate quite well today; feels better. Is constipated.

" 18 July 18/92. Was much less restless, sleeping 7 hours last night. Am. Pulse 112. Ate a good breakfast.

" 19 July 19/92. Somewhat restless and out of bed, sleeping about 5½ hours, last night. Am. Pulse 96.

" 20 July 20/92. Out of bed, wanting to dress and troublesome all last night. Slept none at all.

" 21 Am. Pulse 68. July 21/92. Restless and out of bed again, sleeping about 4 hours, last night.

" 22 Am. Pulse 104. July 22/92. Again passed an uneasy & restless night sleeping only 2 hours. Am. Pulse.

" 23/24 July 23/92. Slept 6 hours last night. Am. Pulse 96. July 24/92. Restless, noisy and ugly last night, sleeping but 2 hours. Am. Pulse 104. Has been troublesome for some time and growing more so.

" 30 Tantalizes and annoys other patients. Eats quite well. July 30/92. Has been more or less restless and troublesome every night; has slept 4. 6. 4. 2. and 1 & 5 hours in the past 6 nights respectively. Was moved to B4 on account of his annoying and even striking his fellow-patients.

Aug 3 Aug 3/92. Weight 148 pounds. Pulse 90. Has gained 10 pounds since admission.

" 5 Aug 5/92. Has been somewhat restless each night and has slept about 2. 6. 4. 4. 6. & 7 hours on the past 6 nights respectively. Aug 16/92. Has grown quieter since 5th but and now sleeps quite well at night. Has also become less restless and badly-behaved & troublesome by day; formerly wandered about the ward restlessly and aimlessly, saying very little unless spoken to, replying quite readily then. Is calmer but still does not talk much unless addressed. Takes food regularly and well — Goes at walking daily. Bodily health has improved some —

" 16

Sep 5 Sep 5/92. Wt 170 pds. Pulse 82.

" 15 Sep 17/92. For a time infrequently restless & somewhat noisy at night, has grown almost

1892

perfectly quiet at night lately. Is better-behaved by day. Walks quite well. Gaining physically.

Oct 14/92 Oct 14/92. Wt 150 pds. Pulse 96. Oct 17/92. Is, as a rule, quiet at night, sleeping well. Is quiet, better behaved and more rational, by day. Is rather fond, however, of picking on other patients and occasionally gets into quarrels. Bodily health good.

Nov 2/92 Nov 2/92. Wt 153½ pds. Pulse 72. Nov 10/92. Was moved to B3 today.

" 16 Nov 16/92. Has been almost uniformly quiet and restful, sleeping well, during the past 4 weeks — Has also been quieter and better behaved by day; clean and tidy; working well; having ceased his old habit of teasing his fellow patients. Has written a couple of letters to his brother. Is getting anxious to go home. Bodily health good. Nov 20/92. Had an aching tooth, which the Dr. attempted to pull but with the result of breaking off the crown. Nov 23/92. Patient has suffered more or less

" 20

" 23

" 28 pain and soreness around the gum of tooth; says it prevents him from sleeping. Nov 28/92 Has been in bed the greater part of the time since last note, suffering from pain in the tooth and various parts that side of the head. Pulse has been 52 to 64. Is up today & feels fairly well.

" 29 Nov 29/92. Is in bed again today with the earache; had some Chill; no sweat nor vomit. P 88.

Dec 5/9 Rx. Dr. sup. Dec 5/92. Wt 149½ pds. Pulse 76. Dec 9/92 Complains of headache and

" 12 some nausea. Appetite is not good. Pulse 64. Dec 12/92. am. Pulse 84. T 99.4. Is in bed.

" 14 Dec 14/92. Has spent the greater part of the time in bed, for the past 3 weeks. Pulse has been, usually, 54 to 66. First, Complained only of pains in his head; later, of a general ill-feeling, weakness & loss of appetite. At this period of his sickness, there seemed a decided element of mental depression. Has today visited by a brother. Dec 16/92. Has been

" 16 up since the afternoon of the 14th and says he is feeling well now & is quite Cheerful.

" 18 Dec 18/92. Went to bed again today, complaining of cramps in his abdomen. Probably Constipated. P 86.

" 19 Dec 19/92. Remains in bed. Complains of chills along his spine, and of pains in his body. Patellar

" 22/25 reflex about normal. Pulse 62. Dec 22/92. Was put on pills of nitrate of silver. Dec 25/92. Bowels sluggish.

" 26 Dec 26/92. Kept his bed quite today. Pulse has been between 50 and 60.

1893

Jan 3/11 Jan 3/93. Wt 149½ pds. Pulse 88. Jan 11/93. 7 PM. Got out through a window, unlocked by a fellow-patient, attempting to descend on a rope of sheets. The support broke as soon as his weight was upon it, he says, falling the full distance, striking upon his feet. Got up and

" 12 walked part-way & stair-way. Jan 12/93. Was restless & suffered considerable pain last night. Left foot is swollen & painful. Small of back is quite painful. Hot sand bag applied to his

" 13 back. No bones were broken. Left foot contused and spine suffered concussion. Jan 13/93. Pulse 92.

" 15 Still suffers pain. Ate nothing today. Jan 15/93. Pulse 79. Yesterday morning; 64 this morning;

" 16 fair quality. Eats better. Has pain, Especially in hips. Jan 16/93. Am. Pulse 64; suffers severe

" 17 pain in back. Jan 17/93. Am. Pulse 56. Since accident, has kept his bed. Suffers pain on motion and is unable to sit up or stand up. Pain is most severe in hips and thighs. There is no tenderness over spine, and very little in legs. Is somewhat depressed mentally.

" 20/23 Jan 20/93. Am. Complains of back & hips being somewhat painful. Jan 23/93. Has a severe

" 24 pain in back. Jan 24/93. Pain in back persists. hot sand bags adered & to be applied. Weight to day 134 pds. (without clothing). Is losing in weight.

Feb 1/4 Feb 1/93. Wt (in underclothes) 133 pds — loss of 1 pound — Feb 4/93. Since 28th ult. Pulse

(Carried to page 36)

Personal and Medical History of Wm Crawford

Whole No. 3078

Residence, Corner of Hoyt & Lucy Sts St. Paul

Date Admission, 20th July 1892

Admitted by, Dr. Phelps Hour, 7. P.M.

How Sent, John B. Olivier. J of P. Ramsey Co.

Sex, Male

Age, 53

Civil Condition, Married

Children, 3

Age Youngest Child,

Occupation, Carpenter

Degree Education,

Profession Religion, not a church member

Habits, Intemperate

Nativity, England

Physicians Committing, V. J. Hawkins and F. F. Baker

Correspondents,

address of Patient's wife is Mrs Wm Crawford, cor. Lucy & Hoyt sts

No. for Year, 295

Insane Relatives, —— (Insanity not hereditary)

Cause Exciting, Intemperance

Cause Predisposing,

Form, Mania a potu (primal)

Accompanying Bodily Disorder, no

Suicidal or Not, Has tried to shoot himself.

Date of this Attack,

Duration, nearly 2 weeks

No. of Attack, not 1st; repeated.

No. of Admissions,

Age First Attack,

Time of Leaving, Sept. 6" '92.

Time in Hospital, 2 m, 16 ds.

Result, Recovered

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Evidently Dr. Baker, July 21/92.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quite active

MEMORY:

Past Events, Seems good

Recent Events, Seems good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, ordinary observation good; Answers

Correct or Illusive, questions well; realizes own condition quite well —

REASONING POWER:

Ordinary Subjects, } Seems good

Own Mental State, }

Special Subjects,

EMOTIONAL STATE:

Normal, Calm, Calm at present

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, about family, probably.

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS: None

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Voluble

GENERAL DESCRIPTIVE REMARKS: Has had no convulsion or vertigo. Habit intemperate; Says 7 or 8 weeks ago, while working at Zumbrota, he strained his back; was laid up at home with pain in back; tried to get work but did not succeed; drank some and got into this trouble; has had trouble in his family recently; and sometimes before; Claims his son used him unkindly, while working for him on a contract at Zumbrota; and that his wife saw only his faults; Claims that if he would leave liquor alone there would be no more family trouble.

Personal and Medical History of Wm Crawford

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10½ ins WEIGHT, 163 pounds (undressed) NUTRITION, Fair

WOUNDS OR ABNORMALITIES, on right Eye-brow (recent); right knee, old injury, somewhat deformed

TONGUE, Tremors, Coarse Coatings, none Promptness Movement, prompt

PUPILS, Equality, Equal Size, about normal

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, finger to nose, eyes shut, fair;

Legs, Standing on foot, fair; Standing, eyes shut, fairly steady; turning quickly, some locomotion

TREMORS, Hands, Yes Tongue, Coarse

Facial Muscles, General, some twitching of neck, on intention

REFLEXES, Patellar, Left normal; (response limited); right some less (note injury)

Other Reflexes,

ARTICULATION, Hesitating, Slurred, No. Good

FACIAL EXPRESSION, somewhat staring

SENSIBILITY,

HEART, Sounds clear

LUNGS, Seem good; expansion 2½ inches.

EXAM. URINE, cloudy yellow color; reaction, acid; Spec. grav. 1020; albumen, none; urea .9%. Aug 1/92 D. W.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Yes Constipated, Irregular,

APPETITE, Good, Medium, Has been rather Poor, but is now improving

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother died (in confinement).

Father or Pat. Relations, Father dead

Brothers or Sisters, no brothers; sisters one, living.

Personal and Medical History of Wm Crawford

1892. This man was brought here by Deputy Sheriff Kinney, with the following history; The form of this attack is paroxysmal dipsomania; has had repeated attacks (once in two weeks). The first symptoms of disease were manifested by violence. Insanity is now manifested in the way of family antipathy; has shown a disposition to injure others; tried to shoot himself last Saturday night when under the influence of liquor, propensity not active at present; there is no disposition to filthy or destructive habits; manifested peculiarities of temper, habits &c before symptoms of insanity appeared; is not subject to any bodily disease; has not been restrained or confined; dep. thinks liquor main cause, as patient is quite well-behaved, when sober; has not been under medical treatment.

July 21 July 21/92. Was restless for a short time last night; slept 7 hours. AM. Pulse 90.

" 22 July 22/92. Was quiet and slept 7 hours, last night. AM. Pulse 82.

" 23 July 23/92. Was somewhat restless, getting out of bed; but slept 7 hours, last night. AM. Pulse 84.

" 24 July 24/92. Was a little restless last night, but slept 8 hours. AM. Pulse 84.

" 25 July 25/92. Rested well and slept 7 hours last night. AM. Pulse 74.

" 26 July 26/92. Quiet and restful, sleeping 8 hours, last night. AM. Pulse 74.

" 27 July 27/92. Slept 7 hours last night. AM. Pulse 80. Is constipated & was given laxative.

" 28 July 28/92. AM. Pulse 72. Has had quite marked tendency to constipation since coming here, and was put on Cascara Sagrada.

Aug 3 Aug 3/92. Has been quiet and has slept well at night, since last note on this subject. Pulse has been 72. 80. 88. 84. 78. and 84. on the past 5 and present mornings. Weight 167 pounds; has gained 4½ pounds, since admission.

" 4 Aug 4/92. The wound on his eyebrow, which was self-inflicted before coming here, healed readily. —

" 9 Aug 9/92. Pulse has been 78. 88. 88. 84. and 84 on the past 5 and present mornings. Was today moved to A².

" 17 Aug 17/92. Has been uniformly quiet at night, resting and sleeping well. Has been quiet, clean, tidy and well-behaved ever since admission. Has, at all times, been free, prompt, and pleasant in conversation. On admission was rather nervous but has grown more calm since. Reads, writes letters, plays games, and is quite active mentally and physically. Does not, in ordinary conversation, give expression to delusion. Is coherent. Bodily health, with the exception of marked tendency to constipation, has been good; improving since coming.

Sep 5 Sep 5/92. Wt 162 pds. Pulse 84.

" 6 Sep 6/92. Has continued, as described above, with the exception that he has, not long since, complained of not sleeping so well on account of worrying about going home and about his past act. Was today visited by his son. Patient proved himself quite emotional by giving way to tears; laments having done as he has in the past.

Was permitted to go home with his son on trial.

Discharged

Personal and Medical History of Wm McBride

1893 Feb 28 [illegible]

NAME. Wm McBride

DATE. 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jan 3d	149½	88	9	
Feb 3d (undressed)	133			
" 24th	143	—		
Mar 2	144	78	1	
Apl 4th	144½	88	½	
May 3d	165	80	20½ (?)	

[illegible] ing for drink note

S OF MR Wm McBride -
GNOSIS.

OTHER DATA.

Appetite poor; up most of time
Bowels regular
Wt. 144
appetite good.
bowels regular
[illegible] well
[illegible] bed
up
up.
in bed
in bed
on hall
on hall
on bed
on hall

From 28.

1894

Albert N. Soutter

July 31 July 2/94. Wt 125 pds. July 31/94. No special change; works faithfully in Tailor Shop. Would like to leave.—

Aug 31 Aug 2/94. Wt 117 " Pulse 78. (Has lost considerably in flesh during the past month, & he has not complained of ill feeling). Aug 31/94. Works daily in Tailor Shop - Is very willing & obliging to do any work in his "line" and does it well. Reads some; plays games in the hall. Talks freely & sensibly - Is somewhat anxious to be allowed to leave here - Physical health is good. Dress very neat.

Sep 1 Sep 1/94. Was, today, permitted to go to St Paul; felt certain he could there secure work at his trade as a tailor -

Oct 25/31 Oct 25/94. Was returned this afternoon - Was put on 13² - Oct 31/94. About the same as before leaving

Nov 2/9 Nov 1/94. Keeps in good flesh & Physical Condition - Nov 17/94. Has been, from time to time, doing some work in the tailor Shop since his return. Says they talk about him, calling him a Scab &c -

" 20 Nov 20/94. Eloped from the Tailor Shop, today. Search made but he could not be found -

Dec 2 Dec 1/94. Has been heard from, near Sparta, Wisconsin -

Discharged

Personal and Medical History of Wm Crawford

1892. This man was brought here by Deputy Sheriff Kinney, wit
The form of this attack is paroxysmal dipsomania; has
in two weeks). The first symptoms of disease were manifested
now manifested in the way of family antipathy; has shown a disposi-
others; tried to shoot himself last Saturday night when under the influence of liquor,
propensity not active at present; there is no disposition to filthy or destructive habits;
manifested peculiarities of temper, habits &c before symptoms of insanity appeared;
is not subject to any bodily disease; has not been restrained or confined; dep. thinks
liquor main cause, as patient is quite well-behaved, when sober; has not been under
medical treatment.

July 21 July 21/92. Was restless for a short time last night; slept 7 hours. Am. Pulse 90. Apr 18

" 22 July 22/92. Was quiet and slept 7 hours, last night. Am. Pulse 82.

" 23 July 23/92. Was somewhat restless, getting out of bed, but slept 7 hours, last night. Am. Pulse 84. May 3

" 24 July 24/92. Was a little restless last night, but slept 8 hours. Am. Pulse 84.

" 25 July 25/92. Rested well and slept 7 hours, last night. Am. Pulse 74.

" 26 July 26/92. Quiet and restful, sleeping 8 hours, last night. Am. Pulse 74.

" 27 July 27/92. Slept 7 hours last night. Am. Pulse 80. Is constipated & was given laxative.

" 28 July 28/92. Am. Pulse 72. Has had quite marked tendency to constipation since coming here, and was put on Cascara Sagrada.

Aug 3 Aug 3/92. Has been quiet and has slept well at night, since last note on this subject. Pulse has been 72. 80. 88. 84. 78. and 84. on the past 5 and present mornings. Weight 167½ pounds; has gained 4½ pounds, since admission. Aug 4/92. The wound on his eyebrow, which was self-inflicted before coming here, healed readily. —

" 9 Aug 9/92. Pulse has been 78. 88. 88. 84. and 84 on the past 4 and present mornings. Was today moved to A².

" 17 Aug 17/92. Has been uniformly quiet at night, resting and sleeping well. Has been quiet, clean, tidy and well-behaved ever since admission. Has, at all times, been free, prompt, and pleasant in conversation. On admission was rather nervous but has grown more calm since. Reads, writes letters, plays games, and is quite active mentally and physically. Does not, in ordinary conversation, give expression to delusion. Is coherent. Bodily health, with the exception of marked tendency to constipation, has been good; improving since coming.

Sep 5 Sep 5/92. Wt 162 pds. Pulse 84.

" 6 Sep 6/92. Has continued, as described above, with the exception that he has, not long since, complained of not sleeping so well on account of worrying about going home and about his past act. Was today visited by his son. Patient proved himself quite emotional by giving way to tears; laments having done as he has in the past.

Was permitted to go home with his son on trial.

Discharged

Personal and Medical History of Wm McBride

Bring out each morning for Dr to make note

DETAILED HISTORY OF SICKNESS OF Wm McBride —
DIAGNOSIS.

DATE:	TEMP. AM	TEMP. PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	OTHER DATA.
July 14	98		70				Appetite fair. up most of time
15	98		78				Bowels regular
16	98		86				Wt 144
17	98		86				appetite good.
18	98		76				Bowels regular
19	98		84				on ball
20	98		68				in bed
21	98		82				up
22	98		78				up
23	98		60				in bed
24	98		62				in bed
25	98		78				on ball
26	98		72				on ball
27	98		76				in bed
Mar 1	98		78				on ball

From 28.

Albert N. Sortter

1894.

July 31 July 31/94. Wt 175 pds. July 31/94. No special change; works faithfully in Tailor Shop. Would like to leave. —

Aug 31 Aug 31/94. Wt 117 " Pulse 78. (Has lost considerably in flesh during the past month, & he has not complained of ill feeling). Aug 31/94. Works daily in tailor-Shop - Is very willing & obliging to do any work in his "line" and does it well. Reads some; plays games in the hall. Talks freely & sensibly - Is somewhat anxious to be allowed to leave here - Physical health is good. Dress very neat.

Sep 1 Sep 1/94. Was, today, permitted to go to St Paul; felt certain he could there secure work at his trade as a tailor — —

Oct 25/31 Oct 25/94. Was returned this afternoon - Was put on 3rd — Oct 31/94. About the same as before leaving

Nov 2/9 Nov 2/94. Keeps in good flesh & Physical Condition - Nov 17/94. Has been, from time to time, doing some work in the tailor Shop since his return. Says they talk about him, calling him a "Rabbit" —

" 20 Nov 20/94. Eloped from the tailor Shop, today. Search made but he could not be found. —

Dec 2 Dec 2/94. Has been heard from, near Sparta, Wisconsin —

Discharged

1892. This man was brought here by De
The form of this attack is paralysis
in two weeks). The first symptoms of
now manifested in the way of famil
others; tried to shoot himself last Sat
propensity not active at present; there is
manifested peculiarities of temper, habits
is not subject to any bodily disease; has not been restrained or confined; dep. thinks
liquor main cause, as patient is quite well-behaved, when sober; has not been under
medical treatment.

July 21 July 21/92. Was restless for a short time last night; slept 7 hours. AM. Pulse 90.
" 22 July 22/92. Was quiet and slept 7 hours, last night. AM. Pulse 82.
" 23 July 23/92. Was somewhat restless, getting out of bed; but slept 7 hours, last night. AM. Pulse 84.
" 24 July 24/92. Was a little restless last night, but slept 8 hours. AM. Pulse 84.
" 25 July 25/92. Rested well and slept 7 hours last night. AM. Pulse 74.
" 26 July 26/92. Quiet and restful, sleeping 8 hours, last night. AM. Pulse 74.
" 27 July 27/92. Slept 7 hours last night. AM. Pulse 80. Is constipated & was given laxative.
" 28 July 28/92. AM. Pulse 72. Has had quite marked tendency to constipation since coming here, and was put on Cascara Sagrada.

4 Aug 3 Aug 3/92. Has been quiet and has slept well at night, since last note on this subject. Pulse has been 72. 80. 88. 84. 78. and 84. on the past 5 and present mornings. Weight 167lb pounds; has gained
" 4 4½ pounds, since admission. Aug 4/92. The wound on his eyebrow, which was self-inflicted before coming here, healed readily. —
" 9 Aug 9/92. Pulse has been 78. 88. 88. 84. and 84 on the past 4 and present mornings. Was today moved to A².
" 17 Aug 17/92. Has been uniformly quiet at night, resting and sleeping well. Has been quiet, clean, tidy and well-behaved ever since admission. Has, at all times, been free, prompt, and pleasant in conversation. On admission was rather nervous but has grown more calm since. Reads, writes letters, plays games, and is quite active mentally and physically. Does not, in ordinary conversation, give expression to delusion. Is coherent. Bodily health, with the exception of marked tendency to constipation, has been good; improving since coming.
Sep 5 Sep 5/92. Wt 162 pds. Pulse 84.
" 6 Sep 6/92. Has continued, as described above, with the exception that he has, not long since, complained of not sleeping so well on account of worrying about going home and about his past act. Was today visited by his son. Patient proved himself quite emotional by giving way to tears; laments having done as he has in the past.
Was permitted to go home with his son on trial.

Discharged

Page 32.

daily in the morning, has ranged from 60 to 73; only on one morning being as high as 80.
Feb 16/93. Wt today (with clothing) 144 pounds; a slight gain. Feb 17/93. For the past 4 weeks, has spent the greater part of the time in his bed, occasionally getting up, dressing & remaining out in the hall for a few days, then returning to bed. Still suffers some from effects of above accident, complaining quite of few of pains in back & hips. Is quiet & apparently rests & sleeps well at night.
" 20 Still continues somewhat gloomy & depressed. Feb 20/93. Visited today by cousin. —
Mar 2 March 1/93. Is in bed complaining of pain in his back. Wt 144 pds. Pulse 78. —
" 9/25 March 9/93. Was today transferred from B² to A². March 25/93. Seems to rest & sleep well at night. Eats daily; feels comfortable. Does not seem to suffer perceptibly at present from the effects of the fall. Is quite cheerful & active. Seems improving.
Apl 18 Apl 18/93. Seems quite well indeed. Friends have been given permission to take him away on trial. Is working at present in Kitchen.
May 3 May 3/93. Has made a very large gain in weight during the past month. Physical health is good. Has continued to work daily, willingly. Conduct & behavior have for some time past, been uniformly good. Has rested & slept well at night & has also been pleasant & sociable. Conversation Coherent & rational.
Was today visited by a brother and by him taken home on trial.

Discharged

From 28.

Albert N. Soutter

1894
July 27 July 27/94. Wt 175 pds. July 31/94. No special change; works faithfully in Tailor Shop. Would like to leave. —
Aug 6 Aug 2/94. Wt 117 " Pulse 78. (Has lost considerably in flesh during the past month, & he has not
" 31 complained of ill feeling). Aug 31/94. Works daily in Tailor-Shop. Is very willing & obliging to do any work in his "line" and does it well. Reads some; plays games in the yard. Talks freely & sensibly. Is somewhat anxious & be allowed to leave here. Physical health is good. Does very neat.
Sep 1 Sep 1/94. Was, today, permitted to go to St. Paul; felt certain he could there secure work at his trade, as a tailor. — —
Oct 25/31 Oct 25/94. Was returned this afternoon. Was sent on B². — Oct 31/94. About the same, as before leaving.
Nov 2/7 Nov 7/94. Keeping good flesh & physical condition. Nov 17/94. Has been, from time to time, doing some work in the tailor-Shop since his return. Says they talk about him, calling him a "Scab &c" —
" 20 Nov 20/94. Eloped from the Tailor Shop, today. Search made but he could not be found. —
Dec 2 Dec 2/94. Has been heard from, near Sparta, Wisconsin.

Discharged

Whole No. 3080
Residence, Golden Valley, Henn. Co. (P.O. Mpls)
Date Admission, 21st July 1892
Admitted by, Dr. Phelps Hour, 7. PM
How Sent, J. R. Corrigan, J of P. Hennepin Co.
Sex, male
Age, 53
Civil Condition, Single
Children, None
Age Youngest Child,
Occupation, Laborer
Degree Education,
Profession Religion, Catholic
Habits, Intemperate, at times.
Nativity, Ireland
Physicians Committing, Wm J. Byrnes & W.A. Jones
Correspondents, D.H. Garrett, Golden Valley, Henn. Co. Minn
(the farmer for whom he works) P.O. Mpls

No. for Year, 297
Insane Relatives, unknown
Cause Exciting, unknown
Cause Predisposing,
Form, Dementia - Secn.
Accompanying Bodily Disorder, None known
Suicidal or Not, Not
Date of this Attack, progressing since Sept '91.
Duration, about 10 months
No. of Attack, 1st as far as can be ascertained
No. of Admissions, 1st
Age First Attack, 52 +
Time of Leaving, Aug. 29-1900
Time in Hospital,
Result, Transferred to Hastings

EXAMINATION ON ADMISSION.

Exd by Dr. Baker, July 28/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Sluggish

MEMORY:
Past Events, Seems good
Recent Events, fair, but somewhat indefinite
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Ordinary observation seems poor; Answers questions, but seems to understand with some difficulty
Correct or Illusive, Does not realize own condition; will not talk much about it.

REASONING POWER:
Ordinary Subjects, Probably poor
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Has been in Hospital at Madison, Wis; left there over a year ago. Does not know if any of brothers or sisters were in hospitals.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Possibly
Exalted,
Depressed, Seems so.

DELUSIONS:
Systematized or Not, Claims he owns a farm near Minneapolis and has a home in Madison; relations
Special Subjects, died & left him a lot of property.
Transitory or Not,

HALLUCINATIONS: Probably none.
ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent usually
Voluble or Reticent, Wont talk except in answer to questions.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 1/2 in (5 or 6 years ago 140-150 lbs) WEIGHT, 128 pounds NUTRITION, rather poor
WOUNDS OR ABNORMALITIES, Wounds, none as far as seen; has a barrel-shaped chest.
TONGUE, Tremors, Slight, coarse Coatings, slight Promptness Movement, prompt
PUPILS, Equality, Equal Size, about normal
Response Light, Yes Accommodation, Yes
SIGHT, Impaired; Equally.
HEARING, very much impaired
COORDINATION, Arms, finger to nose, eyes shut; good.
Legs, Standing on foot, fair; Standing, Eyes shut, some swaying.
TREMORS, Hands, Tongue, slight, coarse
Facial Muscles, General,
REFLEXES, Patellar, Equal; exaggerated - about 8 - (Dr P's Scale).
Other Reflexes,
ARTICULATION, Hesitating, Slurred, fair, but shows lack of education.
FACIAL EXPRESSION, Indifferent
SENSIBILITY,
HEART, Seems normal
LUNGS, Emphysematous
Aug 1/92 EXAM. URINE, Color dark yellow; reaction acid; Spec. grav. 1026; albumen none; urea - 9%.
D.M.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, Yes Constipated, Irregular,
APPETITE, Good, fairly. Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 80. radial artery atheromatous RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Had previous attack probably ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother dead
Father or Pat. Relations, Father dead
Brothers or Sisters, 9 Brothers all dead; sisters dead.

1892 This man was brought here by deputy-Sheriff Keller; the following history accompanied the warrant; form of this attack is chronic; patient has been intemperate at times; first symptoms of disease were manifested in September '91 when he was discovered in a straw-pile, acting strangely; deluded; in March '92 became deluded, pulling his hair and exclaiming "oh! ye gods". Wanders aimlessly, cursing and swearing. Thinks he owns the place; "has pow-wows" — insanity is now manifested by strange actions &c; conceals himself; watching for some one; impaired memory; after dark, goes out, swearing, cursing, incoherent, pounding the ground, &c: has shown no disposition to injure others; has not attempted suicide; is untidy; he thinks that he was in the asylum at Madison, this; has not been under medical treatment.

Was examined in May '92 before the Probate Court, but was considered harmless, but insane, and was sent back to the farm to await further developments.

Impossible to obtain a complete history of this man. Picked up, as a tramp, by a friendly farmer, who kept him for nearly a year. The patient refuses to talk or give his previous history. Has grown worse since first examination; more demented in conduct. Has ideas of . Thinks he owns his employer's place and stock and that unknown people annoy him. Has, by his conduct, threatened others.

July 22 July 22/92. Comparatively quiet last night, sleeping about 7 hours.
" 23 July 23/92. Was quiet again last night and slept 7 hours.
" 24 July 24/92. Slept 7 hours last night
" 25 July 25/92 Slept 8 hours last night.
" 27 July 27/92. Complains today of headache and of not feeling well. Was permitted to go to bed. Pulse not much accelerated. PM. Pulse 64.
" 28/29 July 28/92. Am. Pulse 60. PM Pulse 64. July 29/92. Am Pulse 76. PM. Pulse 90.
" 30/31 July 30/92. Am " 96. PM " 84. Coughs. July 31/92 Am P. 64 PM " 64
Aug 1/3 Aug 1/92. Am " 68. Aug 3/92. Wt. 123 pounds. Pulse 79.
Aug 7/11 Aug 7/92 Coughed quite hard last night Aug 11/92. Again coughed quite hard during the night
" 13/15 Aug 13/92 Coughed + vomited last night. Aug 15/92. Coughed + vomited again last night.
" 19 Aug 19/92. Is never noisy except through coughing, at night and usually sleeps well. During the day, is quiet, clean, tidy and well-behaved. Does not look up + around much; does not speak, unless spoken to; moves slowly and without any animation. Bodily health is not very good. Has Emphysema accompanied with Cough. Has been moved to A[4]
Sep 5 Sep 5/92. Wt 132 pounds. Pulse 70. Has gained in weight.
" 19 Sep 19/92. Still quiet. Stands apart from others, having nothing to do with them.
Oct 19/21 Oct 19/92. Wt 135 pds. Pulse 92. Oct 19/92. Continues quiet. Sits entirely apart from others, not
" 22 mingling with them at all. Speaks only when addressed. Oct 22/92. Found by the night-watch up, walking the floor last night, complaining of a pain in his breast.
Nov 7 Nov 7/92. Wt. 144 pds. Pulse 88.
" 18 Nov 18/92. Is uniformly quiet and seems to rest and sleep well at night. Still persistently gets apart from the others, paying no attention to what is going on around him, looking out of the

NAME. Charles Rork

DATE, 189[3]	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	143	84	2½	
Feby 3d	140½	88	-	2½
Mar 3d	148	74	7½	
Apl 4th	139¼	80		8¾
May 3d	139½	72	-	-
June 5th	138½	80	-	¾
July 6th	137	80	-	1½
Oct 3d	138	64	1	

turns like one roused from meditation or day dreaming.

somewhat inclined to be obstinate. Was up, last night, night-watch attempted to quiet him, he attacked the ed to B[4]. Dec 25/92. Wt 140½ pds. Pulse 74.

quiet, at night. Has been well-behaved. Goes into room meeting everyone.

93. Has been uniformly quiet + well-behaved since last note.

93. Continues, in all respects, about the same, as described

uiet + later, an attendant + was extremely noisy last night. meeting alike fellow-patients, attendants + officers;

proach.

+ behavior by day about the same. Bodily health fair for him. eps well at night. Has no cough. Is very reserved + does not . Does not talk unless spoken to. Is of cleanly habits. — or physical condition, since last note.

r; no cough noticed. Quiet + well-behaved. Talks to no one. less. "Sees devils trying to choke him". Cleanly in habits. in condition.

egular. Well-behaved. Otherwise, about the same. — + contentedly. Health about as usual.

to report. — Health is fair Nov 2 93 Wt 130. P 74 Nov 30 93 Appetite fair. Bowels reg: Health good Well behaved. Scarcely talks any. Has delusions, mostly at night, the imagines he is attacked by some person. Habits cleanly.

Dec 2 93 / Jany 31 1894 / Feb 28 — Wt 144 P 72. Dec 31 93 No change. Jany 31 94 Same; continues well-behaved. Seldom talks. Still manifest delusions. — Feb 28/94. A quiet, inoffensive patient, usually. At times, will walk up to a window, and pound violently, twisting and turning his body, the while. Works a little, in the ward. Health apparently good. March 31/94. No material change to note.

Mch 31

Apl 30 April 30/94. No change in condition of patient, at this date; either mentally or physically. ——

May 31 / June 30 / July 31 — During this Period, patient has been, generally, quiet + well-behaved: caring, noticeable at the ward; seldom speaks; manifests hallucinations, still; is not repeated, lately, as having the peculiar actions above mentioned. Habits are clean; dress is neat + tidy. His health is apparently good. ——

Aug 31 / Sep 30 / Oct 31 — During these 3 months, there is no special change to note. quiet; inoffensive. Works some at the ward. walks a little + at times, quite rationally. Has still the peculiar habit of twisting his body + striking at imaginary objects. Shows hallucinations. Clinches his hand in whiskers as if pressed to tear them out. Habits clean. Health remains good.

Nov 30 / Dec 31 93 / Jany 31 / Feby / March / Apl 30 — During this period, patient has been quiet; occasionally, makes violent writhings + twistings of his body + sweeping to and, at the same time. Habits clean. Health apparently good. During this quarter, seemingly no change. He has been quiet; works around; gazes out of doors; makes motions as if trying + pull out his whiskers. Habits clean. Dress neat. Health seems good Was in bed for 3 weeks (last of April); complained of fever + chills, yet did not seem feverish — says it is the ague. —— To Manuscript book "a" page 204.

1892 This man was brought here by deputy-Sheriff
-companied the warrant; form of this attack is
at times; first symptoms of disease were ma
discovered in a straw-pile, acting strangely;
pulling his hair and exclaiming "oh! yes
swearing. Thinks he owns the place; has pe
strange actions &c; conceals himself; wate
dark, goes out, swearing, cursing, incoh
disposition to injure others; has not alte
was in the Asylum at Madison, Wis; ha
Was examined in May '92
but insane, and was sent back to the farm
Impossible to obtain a co
a friendly farmer, who kept him for ne
history. Has grown worse since first
of . Thinks he owns his fa
him. Has, by his conduct, three
July 22 July 22/92. Comparatively quiet last
" 23 July 23/92. Was quiet again last nigh
" 24 July 24/92. Slept 7 hours last night
" 26 July 26/92. Slept 8 hours last night.
" 27 July 27/92. Complains today of headache and of not feeling well. to go to bed. Pulse
not much accelerated. PM. Pulse 84.
" 28/29 July 28/92. Am. Pulse 60. PM Pulse 84. July 29/92. Am Pulse 76. PM. Pulse 90.
" 30/31 July 30/92. Am " 96. PM " 84. Coughs. July 31/92 Am. P 64 PM " 64
Aug 1/3 Aug 1/92. Am " 68. Aug 3/92. Wt. 123 pounds. Pulse 79.
Aug 7/11 Aug 7/92. Coughed quite hard last night. Aug 11/92. Again coughed quite hard during the night.
" 13/15 Aug 13/92. Coughed + vomited last night. Aug 15/92. Coughed + vomited again last night.
" 19 Aug 19/92. Is never noisy except through coughing, at night and usually sleeps well. During the day, is quiet, clean, tidy and well-behaved. Does not look up + around much; does not speak, unless spoken to; moves slowly and without any animation. Bodily health is not very good. Has Emphysema + account-ation with cough. Has been moved to A[4]
Sep 5 Sep 5/92. Wt 132 pounds. Pulse 70. Has gained in weight.
" 19 Sep 19/92. Still quiet. Stands apart from others, having nothing to do with them.
Oct 21/24 Oct 21/92. Wt 135 pds. Pulse 92. Oct 19/92. Continues quiet. Sits entirely apart from others, not
" 22 mingling with them at all. Speaks only when addressed. Oct 22/92. Found by the night-watch up,
walking the floor last night, complaining of a pain in his breast.
Nov 1 Nov 1/92. Wt. 144 pds. Pulse 88.
" 18 Nov 18/92. Is uniformly quiet and seems to rest and sleep well at night. Still persistently
gets apart from the others, paying no attention to what is going on around him, looking out of the

92 windows, usually. When disturbed, turns like one roused from meditation or day dreaming. Seems in fairly good health.
Dec 3 Dec 3/92. Has been, for several days, somewhat inclined to be obstinate. Was up, last night, in his room + extremely noisy. When the night-watch attempted to quiet him, he attacked the latter violently. Was, today, transferred to B[4]. Dec 5/92. Wt 140½ pds. Pulse 76.
" 5
" 19 Dec 19/92. Has remained uniformly quiet, at night. Has been well-behaved. Goes into rooms by himself + shuts the door, avoiding meeting everyone.
1893
Jan 3/9 Jan 3/93. Wt 143 pds. Pulse 88. Jan 9/93. Has been uniformly quiet + well-behaved since last note. Avoids the D[r] and the Company of all.
Feb 3/19 Feb 3/93. Wt 140½ pds. Pulse 88. Feb 19/93. Continues, in all respects, about the same, as described in last note. Bodily health fair.
March 6 March 6/93. Attacked a fellow patient + later, an attendant + was extremely noisy last night.
" 25 March 25/93. Quiet at night. Avoids meeting alike fellow-patients, attendants + officers; wanders aimlessly + idly about.
April 19 April 19/93. Avoids contact with person + approach.
May 20 May 20/93 Is quiet at night. Conduct + behavior by day about the same. Bodily health fair for him.
June 30 June 30/93. Appetite is fairly good. Sleeps well at night. Has no cough. Is very reserved + does not associate much with his fellow-patients. Does not talk unless spoken to. Is of cleanly habits. —
July 31 July 31/93. No change in either mental or physical condition, since last note.
Aug 1 Aug 1/93. Appetite fair; bowels regular; no cough noticed. Quiet + well-behaved. Talks to no one. Is rather quick-tempered but harmless. "Sees devils trying to choke him". Cleanly in habits.
" 31 Aug 31/93. No material change in condition.
Sep 11 Sep 11/93. Appetite fair. Bowels regular. Well-behaved. Otherwise, about the same. —
" 30 Sep 30/93. Lives along here quietly + contentedly. Health about as usual.
Oct 31 Oct 31/93. No noticeable change to report. — Health is fair Nov 2 93 Wt 130 P 74 Nov 30 93 Appetite fair. Bowels reg: Health good Well behaved. Scarcely talks any. Has delusions, mostly at night, that he imagines to be attacked by some person + habits cleanly.
Dec 29 1893 Jany 31 } Wt 141 P 72. Dec 31 93 no change. Jany 31 94 Same; Continues well-behaved. Seldom talks. Still manifest delusions. —
Feb 28 Feb 28/94. A quiet, inoffensive patient, usually. At times, will walk up to a window, and pound violently, twisting and turning his body, the while. Works a little, in the ward. Health apparently good. March 31/94. No material change to note.
March 31
April 30 April 30/94. No change in condition of patient, at this date, either mentally or physically. ——
May 31 June 30 July 31 } During this period, patient has been, generally, quiet + well-behaved: causing no trouble in the ward; seldom speaks; manifests hallucinations, still; is not repeated, lately, as having the peculiar actions above mentioned. Habits are clean; dress is neat + tidy. His health is apparently good. ——
Aug 31 Sep 30 Oct 31 } During these 3 months, there is no special change to note - quiet; inoffensive + troublesome in the ward. Talks a little + at times, quite rationally. Has still the peculiar habit of twisting his body + striking at imaginary objects. Hears hallucinations. Clinches his hand in whiskers as if he were trying to pull them out. Habits clean. Health seems good.
Nov 30 Dec 31, 94 Jany 31 95 } During this period, patient has been quiet; occasionally makes violent writhings + twistings of his body + cursing someone, at the same time. Habits clean. Health apparently good.
Feby March April 30 95 } During this quarter, seemingly no change. Patient has been quiet; walks around; gazes out of doors; makes motions as if trying to pull out his whiskers. Habits clean. Dress neat. Health seems good. Was in bed for 3 weeks (last of April): complained of fever + chills, yet did not seem feverish - says it is the ague. —— To Transfer book "A" page 204.

Personal and Medical History of John Linn

Whole No. 3081

Residence,

Date Admission, 22nd July 1892.

Admitted by, Dr Kilbourne Hour, 2. P.M.

How Sent, John Peterson J of P, County of Nicollet

Sex,

Age,

Civil Condition,

Children,

Age Youngest Child,

Occupation,

Degree Education,

Profession Religion,

Habits,

Nativity,

Physicians Committing,

Correspondents,

No. for Year, 298

Insane Relatives,

Cause Exciting,

Cause Predisposing,

Form, Dipsomania.

Accompanying Bodily Disorder,

Suicidal or Not,

Date of this Attack,

Duration,

No. of Attack,

No. of Admissions,

Age First Attack,

Time of Leaving, May 27. 1897

Time in Hospital, 4 years 10 mos 5 das.

Result, Discharged 5/27/97.

General Laws '97. Chap. 335.

EXAMINATION ON ADMISSION.

Exd by Dr Baker, July 28/92. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, fairly quick

MEMORY:

Past Events, seems good

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Ordinary observation, fair; not close.

Correct or Illusive, Answers questions fairly well.

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm, Yes.

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent.

Voluble or Reticent, not very free; does not talk much.

Personal and Medical History of John Linn

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Fair

WOUNDS OR ABNORMALITIES, Wounds, none; abnormalities, none probably.

TONGUE, Tremors, marked, coarse Coatings, slight Promptness Movement, rather deliberate.

PUPILS, Equality, Equal Size, somewhat dilated.

Response Light, very slight Accommodation, very slight

SIGHT, far-sighted; right eye hazy.

HEARING, Good.

COORDINATION, Arms, fingers to nose, Eyes shut, good;

Legs, standing on foot, poor (one foot); standing, Eyes shut, fairly steady.

TREMORS, Hands, Tongue, Marked, coarse

Facial Muscles, of face, on intention. General,

REFLEXES, Patellar, Equal; somewhat exaggerated; 5 or 6 (Dr P's scale).

Other Reflexes,

ARTICULATION, Hesitating, Slurred, Fairly good.

FACIAL EXPRESSION, fair

SENSIBILITY,

HEART, Sounds clear, loud.

LUNGS, Seem good; expansion 2½in.

July 28/92 (Dr M) EXAM. URINE, Color Yellow; reaction, acid; Spec. grav. 1027; albumen none; urea, 1·4 %.

Sediment quite heavy & medium quantity.

Dr B Microscopy - a few oxalates of lime - urates - uric crystals - abundant amorphous forms.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, somewhat	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of John Linn

1892. This man was brought here on an "Inebriate Warrant" by Dr. A. T. Kilbourne; no history accompanied the Warrant.

July 23 July 23/92. Says he did not sleep well last night. Ate a good breakfast this morning; no nausea or vomiting. Is constipated.

" 24 July 24/92. Was somewhat uneasy last night. Slept but 2 hours.

" 25 July 25/92. Slept about 4 hours last night; somewhat restless.

" 26 July 26/92. Slept about 5 hours last night.

" 27 July 27/92. Slept well all last night. Complains today that his right eyes feels sore, and is weak at times, having a film over it. It is not, however, inflamed in appearance.

" 29 July 29/92. Has slept well the past 2 nights. Has catarrh in his head.

Aug 3 Aug 3/92. Wt. 134 pounds. Pulse 84.

" 7 Aug 7/92. Still complains about his eyes bothering him & feeling weak. Charges it to nasal catarrh. —

" 11 Aug 11/92. Is constipated.

" 14 Aug 14/92. Feels well —

" 19 Aug 19/92. Has continued restful and to sleep well at night. Eat well and is not troubled with nausea or vomiting - Has sometimes tendency to constipation. His only physical discomfort is located in his eyes and head. Has not manifested delusion or hallucination. Personal habits are good. For sometime past, has been working outside, daily - Is quite industrious & active — Bodily health fair.

Sep 5 Sep 5/92. Wt 137 pds. Pulse 88.

" 20 Sep 20/92. Continues quiet and sleeps well at night. Walks outside daily. Is quite pleasant and contented. Writes occasional letters.

Oct 2 Oct 2/92. Complains that his eye-sight is growing gradually dimmer, and that he has pain in his eyes of a smarting character. Conjunctiva is somewhat inflamed and the eyes water. Is remaining on the Ward on account of his Eyes.

" 4 Oct 4/92. Wt. 137 pds. Pulse 84.

" 16 Oct 16/92. Complains of discomfort in his bowels, and tendency to constipation.

" 21 Oct 21/92. Was given a wash of nitrate of silver for his eyes, and is on tonics, internally; is feeling somewhat better.

Nov 2 Nov 2/92. Wt 143 pds. Pulse 82. Complains that his scalp feels sore & that draughts of

" 18 air upon it are painful. Nov 18/92. Has been suffering from lumbago and general cold

" 19 the last few days. Nov 19/92. Walked for a time at the chicken house but found the cold too much for him, troubling his eyes. Has, more recently, worked on the furnaces. Bodily health seems somewhat better. —

Dec 5/10 Dec 5/92. Wt 144 pds. Pulse 96. Dec 20/92. Is working daily with the man who has charge of the

" 21 furnaces. Is troubled somewhat with his Eyes. Dec 21/92. Remained in the ward today. Caught cold.

1893 Jan 3/93 Jan 3/93. Wt 147 pds. Pulse 84. Has gained steadily in weight. Jan 20/93. Has remained in

the ward during the past 3½ week. Has improved in feeling of health. Suffers occasionally from neuralgia of the face.

Personal and Medical History of John Linn

NAME. John Linn

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jan 3d	147	84		
Feb 3d	140½	90		6½
Mar 3d	142	80	1½	
Apl 4th	141	86		1
May 3d	137½	85		3½
June 6th	143	100	5½	
July 14th	138	108		5
Aug 3d	138	76	—	—
Sep 5th	139	76	1	—
Oct 4th	140	74	1	—

Jan 3/93. Wt 147 pds. Pulse 84. Has gained steadily in weight. Jan 20/93. Has remained in the ward during the past 3½ week. Has improved in feeling of health. Suffers occasionally from neuralgia of the face.

Feb 3 Feb 3/93. Wt 140½ pds. Pulse 90. Has lost 6½ pounds in weight during past 4 weeks, without

" 20 apparent cause. Is uniformly restful at night. Does not complain of pain. Is daily, though now at some lighter work. Bodily health fair.

Mar 3 Mar 3/93. Wt 142 pds. Pulse 80. Has gained 1½ pounds in weight during past month. Is sleeping well. Up daily; out at work; for several days past has been feeling ill, of general pains & weakness, loss of appetite & nausea. Has kept his bed some, especially the last 2 days. Pulse, 100; temperature subnormal; no appearance of fever.

Apl 4th Apl 4/93. Wt 141 pds. Pulse 86. Has been in bed since the last note, having been in bed part of the time. Has evidently had middle-ear inflammation. Apl 3/93. Ear is

" 13 red. Pain is quite severe and keeps him awake. — Has had Acute Incipient Influenza. A relapse occurred about the

" 21 suppuration & rupture of the drum, free discharge, and with quite marked depression & some irritability. Treatment irritation and anodynes. Patient is a little better at present.

May 3d May 3/93. Patient still suffered considerable pain from his ear; was

" 11 restless & occasional Chills & sweating. Sleep also was much disturbed. Is feeling some better, though still up and down from his bed.

" 17 May 11/93. Chills, sweating, nausea &c. May 11/93. Breath is very bad;

" 18 May 13/93. There is an abscess; it is swollen red & hot; behind ear.

" 19 May 19/93. Ear is now somewhat less painful & patient is feeling

" 30 better. Does not walking. Appetite & rest at night have also improved. Has some Cough, at times. Has almost recovered from the above

June 17 illness (a grippe). Goes out walking & keeps close to the lawn & grounds. At times, complains of

" 18 his ear giving him pain. Is quiet & well-behaved. Free & pleasant in conversation, when it is begun.

" 19 Writes a few letter to his friends. —

" 30 June 17/93. Patient had so much improved, that arrangements were made for his doing work down

July 1/14 town, and he went there this evening. June 18/93. Went to work this morning but was so intoxicated at

" 21 noon, that he had to be sent for & brought back here. Was very boisterous & quarrelsome when put back in

" 24 the ward. When he got over his "spree", he was very much ashamed of his actions. June 19/93. Appetite

" 31 poor. Complains of inability to pass urine. June 30/93. No particular change to note. Quiet & well-behaved

Aug 10/31 July 1/93. Eye was hurt today by a brush. This producing a general inflammation. July 14/93. His appetite is somewhat improved. Bowels irregular. Remains on ward since Eye was hurt. July 21/93. Eye is completely cleared up, but the inflammation was very severe for a time. July 24/93. Began working about the lawn, with the gardener, today. July 31/93. Complains, today, of backache. Plaster applied to relieve pain. Continues to work outside daily. Health is fairly good.

Sep 30 Aug 10/93. Keeps in his usual health & flesh. Aug 31/93. About the same. Recently has begun to work in the Store-room. Works well there.

Sep 30/93. Keeps about the same, from month to month. Still works daily in the Store. —

(carried to 255)

1892. This man was brought here on an "Inebriate Warrant" by Dr A. T. Kilbourne, no history accompanied the Warrant.

July 23 July 23/92. Says he did not sleep well last night. Ate a good breakfast this morning; no nausea or vomiting. Is constipated.

" 24 July 24/92. Was somewhat uneasy last night. Slept but 2 hours.

" 25 July 25/92. Slept about 11 hours last night; somewhat restless.

" 26 July 26/92. Slept about 5 hours last night.

" 27 July 27/92. Slept well all last night. Complains today that his right eyes feels sore, and is weak at times, having a film over it. It is not, however, inflamed in appearance.

" 29 July 29/92. Has slept well the past 2 nights. Has catarrh in his head.

Aug 3 Aug 3/92. Wt 134 pounds. Pulse 84.

" 7 Aug 7/92. Still complains about his eyes bothering him & feeling weak. Charge it to nasal catarrh. —

" 11 Aug 11/92. Is constipated.

" 14 Aug 14/92. Feels well —

" 19 Aug 19/92. Has continued restful and to sleep well at night. Eat well and is not troubled with nausea or vomiting - Has sometimes tendency to constipation. His only physical discomfort is located in his eyes and head. Has not manifested delusion or hallucination. Personal habits are good. For sometime past, has been working outside, daily - Is quite industrious & active — Bodily health fair.

Sep 5 Sep 5/92. Wt 137 pds. Pulse 88.

" 20 Sep 20/92. Continues quiet and sleeps well at night. Walks outside daily. Is quite pleasant and contented. Writes occasional letters.

Oct 2 Oct 2/92. Complains that his eye-sight is growing gradually dimmer, and that he has pain in his eyes of a smarting character. Conjunctiva is somewhat inflamed and the eyes water. Is remaining on the Ward on account of his Eyes.

" 4 Oct 4/92. Wt. 137 pds. Pulse 84.

" 16 Oct 16/92. Complains of discomfort in his bowels, and tendency to constipation.

" 21 Oct 21/92. Was given a wash of nitrate of silver for his eyes, And is on tonics, internally; is feeling somewhat better.

Nov 2 Nov 2/92. Wt 143 pds. Pulse 82. Complains that his scalp feels sore & that draughts of air upon it are painful. Nov 18/92. Has been suffering from lumbago and general cold the last few days. Nov 19/92. Worked for a time at the chicken house but found the cold too much for him, troubling his eyes. Has, since recently, worked on the furnaces. Bodily health seems somewhat better. —

Dec 5/20 Dec 5/92. Wt 144 pds. Pulse 96. Dec 20/92. Is working daily with the man who has charge of the

" 21 furnaces. Is troubled somewhat with his Eyes. Dec 21/92. Remained at the ward today. Caught cold.

Jan 3/93 Jan 3/93. Wt 147 pds. Pulse 84. Has gained steadily in weight. Jan 20/93. Has remained in at the ward during the past 3½ weeks. Has improved in feeling of health. Suffers occasionally from neuralgia of the face.

Jan 31/93. Am. Complains of pain in passing his urine: given medicine for his bladder.

Feb 3 Feb 3/93. Wt 140½ pds. Pulse 90. Has lost 6½ pounds in weight during past 4 weeks, without

" 20 apparent cause. Feb 20/93. Has continued uniformly restful at night. Does not complain much of ill-feeling of late. Takes out daily, though now at some lighter work. Bodily health is fairly good.

March March 29/93. Visit recently, has been resting & sleeping well. Up daily; out at work; for several days past, has been complaining quite bitterly of feeling ill, of general pains & weakness, loss of appetite and insomnia, with some depression of spirits. Has kept his bed some, especially the last 2 days. Pulse, while lying down, has been normal, & slightly subnormal; no appearance of fever.

Apl 12 April 12/93. Has been ailing, since others, has remained the last note, having been in bed part of the time.

" 13 Today, has pain, quite severe, in his right ear, evidently middle-ear inflammation. Apl 13/93. Ear is discharging freely, drum evidently has ruptured. Pain is quite severe and keeps him awake. —

" 20 Apl 20/93. Attack, of the latter part of last month, considered influenza. A relapse occurred about the 12th inst, with middle-ear inflammation & suppuration & rupture of the drum, free discharge, and severe pain, broken rest, and poor appetite, with quite marked depression & some irritability. Treatment consisted of application of heat, counter-irritation and anodynes. Patient is a little better at present.

May 4 May 4/93. For some days succeeding Apl 20th, patient still suffered considerable pain from his ear; was also much troubled with headache & constipation & occasional Chills & sweating. Sleep also was much broken; for the past week or so, however, has been feeling some better, though still up and down from his bed.

" 11 Had a renewal of his sickness last night, chills, sweating, nausea &c. May 11/93. Breath is very bad;

" 13 complains of headache, chills, fever &c. May 13/93. There is an abscess; it is swollen red & hot; behind ear.

" 16/22 May 16/93. Ear is still very painful. May 22/93. Ear is now somewhat less painful & patient is feeling much better. Is now up daily & occasionally goes out walking. Appetite & rest at night have also improved.

" 31 May 31/93. Appetite is fair; bowels regular. Has some cough, at times. Has about recovered from the above attack (La Grippe). Goes out walking & helps some in the lawn & grounds. At times, complains of his ear giving him pain. Is quiet & well-behaved. Is pleasant in conversation, when it is begun. Writes a few letter to his friends. —

June 17 June 17/93. Patient had so much improved, that arrangements were made for his doing work down

" 19 town, and he went there this evening. June 18/93. Went to work this morning but was so intoxicated at noon, that he had to be sent for & brought back here. Was very boisterous & quarrelsome when put back in the ward. When he got over his "spree", he was very much ashamed of his actions. June 19/93. Appetite

" 30 poor. Complains of inability to pass urine. June 30/93. No particular change to note. Quiet & well-behaved.

July 1/Mt July 1/93. Eye was hurt today by a brush. This producing a general inflammation. July 14/93. His

" 21 appetite is somewhat improved. Bowels irregular. Remains on ward since eye was hurt. July 21/93. Eye

" 22 is completely cleared up, but the inflammation was very severe for a time. July 24/93. Began working

" 31 about the lawn, with the gardener, today. July 31/93. Complains today of backache. Plaster applied to relieve pain. Continues to work outside daily. Health is fairly good.

Aug 10/31 Aug 10/93. Keeps in his usual health & flesh. Aug 31/93. About the same. Recently has begun to work in the store-room. Works well there.

Sep 30 Sep 30/93. Keeps about the same, from month to month. Still works daily in the store. —

(carried to 258)

Personal and Medical History of Joseph Roloff

Whole No. 3082.
Residence, St. Paul, Minn
Date Admission, 25th July 1892.
Admitted by, Dr. Kilbourne Hour, 7 P.M.
How Sent, John. B. Olivier Jof P., Ramsey Co.
Sex, male
Age, 35
Civil Condition, Widower
Children, Two — girls
Age Youngest Child,
Occupation, Sewing-machine Agent
Degree Education,
Profession Religion, not a church member
Habits, Bad
Nativity, Germany; came to America in 1866
Physicians Committing, A. Macdonald & Geo. J. Hauley
Correspondents, mother-in-law - Eckersberg - 70 Larabee St.
Brother-in-law, 25 E Chicago Ave, Chicago, have 2 children

No. for Year, 301
Insane Relatives, None
Cause Exciting, unknown
Cause Predisposing,
Form, Acute Mania
Accompanying Bodily Disorder, unknown
Suicidal or Not,
Date of this Attack,
Duration,
No. of Attack, 1st
No. of Admissions,
Age First Attack,
Time of Leaving, Nov. 12" 92
Time in Hospital, 3 mos 15 ds.
Result, Rec'd,

EXAMINATION ON ADMISSION.

Exd by Dr. Baker, Aug 4/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear at present
Quick or Sluggish, Quite active

MEMORY:
Past Events, Good
Recent Events, Seems good
Special Subjects,

PERCEPTIVITY:
Alert or Dull, ordinary observation good; answers
Correct or Illusive, questions well; does not realize am card[s]

REASONING POWER:
Ordinary Subjects, in error
Own Mental State, "
Special Subjects, "

GENERAL DESCRIPTIVE REMARKS:
Has been intoxicated

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Yes
Depressed,

DELUSIONS:
Systematized or Not,
Special Subjects, none detected
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent at present.
Voluble or Reticent, Voluble

Personal and Medical History of Joseph Roloff

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 3½ in WEIGHT, 98½ lbs (Aug 3d) (usual wt. 110 lbs) NUTRITION, Not very good.
WOUNDS OR ABNORMALITIES, Scar on forehead and on left hand. Tattoo on left fore-arm "J R".
TONGUE, Tremors, Coarse Coatings, slight Promptness Movement, prompt
PUPILS, Equality, Equal Size, Normal
Response Light, Yes Accommodation, Yes
SIGHT, Good
HEARING, left ear good; right ear much impaired.
COORDINATION, Arms, Finger to nose, eyes shut, good;
Legs, Standing on foot, good; Standing Eyes shut, good.
TREMORS, Hands, Tongue, Coarse
Facial Muscles, General,
REFLEXES, Patellar, Equal; about normal.
Other Reflexes,
ARTICULATION, Hesitating, Slurred, No; good
FACIAL EXPRESSION, about normal
SENSIBILITY,
HEART, 2nd Sound loud & accentuated
LUNGS, Seem good; expansion 2 inches
Aug 4/92 Dr. Hr EXAM. URINE, Color, cloudy yellow; reaction acid; spec. grav. 1027; albumen none; urea 1 %.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, yes	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 84	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Has not had previous attack ONSET GRADUAL OR SUDDEN, Sudden probably. No Convulsion or vertigo.
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother died of consumption
Father or Pat. Relations, Father dead; think of paralysis.
Brothers or Sisters, one brother died of consumption and one, cause unknown; 2 sisters (both living) one sister troubled with headaches.

1892. This man was brought here by Deputy-Sheriff Kinney with the following history. Habits have been bad; disease appears chronic in form; insanity is now manifested by the delusion of persecution; has shown a disposition to injure child; has no disposition to filthy or destructive habits; no restraint or confinement has ever been employed; has not been under medical treatment.

July 25 July 25/92. On admission, was very excited and had to be carried to the ward, bodily. Was given a hypodermic at 11 PM, on account of his noisiness and excitement.

" 26 July 26/92. Quieted down after receiving hypodermic, and slept about 6 hours, last night. Am. Is out on the hall and comparatively quiet. PM. Became somewhat excited.

" 27 July 27/92. Quite noisy at times during the night, sleeping about 4 hours. Am. Has refused food. Pulse is somewhat accelerated.

" 28 July 28/92. Was quite noisy and restless last night, sleeping none at all. Am. Ate supper last night and breakfast this morning. Is noisy. Talking almost incessantly, & excitedly. Saying often "In the name of the Father & Son and Holy Ghost". Talks about devils, poison in food, arsenic in clothes etc. Has been kept out on the hall and has kept his clothing on.

" 29 July 29/92. Was only slightly noisy last night and slept 7 hours. Is now eating fairly well. Went out walking today.

" 31 July 31/92. Slept 7 and 9 hours the past 2 nights respectively, and is today comparatively calm, quiet and rational.

Aug 3 Aug 3/92. Has been perfectly quiet at night sleeping usually 9 hours each night since last note. Wt. 98 lbs pounds. Pulse 86.

" 11 Aug 11/92. Has been uniformly quiet at night, sleeping 8 or 9 hours each night, since last note.

" 14 Aug 14/92. Has been somewhat restless the last 3 nights, sleeping 6 to 7 hours each night.

" 22 Aug 22/92. Has been occasionally restless for an hour or two at night, and has slept from 6 to 9 hrs. Each night, since last note. Has been comparatively quiet and well-behaved, ever since 31st ultc. Has always been clean and tidy & never destructive. Talks very freely & pleasantly, and usually coherently, but occasionally gives vent to delusions. These are usually on religious subjects. For a few days after coming here was very diligent in "boxing" his fellow-patients around and even struck some of them. Has lately been better-behaved. Bodily health has been uniform and fairly good.

Sep 5/92 Sep 5/92. Wt 108 pds. Pulse 86. Is now on B3. Sep 10/92. Was moved to B1.

" 22 Sep 22/92. Is uniformly quiet and appears to sleep well at night. Is somewhat inclined to talk rather freely and loudly, but is otherwise quiet and is well-behaved. Does not give expression to distinct delusions but is somewhat exalted. Thinks himself entirely well & that he ought to go home. Plays a good game of chess & plays other games. Bodily health has improved.

Oct 4/92 Oct 4/92. Wt 111 pds. Pulse 84. Oct 31/92. Continues quiet, resting & sleeping well at night. During the past month has had a couple of fights, getting into a quarrel quite Easily. Has grown, however, more calm and less excitable lately; reads a good deal. Bodily health quite good.

Nov 1 Nov 1/92. Wt 113½ pds. Pulse 78.

" 12 Nov 12/92. Has continued quiet & restful, sleeping well at night. Has been less irritable and irritable, having grown more calm and more stable in his calmness; rational and coherent; reading and writing, playing games, and working. Quiet & gentlemanly in all his habits and behavior. Has been anxious to go home, and was today permitted to go alone. Bodily health has been good.

Discharged Jan. 4th 93.

Bradford A. Cummings

1893 From page 148

Sept 30 Sept 30/93. Not much, if any change. Still has a sad & depressed look. Avoids Company.

Oct 15 Oct 15/93. A little more communicative lately. Talks some with his fellow patients & less inclined to

" 31 keep by himself. Reads a great portion of the time. Physical condition good. Oct 31/93. No material change. Is somewhat less distant in manner towards the officials Nov 13. 93 Wt 190 P. 76.

Nov 1/93 Reads most of the time. Walks. Talks with patients. Appetite good. Physical condition good. Nov 13. 93 Transf'd to B1. Nov 26/93 Is about the same all the while. Is fond of reading. Inclined to be alone. Appears to be troubled about something at times & keeps his face covered with

Dec 1/93 his hands. Dec 2 93 Wt 190 lbs. P. 81. Dec 29 93 About the same. Rather at times by walking to room. Good patient, never troublesome

Jan 31/94 & appetite poor. Bowels reg. Jany 2 94 Wt 182 P. 94 Jany 29. 94 About the same. Sleeps on B2. Takes meals at A3.

Feby 27/94 Wt 190 lbs. P. 82. Feb 28/94. Keeps about the same. Inclined to be alone. Has no spells. Appears to be in trouble all the time; seems worried & depressed. Easy to get along with. Always quiet & well-behaved. Still sleeps on B2 & takes meals at A3. Is fond of reading. Does some work on the ward. Apparently, is in very good Physical condition.

Mar 31 March 31/94. Wt. 192 lbs. Pulse 68. March 31/94. Keeps about the same, all the time. Manner is less reserved, of late.

Apr 30 April 2/94. Wt 193 " " 76. April 30/94. No very material change, except that, at times, he seems to be somewhat more depressed than usual. Walks about the hall, with head down; also seems quite disconsolate, at times.

May 31 May 31/94. Wt 193½ lbs. Pulse 82. May 15/94. Does not change much. Still inclined to be melancholy—

" 15 May 15/94. Transferred to A1. — May 31/94. Continues quiet, well-behaved; causing no trouble. Is

" 31 about the same, all the time. Is not very talkative. Reads a good deal. Works some. Still depressed.

June 1 June 1/94. Wt 195 lbs. Pulse 88. June 30/94. Is somewhat more talkative & in better spirits, of late.

July 30 July 9/94. Wt 192½ " " 84. July 31/94. No special change. Seems to have his spells of depression—

July 31 Quiet, orderly, quiet & well-behaved — Spends most of his time reading. Physical health is good. —

Aug 31 } During these 3 months, there is no noticeable change — possibly, he seems less depressed — His physical con-
Sept 30 } -dition is good — Wt 192½ lbs.; 9/4 188 lbs. 10/4 190 lbs. & Pulse about normal. Appetite good;
Oct 31 } bowels regular. Reads most of the time. Goes walking. Inclined a good deal to keep by himself. Does no work.

Nov 1 } Nov 1/94. Wt 189 lbs. Pulse 80. Dec 3/94. Wt 190 lbs. Pulse 68. Jan 3/95. Wt 184 lbs. Pulse 58.
Dec 3 } Jan 31/95. Behaves well. Habits clean; keeps about the same, all the while. Does not care to do any
1894 } work, but will, if requested. Appetite fair; bowels regular. Physical condition is good. —
Jan 31/95 }

Febry 28 Febry 28/95. Wt 182½ lbs. Pulse 82. Febry 28/95. Is losing some in flesh, without apparent cause. Visited by a lady friend, from Wisconsin, today. Febry 28/95. Behaves well; is quiet — talks freely and sensibly, as a rule, though he says "he has made up his mind to stay here, the rest of his life." Is somewhat nervous & despondent. Reads, most all the time. Works some in mornings. Health seems good.

Mar 31 March 31/95. Wt 179 lbs. Pulse 80. March 31/95. No change to note, since last month's report.

April 30 April 1/95. Wt 182½ lbs. Pulse 64. (5th inst. note. Talks much more than he used to do; not so melancholy; he says himself "he is not well"; "Don't want to go, & has never been before." April 30/95. No special change

" " Reads most of the time while reading from them. Does not converse with his people. Says only makes him feel worse

Insane Book A page 20

Personal and Medical History of Eliff (Elof) Johnson

Whole No. 3085
Residence, 837 Wells Street
Date Admission, 25th July 1897
Admitted by, Dr. Kilbourne Hour, 7. PM.
How Sent, John B. Olivier, Jof P. Ramsey Co.
Sex, Male
Age, 34
Civil Condition, Married
Children, Two
Age Youngest Child,
Occupation, Carpenter
Degree Education,
Profession Religion, Not a Church member
Habits, Moderate
Nativity, Sweden
Physicians Committing, Geo. J. Hanley & Oscar Alf Fleisburg
Correspondents,
Wife's name Mathilda Johnson, 837 Wells St

No. for Year, 302
Insane Relatives, dont know
Cause Exciting, La Grippe + Rheumatism
Cause Predisposing,
Form, Acute Melancholia.
Accompanying Bodily Disorder, Some cardiac complications
Suicidal or Not, Not
Date of this Attack, 23rd July inst.
Duration, 2 Days
No. of Attack, 1st so far as known
No. of Admissions,
Age First Attack, 34
Time of Leaving, Act- 11th 98
Time in Hospital, 1y 2 mos, 16 ds,
Result, Recovered

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr. Baker, July 29/97

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, probably sluggish

MEMORY:
Past Events,
Recent Events, } seems confused
Special Subjects,

PERCEPTIVITY: probably confused
Alert or Dull,
Correct or Illusive,

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Patient sick & examined in bed; at first would not speak at all, so could not make the tests (usual) as he refused to try them; lay perfectly motionless in bed; later, obeys Dr's request to move and tries some of tests-

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, appears so, but talks as if he did not feel so; says he does not feel sick -

DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent, talks some, after urging and repeated questioning.

July 28/97 (Dr. M) (Dr. B) - he

POST MORTEM NOTES.

Minneapolis, Minn., April 27 1897

To Geo. E. Dennis M.D.
Coroner of Hennepin County, Minnesota.

DEAR SIR:

In pursuance of your order we have this day made a post mortem examination of the reputed remains of B. A. Cummings at County Morgue at 9 o'clock, A. M. and herewith beg leave to submit our report.

I. External Examination.

1. Name B. A. Cummings
2. Age About 45
3. Height 5 ft 10½ in
4. Color White
5. Weight About 200
6. Eyes Blue
7. Hair Gray.
8. Marks of Identity None
9. Nutrition of body Fat
10. Injuries and external signs of disease None

Personal and Medical History of Eliff (Elof) Johnson

Whole No. 3085
Residence, 837 Wells Street
Date Admission, 25th July 1895
Admitted by, Dr. Kilbourne Hour, 7 PM.
How Sent, John B. Olivier, Jof P. Ramsey Co.
Sex, Male
Age, 34
Civil Condition, Married
Children, Two
Age Youngest Child,
Occupation, Carpenter
Degree Education,
Profession Religion, Not a Church member
Habits, Moderate
Nativity, Sweden
Physicians Committing, Geo. J. Hanley & Oscar Alf. Fleisberg
Correspondents,
Wife's name Mathilde Johnson, 837 Wells St

No. for Year, 302
Insane Relatives, don't know
Cause Exciting, La Grippe & Rheumatism
Cause Predisposing,
Form, Acute Melancholia.
Accompanying Bodily Disorder, some cardiac complications
Suicidal or Not, Not
Date of this Attack, 23d July inst.
Duration, 2 Days
No. of Attack, 1st so far as known
No. of Admissions,
Age First Attack, 34
Time of Leaving, Aug 11th 95
Time in Hospital, 1y 2 mos. 16 ds.
Result, Recovered

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr. Baker, July 29/95.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, probably sluggish

MEMORY:
Past Events,
Recent Events, seems confused
Special Subjects,

PERCEPTIVITY: probably confused
Alert or Dull,
Correct or Illusive,

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Patient sick & examined in bed; at first would not speak at all, so could not make the tests (usual) as he refused to try them; lay perfectly motionless in bed; later, obeys Dr's request to move and tries some of tests—

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, appears so, but talks as if he did not feel so; says he does not feel sick—

DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent, talks some, after urging and repeated questioning.

July 29/95 (D.M.) (D.B.)

II. Cranium.

1. Scalp, externally
2. Scalp, internally and pericranium Nd
3. Skull, external and internal surfaces not
4. Skull, condition of bone examined

III. Dura.

1. Subdural space
2. Surfaces
3. Thickness
4. Sinuses and vessels Nd
5. Cerebro spinal fluid not examined

IV. Pia Arachnoid.

1. Thickness
2. Vessels
3. General appearance

V. Brain.

1. Convexity
2. Base
3. Cranial nerves

Personal and Medical History of Eliff (Elof) Johnson

Whole No. 3085
Residence, 837 Wells Street
Date Admission, 25th July 1894
Admitted by, Dr. Kilbourne Hour, 7. PM.
How Sent, John. B. Olivier, Jof P. Ramsey Co.
Sex, male
Age, 34
Civil Condition, married
Children, Two
Age Youngest Child,
Occupation, Carpenter
Degree Education,
Profession Religion, Not a Church member
Habits, moderate
Nativity, Sweden
Physicians Committing, Geo. J. Hanley & Oscar Alf. Fleisburg
Correspondents,
wife's name Mathilde Johnson, 837 Wells st

No. for Year, 302
Insane Relatives, dont know
Cause Exciting, La Grippe + Rheumatism
Cause Predisposing,
Form, Acute Melancholia.
Accompanying Bodily Disorder, some cardiac complications
Suicidal or Not, Not
Date of this Attack, 23d July inst.
Duration, 2 Days
No. of Attack, 1st so far as known
No. of Admissions,
Age First Attack, 34
Time of Leaving, Oct- 11th 93
Time in Hospital, 1y 2 mos, 16 ds,
Result, Recovered

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr. Baker, July 29/94.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, probably sluggish

MEMORY:
Past Events, } seems confused
Recent Events, }
Special Subjects, }

PERCEPTIVITY: probably confused
Alert or Dull,
Correct or Illusive,

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Patient sick & examined in bed; at first would not speak at all, so could not make the tests (usual). as he refused to try them; lay perfectly motionless in bed; later, obeys Dr's request to move and tries some of tests-

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, appears so, but talks as if he did not feel so; says he does not feel sick -

DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent, talks some, after urging and repeated questioning.

VI. General Study of Brain.

1. *Ventricles*
2. *Nuclei* Not examined
3. *Centrum Ovale*
4. *Cerebellum*
5. *Pons and Medulla*
6. *Cortex and Sulci*
7. *Cord*

VII. Thoracic Cavity.

1. *Anterior Mediastinum* Normal
2. *Plueral cavities* Adhesion of right apex
3. *Pericardial cavity* Normal
4. *Lungs* Collapsed to third intercostal space
5. *Heart and posterior mediastinum* Hypertrophied and Dilated Left Coronary artery Thickened and Calcified and Calibre nearly Obliterated - Deposits on Tricuspid and great many projections of a granular Calcareous nature on inside of aorta for the first inch and half Vessels Atheromatous Generally and of a Cartilaginous feeling

Personal and Medical History of Eliff Johnson (Elof)

Whole No. 3085
Residence, 837 Wells Street
Date Admission, 25th July 1892
Admitted by, Dr. Kilbourne Hour, 7 PM.
How Sent, John B. Olivier, Jof P, Ramsey Co.
Sex, male
Age, 34
Civil Condition, married
Children, two
Age Youngest Child,
Occupation, Carpenter
Degree Education,
Profession Religion, Not a church member
Habits, moderate
Nativity, Sweden
Physicians Committing, Geo. J. Hanley & Oscar Alf Flisberg
Correspondents,
wife's name Mathilde Johnson, 837 Wells st

No. for Year, 302
Insane Relatives, dont know
Cause Exciting, La Grippe + Rheumatism
Cause Predisposing,
Form, Acute Melancholia.
Accompanying Bodily Disorder, some cardiac complications
Suicidal or Not, Not
Date of this Attack, 23d July inst.
Duration, 2 Days
No. of Attack, 1st so far as known
No. of Admissions,
Age First Attack, 34
Time of Leaving, Aug 12th 93
Time in Hospital, 1y 2mo, 16ds.
Result, Recovered

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr Baker July 29/92.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, probably sluggish

MEMORY:
Past Events,
Recent Events, seems confused
Special Subjects,

PERCEPTIVITY: probably confused
Alert or Dull,
Correct or Illusive,

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Patient sick + examined in bed; at first would not speak at all, so could not make the tests (usual). as he refused to try them; lay perfectly motionless in bed; later, obeys Dr's request to move and tries some of tests—

EMOTIONAL STATE:
Normal, Calm,
July 28/92 (Dr M) (Dr B) Indifferent,
Exalted,
Depressed, appears so, but talks as if he did not feel so; says he does not feel sick—

DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent, talks some, after urging and repeated questioning.

VIII. Abdominal Cavity.

1. *Omentum* very Fat
2. *Spleen and pancreas* Surrounded by Fat
3. *Liver and gall bladder* normal
4. *Kidneys* Right normal, left very fatty — Fat encroaching on pyramidal portion very much — Pelvis of both Kidneys quite filled with fat — Capsule and cortex normal — Kidneys surrounded by Fat.
5. *Stomach and Intestines* Intestines normal Stomach dilated and contained about one pint of partially digested food otherwise normal
6. *Pelvic organs* normal
7. *Abdominal Aorta* ~~normal~~ Signs of atheroma
8. *Other abnormalities* none

All of which is respectfully submitted,

Henry S Nelson M. D.
E. W. Rutledge M. D.

Those present Jas F Walsh and two Students

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, not very good

WOUNDS OR ABNORMALITIES, none

TONGUE, Tremors, Coarse Coatings, Considerable Promptness Movement, rather deliberate

PUPILS, Equality, Equal Size, normal

Response Light, seems to respond (possibly imperfectly) Accommodation, ?

SIGHT, probably good

HEARING, probably fair

COORDINATION, Arms, finger to nose, Eyes shut, good.

Legs, Standing on foot, some unsteady (possibly thro' weakness); Standing, Eyes shut, some unsteady

TREMORS, Hands, Tongue, (Coarse); slight of tongue

Facial Muscles, some tremors of face. General,

REFLEXES, Patellar, somewhat diminished – 3 tou – (Dr. P's scale) –

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, fixed and gloomy

SENSIBILITY,

HEART, mitral murmur

LUNGS, good

EXAM. URINE, July 25/92 (Dr. M) Cloudy; color, dark yellow; reaction, acid; Spec. grav. 1030; albumen, trace; urea 1%.

(Dr. B) Sediment in large quantities, reddish color: microscopy crystals of uric acid; amorphous urates; oxalate of lime; mucus; leucin spheres(?)

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, occasionally Clean, Yes Careless,

BOWELS, Normal, Constipated, Yes Irregular,

APPETITE, Good, Medium, Poor, Yes

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, See Committment papers ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1892. This man was brought here by Deputy Sheriff Kinney; the following history accompanied him; patient has suffered from La Grippe and rheumatism, with cardial complications; form of this attack is acute; first symptoms of disease were manifested on last 23d July, when he became violent & delirious, trying to drive his family out of his home; insanity is now manifested by saying "he is not born yet" and other incoherent talk; has shown a disposition to injure others; has not attempted suicide; has a disposition to filthy and destructive habits; did not manifest any peculiarities of temper, habits &c, so far as known, previous to attack; has been confined since last 23d. When he was arrested; has been under treatment for poly arthritis and endo and pericarditis.

July 25 July 25/92. On admission was quite restless, and was given a hypodermic of Morphine.

" 26 July 26/92. Was out of bed nearly all night, noisy, agitated, crying and asking for some one to tell him. Slept none at all. Am. Is quiet. Ate a little in evening. Pm. Is about the same as in the morning.

" 27 July 27/92. Was out of bed nearly all last night; noisy & restless; slept none at all. Am. Remains comparatively quietly in bed today, where it is aimed to keep him. Pulse 72. Does not eat well. Is

" 28 Constipated. July 28/92. Passed an uneasy and restless night, sticking but 1 hour, last night. Still remains comparatively quietly in bed during the day. Eats poorly. Is constipated. Has delusions Eg: Got a dispatch from Steelwater – Delusions evidently cause him to refuse to

" 29 take food (regularly). July 29/92. Was restless, sleeping but 2 hours last night. Bowels have moved freely. Dozed some today. Still remains in bed.

" 30 July 30/92. Was out of bed and noisy last night, sleeping none at all. Refused all breakfast.

Aug 1 Aug 1/92. Has been restless the last 2 nights, sleeping but 1 hour each. Has kept his bed until today. Asked for his clothes and dressed.

Aug 2 Aug 2/92. Slept 2 hours last night. Is dressed and on the ward today. Eats more freely.

" 3 Aug 3/92. Slept 3 hours last night. Remains up on the hall. Eats better. Wt. today 137 pds. Went out walking today for the first time.

" 4 Aug 4/92. Was quiet and slept 4 hours last night.

" 5 Aug 5/92. Slept 4 hours last night. Commenced doing a little work in dining-room today. Is more cheerful.

" 6 Aug 6/92. Was quiet and slept 5 hours last night.

" 14 Aug 14/92. Has been uniformly quiet at night, sleeping about 7 hours each night, since last note. (see attached Clinical record, kept since day of admission up to present date).

" 23 Aug 23/92. Continues uniformly quiet at night and sleeps usually about 7 hours. Has been up about the ward daily since the 1st inst. Dresses and cares for himself. Is clean and tidy. Has a sad look of countenance, slow in bodily movements. Goes out walking and works some. When not thus engaged, sits quietly and in silence upon a seat in the hall. For a time after admission, he would say nothing at all, & again talk somewhat freely; giving expression to delusions, usually of fear. Has lately been more uniformly willing to talk when spoken to, but is inclined usually to silence when let alone. Has an anemic look & rather thin. Has had tonic which he takes quite readily. Is gaining some. Food was taken very reluctantly at first, and, at all times, not very freely; although better now.

NAME. Eliff Johnson

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	140	74		2½
" 10	148½	–	2½	
" 17	148	–		½
" 24	148½		½	
Feby 1	149½		1	
" 9	148½			1
" 16	149		½	
March 2d	148	68		1
" 11th	149½		1½	
" 25th	153½		3	
April 4th	153	64	½	
" 18th	154½		1½	
" 25th	155		½	
May 3rd	157	70	2	
June 19th	158½	–	1½	
July 1st	160	–	1½	
Sept 8th	160½		½	

OF MR.
OSIS. Eliff Johnson
OTHER DATA

dmitted at 8 P.M. restless
ted at 10 p m was ordered
Moore.

patite poor bowels have not moved
" " Constipation Same

els moved feels clothes dressed
minutes naturally eat, little
ust be forced to eat bowels moved
ld not take any breakfast Oatmeal

owels moved. must be fed against his will
t but little at supper under compulsion
breakfast when pressed but little eat-
ingly, asked for clothes and sat up
sed out on ward eat breakfast unbidden
ty, walked to table went to closet.
walk sits out on hall
well goes out walking
ndition Same went to closet
ks in dining room much better
to closet is more cheerful
e if he had light. works he would go out
to stay out side

g less but appetite good
wels moved 3 P.M.
ndition Same

bowels moved.
eats at table in small quantities
works to & fro and works out side
condition Same
"
Goes out walking appetite better
Bowels not moved less appetite
does not eat so well

Eliff Johnson

Talks & Converses freely. Is becoming much more active. Helps with hall work, willingly.

" 12 Oct 1/93. Still retains somewhat of his backward, bashful manner, but mind seems clear.

Went home today on trial. — Discharged —

1892. This man was brought here by Deputy Sheriff - companied him; patient has suffered from a cardial complications; form of this attack is were manifested on last 23d July, when he becam his family out of his home; insanity is now ma and other incoherent talk; has shown a disposit suicide; has a disposition to filthy and destru peculiarities of temper, habits &c, so far as known, s since last 23d. When he was arrested; has been su and pericarditis.

July 25th July 25/92. On admission was quite restless, and was
" 26 July 26/92. Was out of bed nearly all night, noisy, agitati slept none at all. Ann. So quiet. Ate a little in co
" 27 July 27/92. Was out of bed nearly all last night; noisy -paratively quietly in bed today, where it is aimed
" 28 constipated. July 28/92. Passed an uneasy and re Still remains comparatively quietly in bed during delusions E.g. got a dispatch from Stillwater —
" 29 take food (regularly). July 29/92. Was restless, & moved freely. Dozed some today. Still remain
" 30 July 30/92. Was out of bed and noisy last night, &
Aug 1 Aug 1/92. Has been restless the last 2 nights Asked for his clothes and dressed.
Aug 2 Aug 2/92. Slept 2 hours last night. So dressed and on
" 3 Aug 3/92. Slept 3 hours last night. Remains up on the hall. Eats better. Is very ... out walking today for the first time.
" 4 Aug 4/92. Was quiet and slept 4 hours last night.
" 5 Aug 5/92. Slept 4 hours last night. Commenced doing a little work in dining-room today. Is more cheerful.
" 6 Aug 6/92. Was quiet and slept 5 hours last night.
" 14 Aug 14/92. Has been uniformly quiet at night, sleeping about 7 hours each night, since last note. (see attached Clinical record, kept since day of admission up to present date).
" 23 Aug 23/92. Continues uniformly quiet at night and sleeps usually about 7 hours. Has been up about the ward daily since the 1st inst. Dresses and cares for himself. Is clean and tidy. Has a sad look of countenance, slow in bodily movements. Goes at walking and walks some. When not thus engaged, sits quietly and in silence upon a seat in the hall. For a time after admission, he would say nothing at all, & again talk somewhat freely; giving expression to delusions, usually of fear. Has lately been more uniformly willing to talk when spoken to, but is inclined usually to silence when let alone. Has an anemic look & rather thin. Has put on tonic which he takes quite readily. Is gaining some. Food was taken very reluctantly at first, and, at all times, not very freely; although better now.

DETAILED HISTORY OF SICKNESS OF MR. Eliff Johnson
DIAGNOSIS.

DATE	HOUR	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
July 25th								Admitted at 8 P.M. restless — reported at 10 p m was sent to bed by Dr Moore.
" 26	6		76		82		998	
		6		88		24	100	
27	6		90		28		998	appetite poor bowels have not moved
		6		84		26	100	" " Conditions same
28	6		62		22		994	
		6		84		26	100	
29	6		64		26		998	bowels moved beds clothing drenched
		6		66		28	998	2 minutes medically cut, little
30	6		72		26		98	must be forced to eat bowels moved
		6		70		30	100	would not take any breakfast dosses
31	6		76		26		994	bowels moved. must be fed against his will
		6		72		24	998	eat but little of supper under compulsion
Aug 1st	6		72		24		98	eat breakfast when pressed but little eat-
		6		80		26	100	moderately. asked for clothes and sat up
2nd	6		88		20		992	dressed and on ward eat breakfast unbidden
		6		88		24	998	eats well at table went to closet.
3rd	6		76		22		992	eat well sits out on hall
		6		70		22	100	eats well goes out walking
4th	6		78		20		98	Condition same went to closet
		6		74		20	102	
5th	6		84		20		98	Is on 998. wants to dining room to help
		6		74		20	998	goes to closet is more cheerful
6th	6		74		18		98	says if he had light work he would try and
		6						do work sits out side
		6		64		20	98	
7th	6		70		18		994	Eats less but appetite good
		6		76		24	998	Bowels moved 2 P.M.
8th	6		82		20		986	Condition same
		6		78		24	994	
9	6		90		22		984	bowels moved.
		6		76		24	98	eats at table in small quantities
10	6		76		22		98	moves to go and work out side
		6		78		23	992	Condition same
11th	6		78		20		994	" "
		6		82		22	994	goes out walking appetite better
12th	6		74		20		98	
		6		62		24	98	Bowels not moved less appetite
13	6		54		24		986	
		6		66		22	992	does not eat so well
14	6		58		24		988	

Eliff Johnson

" 17 Oct 1/93. Still retains somewhat of his backward, bashful manner, but mind seems clear. Talks & converses freely. Is becoming much more active. Helps with hall work, willingly. Went home today on trial. — Discharged —

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" 10
" 2

Cliff Johnson

talk somewhat freely; giving [illegible]
- formly willing to talk when spoken to, but is inclined usually to silence [illegible]
in look & rather thin. Has put on tonic which he takes quite readily. Is gaining some. Food was taken very reluctantly at first, and, at all times, not very freely; although better now.

Sep 5/92. Wt 147 pds. Pulse 70. Sep 23/92. Is quiet at night and sleeps 7 to 8 hours each night. Is somewhat depressed still, but more cheerful than formerly. Has written a few letters to his wife. Does
144 some work. Bodily health improved. Oct 4/92 Wt 140 pds. Pulse 60.
" 24 Oct 24/92. Has remained uniformly quiet at night, resting and sleeping well. By day, continues quiet and well-behaved. Walks some. Talks when engaged in conversation, but is rather slow in movement, and inclined to be depressed. Is anxious to go home.
Nov 7/92 Nov 7/92. Wt 144½ pds. Pulse 78. Nov 28/92. Rests & sleeps well at night. Has become somewhat more depressed, less inclined to talk & mingle with others, and also having somewhat poorer appetite. Put on
Dec 5/1892 a tonic. Dec 5/92. Wt 144 pds. Pulse 72. Dec 19/92. Wt 147 pds. Dec 26/92. Wt 148½ pds.
" 29 Dec 29/92. Still somewhat depressed & gloomy. Walks some. Wants to go home.
Jan 3/1893 Jan 3/93. Wt 146 pds. Pulse 74. Jan 10/93. Wt 148½ pds. Jan 17/93. Wt 148 pds. —
" 24 Jan 24/93. Uniformly quiet. Walks some. Writes occasional letters. Still somewhat depressed.
Feb 25 Feb 25/93. Still quiet & well-behaved; apparently rests & sleeps well at night. Is somewhat more active. Bodily health keeps about the same.
March 28 March 28/93. Is uniformly quiet at night & appears to rest & sleep well. Quiet; works some, and willingly; when not working, sits, with Eyes cast down, seeming quite depressed.
April 24th April 24/93. after his work is done up, withdraws to his seat on a bench, where he sits in silence with down cast eyes, unobserving his surroundings. —
May 3/93 May 3/93. Is steadily & gradually increasing in weight. May 24/93. Apparently quiet & restful at night. Talks very little, in a very low tone; seems to be somewhat confused, & depressed. Works some
" 27 inward, but not as much as formerly. Writes to his wife once or twice, a month. Appetite fairly
" 31 good; bowels regular. Of good personal habits. Anxious to go home. May 27/93 Cautiously asking to be let go home. May 31/93. Quiet & well-behaved. Works some on ward. Otherwise no change to note. —
June 1 June 1/93. Appetite good; bowels normal. Speaks when addressed. Occasionally asks some questions, Eg
" 30 how long he will have to remain here &c. June 30/93. About the same.
July 13 July 1/93. Wants to go home; if he cannot, desires to work outside here. July 13/93. Stands around, on
" 20 ward, at times, as if in meditation. Is dull & absorbed. July 20/93. Patient seems about the
" 31 same, from day to day. July 31/93. Cautious to eat & sleep well, at night. Appetite good; bowels regular. Talks quite rationally. Goes out walking daily. Is dull; seems depressed. Has improved in physical health. Still anxious to go home.
Aug 1 Aug 1/93. Appears to be doing nicely. Appetite is good; bowels regular. Talks rationally. Works
" 20/25 some on wards. Aug 20/93 Complains of constipation today. Given dose of salts. Aug 25/93. Says "he is as well & strong as he will ever be"; wants to go home. Has been slowly improving.
" 26 Aug 26/93. Again troubled with Constipation: Given laxative.
Sep 8/10 Sep 8/93. Continues, monthly, to gain in flesh. Sep 20/93. Still improving. Works some. Is somewhat more active, of late. Plays cards; reads; goes out walking daily. Writes & receives letters from his wife. Is desirous of going home.
Oct 4 Oct 4/93. Physical health has improved. Appetite is good. Bowels, as a rule, constipated. Talks & converses freely. Is becoming much more active. Helps with hall work, willingly.
" 17 Oct 17/93. Still retains somewhat of his backward, bashful manner, but mind seems clear.
Went home today on trial. — Discharged —

Whole No. 3086
Residence, 1019. S.E. 5th Street
Date Admission, 26th July 1892.
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, J. R. Corrigan, J. of P. Hennepin Co.
Sex, male
Age, 65
Civil Condition, married
Children, 1 living (1 dead)
Age Youngest Child,
Occupation, Carpenter
Degree Education,
Profession Religion, Episcopalian
Habits, Good
Nativity, Maine
Physicians Committing, Wm J. Byrnes & W. A. Jones
Correspondents,
(wife) Mrs T. H. Goodale 1019. 5th St. S.E.

No. for Year, 303
Insane Relatives, unknown
Cause Exciting, (supposed) Death of son (sudden) in '81.
Cause Predisposing,
Form, Dementia.
Accompanying Bodily Disorder, none apparent
Suicidal or Not, Not
Date of this Attack, Some time ago
Duration, for some time
No. of Attack, 2nd (1st in 1881)
No. of Admissions, 1st
Age First Attack, 54
Time of Leaving, Sept 18th '92,
Time in Hospital, 1 mo 17 ds.
Result, Improved.

EXAMINATION ON ADMISSION.

Exd by Dr. Baker, July 28/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Fairly quick

MEMORY:
Past Events, Seems fairly good
Recent Events, " "
Special Subjects, " "

PERCEPTIVITY:
Alert or Dull, Not very good; Answers questions
Correct or Illusive, fairly well; Yields to others' opinion as to necessity of coming here —

REASONING POWER:
Ordinary Subjects, Seems in exercise
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Speaks of his previous attack in 1881, when he was sent to St. Peter - was 7 months there. Convulsion or vertigo, has had none; denies drinking;

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Somewhat
Exalted,
Depressed,

DELUSIONS:
Systematized or Not,
Special Subjects, Acknowledges telling Stories referred to
Transitory or Not,

HALLUCINATIONS: None
ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Talks freely

After reading a paragraph in Newspaper, could not recall the substance of it to his mind; giving, as an excuse, that he did not take any interest in it; At times, seemed to have some difficulty in understanding questions, and moved his lips without making audible sounds; (probably repeating questions to himself).

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in WEIGHT, 184 pounds. NUTRITION, Good
WOUNDS OR ABNORMALITIES, wounds, none; abnormalities, probably none.
TONGUE, Tremors, Quite steady Coatings, some Promptness Movement, prompt
PUPILS, Equality, Equal (rt. pupil, at times, trifle larger than left) Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, somewhat long-sighted
HEARING, much impaired.
COORDINATION, Arms, finger to nose, eyes shut, at times decidedly inaccurate; at others, fair.
Legs, Standing on foot, fairly steady; Standing, eyes shut, sways at times; turning quickly, some hesitation
TREMORS, Hands, Tongue, Quite steady
Facial Muscles, occasional, effect. General,
REFLEXES, Patellar, Equal; exaggerated; 7-8; (Dr. P's scale) —
Other Reflexes,
ARTICULATION, Hesitating, Slurred, No; fair.
FACIAL EXPRESSION, tendency to be blank
SENSIBILITY,
HEART, Good
LUNGS, Good.
July 28/92. (Dr. M.) EXAM. URINE, Color, light yellow; reaction, acid; Spec. grav. 1020; albumen none; urea 1.55 %.
(Dr. B.) Sediment scarce; microscopy; oxalate of lime; amorphous forms and bacteria.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Yes	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother died in Childbirth
Father or Pat. Relations, Father dead
Brothers or Sisters, 1 Brother died of diarrhoea; 1 shot at Fredericksburg during war;

Personal and Medical History of Thos. H. Goodale

1892. This man was brought here by deputy Sheriff Faut Kellar, with the following history. The form of this attack is Chronic, paroxysmal; first symptoms of disease were manifested some time ago, by his talking and telling vulgar stories to ladies. This is the second attack; some years ago (in '81) was in Asylum for a number of months (7 mos) from July 27/81. to March 11/83?! when he was confined at St. Peter. Insanity is now manifested by his low morals, stories of a vulgar nature, says "ladies indicate by a motion of the head that they want to hear a story"; shouting without cause; on one occasion he sharpened his razor for some unaquired injury; has not attempted suicide; no disposition to filthy or destructive habits; has been under medical treatment, negative; since his return from St. Peter, has failed mentally and physically; lowered tone of morals; has no appreciation of his indecency; no definite charge can be ascertained, except his passion for telling filthy yarns to any, everyone, men, women and children, strangers and friends alike.

July 27 July 27/92. Was put upon B', on admission last night. Was quiet and slept well. This morning up, in the hall, conversing with his fellow-patients; talks calmly & pleasantly. Ate well.
" 28 July 28/92. Examined, in detail, today — see preceding page for details.
Aug 3 Aug 3/92. Wt. 158 pounds. Pulse 70.
" 24 Aug 24/92. Has been uniformly quiet at night, sleeping apparently well. Claims that he sleeps enough, although not usually 8 hours. Has remained quiet, clean, tidy & well-behaved ever since admission. Talks sound with his fellow-patients but is not aggressive in beginning conversation. Reads newspapers some. Is satisfied with rather old ones. Writes letter to his wife; the last one, (a copy of which, see attached) is more lengthy than usual. Is rather simple in tone, and repeats some things several times. Was rather closely written and the hand-writing shewed scarcely appreciable deterioration towards the close. Patient does not indulge in games, and is quite inactive physically. Has, so far, refused to go out walking, stating very little reason for not doing so. Answers greetings cordially and uniformly claims that he is very well indeed "never better in his life" — looks a little pale.
Sep 5 Sep 5/92. Wt 161 lbs. Pulse 76.
" 13 Sep 13/92. Has continued quiet, resting and sleeping well at night, apparently. Conduct and condition as described in last general note. Was today visited by his wife and by her taken home. Analysis that he had been sent here for telling stories and expressed a determination not to repeat them again.
Oct 25 Oct 25/92. One of the physicians, in a recent visit to Minneapolis, learned, from good source, that Mr. Goodale is again repeating the stories, behaving almost exactly as he did before.

Discharged Mch 3rd/93

Personal and Medical History of Henry Mitchell

Over page 128

Letter file — Asylum

'92

22 Oak St. S.E. 8/20

Dr. Kilbourne

Dear sir.

My father and I would like you to know that we believe Mr Goodale, who is an inmate of your asylum, is perfectly harmless and trustworthy, and I think people generally who know him think as we do.

Whatever he agrees to do we think he will stand by. He is an honest man and has a reputation as such always.

Respectfully yours
L. M. Chatfield
Wm Chatfield

Aug. 23rd '92.
etter, written Sunday,
that every thing is going
think you must have received
twice, and a pack of
k I shall, but am glad to
ad much rather read if I
his week, the papers inter-
the Sunday Tribune, I would
ws. You want to know how
if I had more it would be
ad that Albert isagain to
nice time. Tell Louis that
much for the papers. I
hing here to write about th
those ladies, that they
ach next Sunday, I can
r better times a coming. I
und this letter and a paper
my every-da coat now. I
and sleep. Tell Prof.
ne some more stamps and
I am all fixed for paper.
that I could write some-
s. Todd took you to ride,
etter than staying in all
n on the cars to do your
great help to me. I will
bert and Prof. Zoch.
ale.)

Habits dirty.

4/3/93. Is somewhat most blind; moves

eems at times, moving very dirty.

alone, now.

moved by him

from picking with finger nails.

to do any work Dec. 23 W 157 lbs

which he occupies, never speaks only when spoken to & spells Fair Condition:

all day — a seat won't speak nor move around. Sleeps on B2. Talks much

quiet. Has "spells" when he tries to twist himself into all

. Appetite good; bowels regular. Personal habits are good.

about the same. There is no improvement to note —

Apl 3/93	Apl 3/93.	Wt 156	"	" 73.	April 30/94.	Above notes, for several months back, still hold good, to this date
May 3 / June 4	May 3/94.	Wt 159	"	" 74.	June 1/94.	Wt. 161 lbs. Pulse 84 - No special change to note.
July 31	July 31/94.	— Wt 157	"	" 79.	July 31/94.	Does not seem to improve much, if any. Has "spells" when he will twist himself into all kinds of shapes. Is quite rational in his talk, but he is very much inclined to reticence and to keep by himself. Appetite fair. Is a good worker on the ward.
Aug 1/31	Aug 1/94.	Wt 156½ lbs.	Pulse 84.		Aug 31/94.	Rest well, at night. In general, about as above described.
Sep 3/30	Sep 3/94.	Wt 157	"	" 74.	Sep 30/94.	Quiet & well-behaved. Much inclined to keep by himself.
Oct 2/31	Oct 2/94.	Wt 156	"	" 78.	Oct 31/94.	Uniformly quiet & well-behaved. Is very quiet; talks but little. Very much inclined to keep aloof from the others by himself. Appears contented. No delusions noted. Still has his peculiar way of sitting on a bench & twisting his hands & legs in a queer way, as though he was trying to break them. Does good work on the ward. Physical health apparently good. —
Nov 7	Nov 1/94.	Wt 156½ lbs.	Pulse 72.		Dec 3/94.	Wt 153 lbs. Pulse 70. Jany 3/95: Wt 154 lbs Pulse 74.
Dec 3 1894 Jany 3/95	Jany 31/95.	A very good & well-behaved patient. Talks freely & naturally; no delusions noted. Worked with painters, while they were painting the hall. Works willingly onward.				

Carried to Record Book "A" page 178.

1892. This man was [illegible]
history. He foun[illegible]
manifested some[illegible]
second attack; some[illegible]
July 29/81. to March[illegible]
-fested by his low moral[illegible]
head that they want to[illegible]
sharpened his razor for s[illegible] disposition
to filthy & destructive habits, [illegible]ince his return
from St Peter, has failed me[illegible] morals; has no
appreciation of his indecency; [illegible]ed, except his passio
for telling filthy yarns to a[illegible]s and children, strangers, and
friends alike.

July 27 July 27/92. Was put upon B', on admiss[illegible]ight. Has quiet and slept well. This morning up, in the hall, conversing with his fe[illegible]-patients; talks calmly & pleasantly. Ate well.
" 28 July 28/92. Examined, in detail, today - see preceding page for details.
Aug 3 Aug 3/92. Wt. 180 pounds. Pulse 70.
" 24 Aug 24/92. Has been uniformly quiet at night, sleeping apparently well. Claims that he sleeps enough, although not usually 8 hours. Has remained quiet, clean, tidy & well-behaved ever since admission. Talks some with his fellow-patients but is not aggressive in beginning conversation. Reads newspapers some. Is satisfied with rather old ones. Writes letters to his wife; the last one, (a copy of which, are attached) is more lengthy than usual. Is rather simple in tone, and repeats some things several times. Was rather closely written and the hand writing shews scarcely appreciable deterioration towards the close. Patient does not indulge in games, and is quite inactive physically. Has, so far, refused to go out walking, stating very little reason for not doing so. Answers greetings cordially and uniformly claims that he is very well indeed "never better in his life"; looks a little pale.
Sep 5 Sep 5/92 Wt 181 lbs. Pulse 76.
" 13 Sep 13/92 Has continued quiet, resting and sleeping well at night, apparently. Conduct and condition as described in last general note. Was today visited by his wife and by her taken home. Realized that he had been sent here for telling stories and expressed a determination not to repeat them again.
Oct 25 Oct 25/92. One of the physicians, in a recent visit to Minneapolis, learned, from good source, that Mr. Goodale is again repeating the stories, behaving almost exactly as he did before.

Discharged Mch 5th 93

[illegible] page 178

[illegible]ing. Habits dirty.

Tuesday Aug.23rd '92.

My Dear Louise:- I have just received your letter, written Sunday, with much joy to hear that you are so well and that every thing is going so nicely. I wrote you last Tuesday, which I think you must have received by this time. I have received papers this week twice, and a pack of cards. I have not used them yet, and dont think I shall, but am glad to get them and thank the Prof. ever so much. I had much rather read if I can get the reading. I have got along nicely this week, the papers interested me very much now to buy. I have received the Sunday Tribune, I would be very glad to receive the Reviews of Reviews. You want to know how I pass my time; reading what you have sent me, if I had more it would be better. I am well and never was better. I am glad that Albert isagain to spend a day with John G_ I hope he will have a nice time. Tell Louis that I am getting along all right and thank him very much for the papers. I am reading to help the time along, there is nothing here to write about th that interests you. I am so glad to hear from those ladies, that they miss me at Church, I suppose Mr.Sample will preach next Sunday, I can think of him that day, that is all, and hope for better times a coming. I went to the clothes roo and got my coat and found this letter and a paper from you that made me feel good. I a wearing my every-day coat now. I stay in, dont go out, dont do anything but eat and sleep. Tell Prof. Zoch I will write him on Thursday. Please send me some more stamps and envelopes, send one in every letter you write. I am all fixed for paper. The past week the weather has been fine. I wish that I could write something that would please you. I am glad that Mrs. Todd took you to ride, and I hope she will often, it will be so much better than staying in all of the time. But then you go over the river often on the cars to do your trading. These papers you are sending me are a great help to me. I will now close with much love to yourself, Louis, Albert and Prof. Zoch.

Yours ever Thomas. —(H.Goodale.)

[illegible] somewhat
[illegible]; moves
[illegible]times, Morning
[illegible]
[illegible]
[illegible]

1892. This man was [illegible]
history. He foun[illegible]
manifested some[illegible]
second attack; some[illegible]
July 27/81. to March[illegible]
-fested by his low moral[illegible]
head that they want to[illegible]
sharpened his razor fo[illegible]
to filthy & destructive habits;
from St Peter, has failed mer[illegible]
appreciation of his indecency;
for telling filthy yarns to a[illegible]
friends alike.

July 27 July 27/92. Was put upon B', on admis[illegible] night. Has [illegible] slept well. At this morning
" 28 up, in the hall, conversing with his fellow-patients; talks calmly & pleasantly. Ate well.
July 28/92. Examined, in detail, today - see preceding page for details.
Aug 3 Aug 3/92. Wt. 186 pounds. Pulse 70.
" 24 Aug 24/92. Has been uniformly quiet at night, sleeping apparently well. Claims that he sleeps enough, although not usually 8 hours. Has remained quiet, clean, tidy & well-behaved ever since admission. Talks sound with his fellow-patients but is not aggressive in beginning conversation. Reads newspapers & mind. Is satisfied with rather old ones. Writes letters to his wife; the last one, (a copy of which, see attached) is more lengthy than usual. Is rather simple in tone, and repeats some things several times. Was rather closely written and the handwriting showed scarcely appreciable deterioration toward the close. Patient does not indulge in games, and is quite inactive physically. Has, so far, refused to go out walking, stating very little reason for not doing so. Answers greetings cordially and uniformly claims that he is very well indeed "never better in his life" & looks a little pale.

Sep 5 Sep 5/92. Wt 181 lbs. Pulse 76.
" 13 Sep 13/92. Has continued quiet, resting and sleeping well at night, apparently. Conduct and condition as described in last general note. Was today visited by his wife and by her taken home. Realized that he had been sent here for telling stories and expressed a determination not to repeat them again.
Oct 25 Oct 25/92. One of the physicians, in a recent visit to Minneapolis, learned, from good source, that Mr Goodale is again repeating the stories, behaving almost exactly as he did before.

Discharged Mch 3rd/93

page 128

[illegible] 3. Wt 136 pounds. Pulse 76. Appetite very good. Bowels regular. Is very noisy. Habits dirty.
[illegible] 1/93. Continues about the same. Is restless & noisy. Habits very dirty.
Sep 24/93. Wt 138 pounds. Pulse 76. Sep 30/93. No material change in condition.
Oct 3/93. Wt 134 " " 6 r. Oct 15/93. Seems to be growing weaker. Oct 31/93. Is somewhat noisy at ward. Seems to be failing, all the time. Is quite same at present. Almost blind; moves aimlessly about, groping his way. Is troublesome at ward.
Nov 2/93. Wt 137½ pds. Pulse 82. Appetite good; bowels regular; is quite troublesome at times, moving and groping his way about ward; has to be carefully watched. Habits continue very dirty.
Nov 14/93. Appetite has become poor; patient seems to be failing.
Nov 19/93. Has continued to fail; refusing food; growing weaker; can't walk alone, now.
Nov 21/93. Still failing. Eats nothing. Was put to bed this afternoon.
Nov 22/93. Patient is still refusing food & appears to be sinking fast.
Nov 23/93. Continued to fail rapidly and died about midnight.
His case was advised by telegram of patient's death. Remains removed by friends

Died

from page 56 R. H. Harvey. R. H. Harvey.

Nov [illegible] 93. Wt 116½ P. 68. Nov 7 93 Walks out. Sits on seat all day on ward, twisting & writhing his body. Has several scores on face from picking with finger nails.
" 13. Transf to B2 Nov 27 93 Is very quiet always by himself has nothing to say. Inclined to be ugly at times. Does not care to do any work. Dec 2 93 W 115½ P 80
Dec 7. Has spells of trying to turn & twist himself in all shapes on the seat which he occupies. Never speaks only when spoken to. Appetite fair. Looks ugly.
Jany 94 Jany 30 Wt 159½ P. 66. Jany 30 94 Is just the same. Remains by himself all day - a word or two speak now more around. Sleeps on B2. Talks much on a 2d Bowels reg. Feb 2 94 Wt 157 P. 84. Feb 28/94. Always quiet. Has "spells" when he tries to twist himself into all
Feb 2/94 sorts of shapes. Always keeps apart by himself. Seldom speaks. Appetite good; bowels regular. Personal habits are good.
Mar 3/31 March 3/94. Wt 156½ pds. Pulse 73. March 31/94. Keeps about the same. There is no improvement to note -
Apl 3/30 April 2/94. Wt 156 " " 73. April 30/94. Above notes, for some months back, still hold good, to this date.
May 3 June 1 May 3/94. Wt 159 " " 74. June 1/94. Wt. 161 pds. Pulse 81 - No special change to note.
July 3/31 July 1/94. - Wt 157 " " 79. July 31/94. Does not seem to improve much, if any. Has "spells" when he will twist himself into all kinds of shapes - Is quite rational in his talk, but he is very much inclined to reticence and to keep by himself - Appetite fair. Is a good worker on the ward.
Aug 1/31 Aug 1/94. Wt 156½ pds. Pulse 84. Aug 31/94. Rests well, at night. In general, about as above described.
Sep 3/30 Sep 3/94. Wt 157 " " 74 - Sep 30/94. Quiet & well-behaved. Inclined to keep by himself -
Oct 2/31 Oct 2/94. Wt 156 " " 78 - Oct 31/94. Uniformly quiet & well-behaved - Is very quiet; seldom speaks. Very much inclined to keep aloof from the others & by himself - Appears contented. No delusions noted. Still has his peculiar way of sitting on a bench & twisting his hands & legs in a queer way, as though he was trying to break them. Does some work on the ward. Physical health apparently good. -
Nov 7 Dec 3 Jany 31/95 Nov 7/94. Wt 156½ pds. Pulse 72. Dec 3/94. Wt 153 pds. Pulse 70. Jany 31/95. Wt 154 pds. Pulse 74. Is very good & well-behaved patient. Talks freely & rationally; no delusions noted. Worked with painters, while they were painting the hall. Works willingly & well.

Carried to Transfer Book "A" page 178.

Personal and Medical History of James J. Shadduck

Whole No. 3087

Residence, 507 - 15th Ave North

Date Admission, 27th July 1892.

Admitted by, Dr Kilbourne Hour, 7.30 PM

How Sent, J. R. Corrigan, Jof P. Hennepin Co

Sex, male

Age, 36

Civil Condition, married

Children, one

Age Youngest Child,

Occupation, machinist

Degree Education,

Profession Religion, not a church member

Habits, Good

Nativity, Iowa

Physicians Committing, Jas. R. Freeman & W. A. Jones

Correspondents, (Father) M. M. Shadduck 1717 Washington Ave north
(wife) Mrs Elfrida Shadduck c/o J. E. Griffith mpls minn

No. for Year, 304

Insane Relatives, none known

Cause Exciting, Injury from a fall 3 weeks ago

Cause Predisposing,

Form,

Accompanying Bodily Disorder, of speech, indistinct; dilated pupils — asthma —

Suicidal or Not, no

Date of this Attack, 3 weeks ago

Duration, 3 weeks

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, 36

Time of Leaving, 4th August 1892

Time in Hospital, 8 days.

Result, Died; Acute Delirious Mania

EXAMINATION ON ADMISSION.

Exd by Dr Baker, July 29/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, probably confused

Quick or Sluggish, quite active

MEMORY:

Past Events, Cant test

Recent Events, "

Special Subjects, "

PERCEPTIVITY: Impaired; mistakes identity

Alert or Dull,

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Face is high-colored; Examination was difficult to make as patient was sick in bed (see page 59 for further notes) —

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Appears to have some "of hearing" Seems to talk to others.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, very incoherent.

Voluble or Reticent, Irregular at times; quite free in answers to questions.

Personal and Medical History of James J. Shadduck

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7½ in WEIGHT, 155 pounds NUTRITION, Fairly good

WOUNDS OR ABNORMALITIES, none visible

TONGUE, Tremors, none Coatings, heavily coated, coat offensive Promptness Movement, sluggish + limited

PUPILS, Equality, unequal at times; left larger. Size, somewhat dilated

Response Light, Pupils mobile; dilating + contracting accommodation, quite readily; but exact relation to light and accommodation cannot be determined —

SIGHT, Cannot test.

HEARING, probably fair.

COORDINATION, Arms, cannot test

Legs, "

TREMORS, Hands, Cannot test Tongue,

Facial Muscles, " General,

REFLEXES, Patellar, probably equal; decidedly exaggerated.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, rather indistinct

FACIAL EXPRESSION, duellish

SENSIBILITY,

HEART, ?

LUNGS, probably good

Aug 3/92 D. M. EXAM. URINE, Color, dark yellow; reaction, acid; Spec. grav. 1026; albumen none; urea - 9%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless, yes

BOWELS, Normal, Constipated, yes Irregular, yes

APPETITE, Good, Medium, Poor, rather

SLEEP, Good, Poor, Irregular,

PULSE, 120 (on adm. 78) RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1892. This man was brought here by deputy-Sheriff Miller, with the following history; Habits are good; insanity not hereditary; form of attack is acute; first symptoms of disease were manifested some 3 weeks ago, soon after a fall; imagines some man is to kill him; runs from him, when he sees him; thinks the man believes that he (Shadduck) is going to run away with his wife. Insanity is now manifested by the fear of bodily harm, suspicions &c; is, at times, maniacal and unsafe; threatens to kill his wife; is not suicidal; has no disposition to filthy or destructive habit; On the above occasion, he fell with considerable force 6 or 8 feet; did not strike his head, but feet, at once, as if his head were whirling, dizzy &c. No restraint or confinement has ever been employed. Has been under medical treatment, negative; is evidently suffering from a severe shock to the nervous system, and from his delusion and threats his family are afraid of him.

Exn July 29 July 29/92. Patient was examined, while lying in bed; was comparatively quiet; says he weighs 200 lbs. Keeps talking, as if to himself; says repeatedly "I am all right"; "I am going to Heaven" and "I want a gun" (in reply to question) "to hunt ducks"; during the presence of Dr., at examination, patient had a spell of marked twitching of arms and head, something like a severe chill; when asked, at this time, if he were chilly, said "yes"; then says (as if to himself) "nothing the matter with me" "I'm all right"; "let her go, Gallagher" (these expressions being often repeated). Twitchings on right side becoming quite marked, especially of right shoulder and right side of neck. (Pulse, at this time, 84). Face somewhat cyanotic, at times. Consciousness present. When asked to look at Dr's finger (in test of accommodation) says "it's as clear as a whistle" (repeatedly).

On admission, while sitting in office, Pulse was 120. Was quiet and comparatively quiet at that time. When taken to the ward while being given a bath, was very violent and boisterous, splashing the water around. Was put to bed, after much resistance. At 10 PM. P. 80. R. 26. T(R) 101. —

" 28 July 28/92. Was extremely noisy nearly all night. Slept, not over 2 hours. 7 AM. Pulse 96. R. 22. T(R) 99. Remains in bed. Ate a slight breakfast. Bowels had not moved. Tongue is heavily white-coated. Breath very offensive. Says he slept well and that he has been here about 3 days. 6 PM Pulse 76. R. 22. T(R) 99.8. —

" 29 July 29/92. At 12 midnight, last night, had a very bad spell (as reported by the night-Watch) shivering & cold & calling for some one. Pulse then 120. This was possibly a convulsion of some kind. During the night, was very restless and noisy, sleeping but 2 hours. 6 AM. Pulse 78. R. 22. T(R) 99. Eats poorly. Bowels have moved. 6 PM. Pulse 76. R. 21. T(R) 99.8.

" 30 July 30/92. Was very noisy last night, and slept none at all. 6 AM. Pulse 82. R. 22. T(R) 98.4 Bowels have moved frequently. Eats scantily. Is noisy by spells. Remains in bed quite well. 6 PM. Pulse 104. R. 24. T(R) 99.8. Refuses food but took a very little milk.

" 31 July 31/92. Was very noisy and restless last night, sleeping none at all. Resists all offers of food; bowels are not so loose. 6 AM. Pulse 102. R. 24. T(R) 99.6. 6 PM. Pulse 118. R. 24. T(R) 100.2. Refuses food. Is nervous & excited.

Aug 1 Aug 1/92. Was very noisy nearly all night, sleeping none at all. Was given hypodermic at bed time. 6 AM. Pulse 84. R. 22. T(R) 99.6. Has refused all food. Preparations were made for

1892 feeding (forced), whereupon patient drank 1 quart of eggnog. This was not [illegible], the result

DETAILED HISTORY OF SICKNESS OF MR. James. J. Shadduck.
DIAGNOSIS .

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
1892 July 27		10		80		26		101	Admitted by Mr. Miller. Given a bath in which he was very violent, splashing water and very boisterous — after much resistance was put to bed — very noisy all night — singing very loud — ate but little breakfast — breath very strong, foetal.
" 28	7		96		22		99		
"	6		76		22		99.8		
" 29	6		76		22		99		
"	6		72		21		98.8		
" 30	6		82		22		98.4		Same condition — bowels moved frequently —
"	6		104		24		99.8		Refuses food — took a very little milk —
" 31	6		102		24		99.8		resists all offers to give him food — bowels not so loose —
"	6		118		21		100.2		Refuses food — nervous and excited —
Aug 1	6		84		22		99.6		Refuses food — drank 1 quart milk —
"	6		76		24		99.8		will not eat —
" 2	6		80		26		99.8		Refuses to eat — cannot be coaxed — vomited eggnog — had epileptiform convulsion — muscles rigid —
"	5		104		26		100.4		
"	8		108		26		100.8		Took very small quantity of milk — vomited a tumbler full of eggnog after taking it —
Aug 3	6		108		26		100.4		Swallowed a tablespoonful of milk after great effort — Catheterized + 16 to 20 ounces taken out — (for Expectation)
"	6	1	120		32		100.8		Fed by rectum
" 4	6		120		48		106		Fed by rectum — very restless
"	10		108		48		106.4		Excited — fed by rectum —
"	12		120		50		106.6		Fed by rectum — resting —
"		3		108		42		106.4	uneasy — restless — got out of bed — much weaker —
"	5		48		42		100.4		very restless — held in bed —
"	6.15		—		50		106.4		At 6 PM more restless; quite hypodermic strychnine Settling into a comatose state — nervous & twitching of muscles — growing weaker — and
									Died 7.13 PM Aug 4th 1892 —

Died —

1892. This ?
Hab
of
is

...opos
...want
...eint had
...asked,
...en with me"
...up on night
...k. (Pulse, at
...ked to look at
...).
...aratively quiet at that
...riterous, clashing the
...s. 7 Am. Pulse 98. R 22. T(R) 99.
...que is heavily White-coated.
...r abnt 3 days. 6 Pm Pulse 95.
R.

" 29 July 29th.
Shivering & cold
kind. During the nig
...(as reported by the Night-Watch)
...was possibly a convulsion of some
...g but r hours. 6 Am. Pulse 95. R 22
T(R) 99. Eats poorly. Bowels
...s. 21. T(R) 99.8.

" 30 July 30/92. Was very noisy last
...t all. 6 Am. Pulse 82. R. 22. T(R) 98.4
Bowels have moved frequently. Eats scan
...y spells. Remains in bed quite well.
6 Pm. Pulse 104. R 24. T(R) 99.8. Refuses food &
...a very little milk.

" 31 July 31/92. Was very noisy and restless last night, & sleeping none at all. Resists all offers of food; bowels are not so loose. 6 Am. Pulse 102. R 24. T(R) 99.8. 6 Pm. Pulse 118. R 24. T(R) 100.2. Refuses food. Is nervous & excited.

Aug 1 Aug 1/92. Was very noisy nearly all night, sleeping none at all. Was given hypodermic at bed time. 6 Am. Pulse 84. R 24. T(R) 99.6. Has refused all food. Preparations were made for

feeding (forced), whereupon patient drank 1 quart of eggnog. This was not, however, the result of fear of being fed, as patient was evidently so excited and so little observant of his surroundings that he evidently did not know the meaning of the preparations being made. 6 P.M., Pulse 76. R 24. T(R) 99.8. Has refused food since taking Eggnog this morning.

Aug 2/92. Was extremely noisy last night, sleeping none at all. 6 AM. Pulse 80. R. 26. T(R) 99.8. Refuses to eat; cannot be coaxed to doze. It was found possible to get him to take a little eggnog at a time and it was decided to feed him hourly with as much eggnog as he could be persuaded to take. He, however, vomited some of his food. 5 P.M. Pulse 104. R. 26. T(R) 100.4. This afternoon, had a convulsion; with some twitching and much muscular rigidity; considered Epileptiform (?). At 8 P.M. Pulse 108. R 26. T(R) 100.8. Has taken a little milk and eggnog at a time; but seems to have quite decided difficulty in swallowing; has seemed troubled this way yesterday and more to-today; vomited, after taking a tumbler-full of eggnog at one time.

" 3 Aug 3/92. Was somewhat noisy last night, and slept none at all. 6 AM. Pulse 108. R 26. T(R) 100.7. Wt. 133 pounds, today. The effort to feed fluid food by the mouth has been only partially, and in a small measure, successful; swallowing appears to be a great effort, food seeming to get into the larynx and provoke strangling & coughing. Patient evidently does not actively resist the taking of food. Attempt to introduce the stomach-tube was accompanied with such disturbance, paleness & cyanosis that it was feared that persistence in the act might cause immediate death. Feeding by the rectum was decided upon as the only resource & was begun to-day. 6 PM. Pulse 124. R. 32. T(R) 100.8. Patient has been growing weaker, pulse feebler & more rapid. Already, a fatal outcome seems unavoidable. Friends have been telegraphed to. — There has been retention of urine, requiring catheterization to-day. —

" 4 Aug 4/92. Feeding by the rectum continued during last night. At 12.30 Am pulse was 144. R. 48. T(R) 103.4. At 2 Am pulse 152. R 48. At 3 Am. Pulse 160. R. 42. 4.30 PM Pulse 162. R 60. Past a restless night, sleeping only about an hour. At 6. AM. Pulse 170 R 48. T(R) 105. Is very restless. 10 Am. Pulse 185. R 48. T(R) 106.2. Excited. At 12 M. Pulse 180. R 50 T(R) 106.4. 3 PM. Pulse 185. R. 42. T(R) 106.4. Is uneasy & restless & is much weaker — At 5 PM. Pulse 148. R 42. T(R) 106.6. Is very restless & had to be held in bed. At 6.15 pulse is so weak, it cannot be counted. R. 50. T(R) 106.8. Is still mad restless. Nervous and has twitching of the muscles. Grew weaker rapidly & died at 7.13 PM.

Wife arrived in time to be with him during the last half-hour or so.

His mental state, in addition to the excitement, which manifested itself spasmodically, (in spells), was one of oblivion to his surroundings for the past few days, with a tendency to dullness & coma. The tendency to coma grew upon him during the last two days, and seemed, at times, to be quite deep. This perversion of consciousness was so great, that he paid very little attention to the presence of others & did not seem to recognize his wife. However, just within 5 or 10 minutes of his death he had a restless spell, in which he struggled quite hard to raise himself up in bed.

Remains buried Here for the present.

Died —

Whole No. 3088

Residence, St Paul, Minn

Date Admission, 27th July 1892

Admitted by, Dr Kilbourne Hour, 7 PM

How Sent, John B. Olivier, J of P. Ramsey Co

Sex, Male

Age, 68

Civil Condition, Single

Children, None

Age Youngest Child,

Occupation, Lawyer

Degree Education,

Profession Religion, Protestant

Habits, As to morality, not good

Nativity, U.S.

Physicians Committing, A. B. Ancker & H. W. Davis

Correspondents,

No. for Year, 305

Insane Relatives, near relatives have been insane

Cause Exciting, age and possibly habits

Cause Predisposing,

Form,

Accompanying Bodily Disorder, some paralysis agitans

Suicidal or Not, before going to Poor house, contemplated suicide

Date of this Attack, 1890 or 1891

Duration, a year or two

No. of Attack,

No. of Admissions, 1st

Age First Attack, 66 or 67

Time of Leaving, July 2d. 1892

Time in Hospital, 1 year ~~3 days~~

Result, Transf'd to Fergus Falls

JK for

EXAMINATION ON ADMISSION.

Exd by Dr Baker, Aug 4/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Active

MEMORY:

Past Events, Seems fair

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Rather limited, answers questions

Correct or Illusive, fairly well; does not realize own condition

REASONING POWER:

Ordinary Subjects, freely in exercise

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

While tapping patellar of right leg, there was quite marked localized twitching in some part of the quadriceps extensa, femoris group; without a patellar reflex response. Has had rheumatism; has had some shortness of breath, on exertion.

EMOTIONAL STATE:

Normal, Calm, Yes

Indifferent,

Exalted,

Depressed, Sometimes he inclines

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS: "of hearing"

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Voluble; runs from one subject to another. —

Admits that he did make reports & write letters referred to in committment papers and says that he had reason for doing so, and can corroborate and prove each & all the statements therein made.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in. WEIGHT, 189½ pounds NUTRITION, Good

WOUNDS OR ABNORMALITIES, Wounds, none; left leg shortened and smaller than right; says he had hip-joint disease, when young—

TONGUE, Tremors, Coarse Coatings, moderate Promptness Movement, slow & jerky

PUPILS, Equality, Equal Size, about normal

Response Light, Impaired Accommodation, Yes

SIGHT, Far-sighted.

HEARING, Some impaired

COORDINATION, Arms, Finger to nose, Eyes shut, some inaccuracy

Legs, Standing on foot (right) fairly well; left deformed.

TREMORS, Hands, Yes Tongue,

Facial Muscles, tremors of face General,

REFLEXES, Patellar, right only on re-inforcement; left probably gone.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, No, good.

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Seems good

LUNGS, Seem good.

Aug 12/92 D. M. EXAM. URINE, Color, yellow; reaction acid; Spec. grav. 1023; albumen none; urea 1%.

Sed & D. H. Microscopy. Triple phosphates abundant. amorphous, some.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Yes	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1892 This man was brought here by Deputy-Sheriff Kinney, with the following history; as to morality, habits are not good; unable to say as to insanity being hereditary, though history states that near relatives have been insane; form of attack is chronic; has been insane for a year or two; has hallucinations regarding the morals of persons around him; his mind seems to be occupied by matters referable to sexual intercourse. Insanity is now manifested chiefly on matters of a sexual character; has shown no disposition to injure others. Before he went to Poor-House, he contemplated suicide. Not filthy or destructive; has, for years, been known as an erratic character; has some paralysis agitans; has been an inmate of Poor-House for about 2 years and during that time he has spent much of his time in writing vile letters to the various heads of the departments, chiefly concerning alleged sexual intercourse &c on the part of the family and inmates, not excepting the children.

On admission is calm and apparently indifferent at being brought here. Put upon A[d].

July 28 July 28/92. Was quiet but somewhat restless sleeping only about 1 hour, last night. Appt. Pulse 72. Talks freely. Put upon tonic.

" 29 July 29/92. Was quiet last night, sleeping about 4 hours.

" 30 July 30/92. Was quiet all night but only slept about half an hour.

Aug 3 Aug 3/92. Has been uniformly quiet at night; at times, somewhat restless; has slept 4 & 4½ hours on each of past 4 nights. Weight 185½ pounds. Pulse 80.

" 30 Aug 30/92. Has been invariably quiet at night; at times somewhat restless, and has slept from 1 to 5 hours each night, averaging about 3½ hours each night. Does not, however, complain of feeling any ill effect from the loss of sleep. Also, occasionally dozes during the day. Has been uniformly quiet, clean, tidy & well-behaved. Has been apparently contented & happy here. Claims that he feels well and is improving. Thinks the medicine he is taking is the best he ever had in his life. That it has almost a specific action on all the organs of the body and is especially beneficial to the biliary duct, where, he seems to think, his chief physical weakness lies. He repeatedly speaks of these things when questioned about his health. He is very free in conversation, using very good language; in fact, seems fond of talking. He is quite often seen sitting, with some one of his fellow-patients, apart from the others, absorbed in quite close & apparently confidential conversation. He has not spoken of the stories, with which he is charged on his Commitment Papers, to the Dr. since the day when he was examined. He is in quite good flesh & seems in quite good bodily health.

Sep 5 Sep 5/92. Wt 189 pounds. Pulse 68

" 29 Sep 29/92. Is quiet at night but does not sleep very well. Has recently shown more pronounced disturbance of mind. Eg, believing that his bed is wet, when, in fact, it is not, & refusing to go to bed. Recently expressed the belief that General Sanborn had been here and yesterday began demanding himself in complaints, essays, with a telegram. Has, through these ideas, been quite troublesome. Bodily health good. —

Oct 4/92 Oct 4/92. Wt 177 pds. Pulse 76. Oct 29/92. Is quiet at night. Has been quite full of delusions, and of troublesome conduct, arising, chiefly, through hallucinations, apparently. Cannot be trusted with his cane and crutch, as he strikes. Bodily health not so good.

1892
Nov 4/92 Nov 2/92. Wt 177 pds. Pulse 92. Nov 29/92. Is quiet at night and seems to rest & sleep well. Quite full of delusions which make him troublesome; cannot be permitted to have his crutch & cane; in consequence cannot walk much. Bodily health fairly good.

Dec 5 Dec 5/92. Wt 163 pds. Pulse 90. Has lost 14 pounds in the past month. Takes food only fairly well. Effort ordered to be made to get him to take more.

" 31 Dec 31/92. Is quiet at night and seems to rest and sleep well. By day, sits in one place near his room. Is irritable and sullen and uncommunicative. Could not be persuaded to eat much better than formerly. Has delusions evidently of a persecutory nature, shaped around the attendants & officers.

1893
Jan 3/93 Jan 3/93. Wt 161 pds. Pulse 72. Jan 25/93. Is quiet and seems to rest well at night. Sits all day long, either in his room or just outside the door. Talks to no one unless first addressed. Reticent about replying. Says he feels well although he has lost steadily in weight. Cannot be persuaded to eat more.

Feb 3/93 Feb 3/93. Wt 161 pds. Pulse 88. Feb 12/93. Received a black-eye today; in what manner is unknown.

" 25 Feb 25/93. Quiet, apparently resting & sleeping well at night. By day, either lies on his bed, or sits on a chair at door of his room. Quite often gives expression to the delusion that there is some important business in town & he must "get there & attend to it". Semi-fair physical health.

Mar 2/93 March 2/93. Wt 164 pds. Pulse 60. March 30/93. Has seemed less disturbed lately; more approachable & fairly communicative. Has been given his cane & crutch & gets around more now. Has not yet been badly behaved, using them for harm —

April 28/93 April 4/93. Wt 169 pounds. Pulse 62. April 28/93. Appears restful & to sleep well at night. Is more approachable, answering greetings pleasantly, & well-behaved — Gets around on his crutch & cane; reads; has not manifested hallucinations nor delusions recently.

May 3/93 May 3/93. Wt 177 pounds. Pulse 64. Is gaining considerably in flesh.

" 27 May 29/93. Continues about as described in note of 28th ults. Is somewhat more pleasant and good natured. Is able to get out a little more, now that it is fine weather. May 30/93. Appetite continues good & bowels regular. Seems better than he was some time ago. Keeps gaining in flesh. — Behaves well when left alone; is easily agitated, when he is included in the abusive. Talks about his old business in St. Paul & seems much pleased when he finds a listener.

June 6/93 June 6/93. Wt 179 pounds. June 30/93. In all respects, keeps about the same. Goes out walking quite regularly & attends services in Chapel. Has quite good physical health, for him.

July 6 July 6/93. Wt 183 pounds (a further gain). Pulse 78.

" 31 July 31/93. Patient does not change much, from month to month — For some time has been well-behaved & quite pleasant in manner. Talks in a fairly rational way, at present —

Was, with several others, today transfered to Fergus Falls Hospital.

Whole No. 3090.

No. for Year, No. 2.

Residence, Cor. Western + Laurel Aves, St Paul, Minn

Insane Relatives, Mother (not hereditary except mother)

Date Admission, 1st August 1892.

Business troubles

Admitted by, Dr. R. W. Phelps Hour, 7 P.M.

How Sent, John B. Olivier Jof P. Ra

-Melancholia

Sex, male

y Disorder, Loss of both legs, caused by freezing

Age, 60

+ propensity very marked do now

Civil Condition, married

about 17 years ago

Children, 2

bout 17 years - variable -

Age Youngest Child,

ot the first

Occupation, Real Estate

Degree Education,

about 43

Profession Religion, Is a church mem

July 26' 1899-

Habits, very good

6 yrs 11 mos. 26 days.

Nativity, Germany

Intestinal Obstruction

Physicians Committing, Edgar J. Schmidt & Justus Ohage

Correspondents, W. J. Weide, 137 Western ave, St. Paul, Minn

(Brother) Jos. B. Weide. 145. E. Fourth St. (Room 1.) St Paul Minn



EXAMINATION ON ADMISSION.

Exd by Dr. Baker Aug 5/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quite active

MEMORY:

Past Events, Seems good, but thinks it some

Recent Events, impaired, he says.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Ordinary observation good, and

Correct or Illusive, answers questions well.

REASONING POWER:

Ordinary Subjects, In exercise, but perverted.

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Insanity of mother was on account of death of sister. Was confined in Hospital at Indianapolis for 10 or 12 years.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Much; cries; says he thinks he cant live long.

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None probably.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Is rather reticent; only answers questions

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8 in. WEIGHT, 167 pounds (on admn) NUTRITION, Fairly good.

WOUNDS OR ABNORMALITIES, Small scar on scalp. Both legs amputated.

TONGUE, Tremors, Steady Coatings, Slight Promptness Movement, fairly prompt.

PUPILS, Equality, Equal Size, about normal.

Response Light, somewhat limited Accommodation, Yes

SIGHT, Good

HEARING, right ear good; left impaired.

COORDINATION, Arms, Hands seem good.

Legs, (Cannot make "leg tests")

TREMORS, Hands, Tongue,

Facial Muscles, of right cheek, on intention - General,

REFLEXES, Patellar, Equal and about normal.

Other Reflexes,

ARTICULATION, Hesitating, somewhat indistinct, probably Slurred, from lack of animation.

FACIAL EXPRESSION, gloomy.

SENSIBILITY,

HEART, 2nd Sounds rather strong and accentuated.

LUNGS, Probably good.

EXAM. URINE, Aug 15/92 Dr M color yellow; reaction acid; Spec. grav. 1024; albumen none; urea 1.1%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Yes	Constipated,	Irregular,
APPETITE, Good,	Medium, Yes	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother was insane (see remarks, previous page).

Father or Pat. Relations, Father was healthy, he claims.

Brothers or Sisters,

1892 This man was brought here by deputy Sheriff Kinney and patient's son, with the following history. There is some history of heredity; form of attack is depressed, sub-acute; first symptoms of disease were manifested about 17 years ago, and duration of attacks has been variable; insanity is now manifested on the subject of business reverses; has shown no disposition to injure others; suicide has been attempted in all different ways, and propensity is very marked so now; there is no disposition to filthy or destructive habits; no peculiarities of disposition ere before symptoms appeared; not subject to any bodily disease; confinement has been employed several times; was in State Asylum at St. Peter, Minn; has been under medical treatment, but with no effect.

Aug 1. Aug 1/92. Takes food under protest.
" 2 Aug 2/92. Was restless part of last night, sleeping but 2 hours. Am. Pulse 92.
" 3 Aug 3/92. Slept but 1 hour last night. Is up on the ward each day, dressed very neatly. Wt 155 ps; P 88
" 4 Aug 4/92. Was restless for a couple of hours. Sleeping 3 hours last night. Pm. Pulse 88.
" 5 Aug 5/92. Slept 3 hours last night; restless part of the time. Am. Pulse 80.
" 6 Aug 6/92. Restless 3 hours, sleeping 4 hours, last night. Am. Pulse 84.
" 7 Aug 7/92. Slept 4 hours last night. Is always quiet at night. Am. Pulse 88.
" 8 Aug 8/92. Slept about 6 hours last night; somewhat restless at times. Am. Pulse 88.
" 9 Aug 9/92. Was restless 4 hours, sleeping 3 hours, last night. Vomited early in the night, sweat a good deal and feel unwell. Am. Pulse 84. Had no more vomiting, but some diarrhoea.
" 10 Aug 10/92. Was restless 3 hours, sleeping 4 hours, last night. Am. Pulse 88.
" 11 Aug 11/92. Slept 6 hours last night. Am. Pulse 96. Pm. Pulse 92. T (e) 99.3.
" 18 Aug 18/92. Since last note for a few nights has been quite restless and slept poorly; the balance of the time, has slept quite well. Pulse has been 88. 78. 80. 88. 86. 96 & 82. on the past 2 & present mornings.
" 23 Aug 23/92. At times restless; has slept from 5 to 6 hours each night, since last note. Pulse has been 78. 82. 96 & 80. the past 2 and present mornings.
" 29 Aug 29/92. Has rested better sleeping 6 to 7 hours each night (as reported by night-watch) since last note. This morning is crying, as he has done at times before, and says that "he thinks his family is perishing through his errors and mistakes"; and says he does not sleep well.
Sept 2 Sept 2/92. Has rested well and slept 7 hours each night, since last note.

Summary. Has never been noisy, either by night or day. For sleep, see above notes. Has, each day, been up on the ward, neatly dressed and tidy. Usually has spent his time sitting in the alcove among the others. Possibly, does not walk much on account of the difficulty he experiences in so doing, walking on two crutches. Has been perfectly gentlemanly & well behaved in all his talk & conduct. Talks quite freely when addressed, but always in subdued, mournful tones. At first, claimed that he was not well, frequently mentioned that his pulse was up to e.g. 88 as evidence that something was wrong; lately acknowledges that he is himself pretty well, but claims that his family is perishing and suffering through his faults. At times, is more cheerful. Reads, writes letters, & plays Checkers. At the latter game he is acknowledged to be a formidable opponent. Bodily health seems fairly good.

" 5/92 Sept 5/92. Wt. 167 ps. Pulse 80. Sept 12/92. Visited today by friends. Sept 13/92. Visited today by
" 13 his wife and sister.

NAME. Chas. A. B. Weide

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	170	88	1	
Feby 3d	171	112	1	
March 2d	171½	86	½	
April 1st	175	88	3½	
May 3d	174	96		1
June 5th	178¼	—	4¼	
July 1st	172½	—		5¾
Aug 3d	173½	—	1	
Sept 8th	176	—	1½	
Oct 3d	173½	90		2½

ains a quite uniform weight.
mewhat better at night. Continues depressed and to worry,
at times, on account of his depressed feelings.
Oct 16/92. Is crying today, saying that he has got to

2/92. Lies quietly and is quiet at night, but quite often com-
ven occasional hypnotics. Is still considerably depressed,
saying that his family is perishing on his account". Bodily
s that he does not sleep well, at times.
7/92. Still quite markedly depressed, crying & bewailing
Dec 9/92. Has a cold in his head, and coughs some.
. Dec 29/92. Claims he cannot sleep well.
16/93. At times, seems somewhat more cheerful, but again
s ideas that "his family is perishing &c". Seems to
Health fairly good.
gloomy, depressed & holding the same ideas more-
gaining some in weight.
Day. Mar 18/93. Claims that he does not sleep well,
d. Plays games quite well & intelligently —
but does not sleep very well, as a rule, at night. Gets
ties. By day, about the same.
18/93. Since last note on this subject, patient has been resting
as 8 hours) each night. Hypnotics are sometimes given but
is about as usual. Reads a good deal & plays games quite
depressed & pression of countenance and evidently still

" 31 holds to his delusions. Health is fairly good for him. May 31/93. Apparently contains restful & to sleep well, at night. Appetite good; bowels regular. Goes outside visits in the grove 3 or 4 times each week, during the fine weather. Still very depressed.
June 5/ May June 5/93. Has gained some in weight, the past month. June 22/93. Received fruit &c from home today.
" 30 June 30/93. No change to note in the past month. Still gloomy & depressed.
July 4 July 4/93. Has lost some in flesh the past month. Does not complain of any ill-feeling, however.
" 31 July 31/93. Physical health quite good, for a man of his age. Does not change much, if any, from month to month. Appears to hold to his delusions as strongly as ever.
Aug 3/ Aug 3/93. Weight fluctuates some, yet health is quite good. Aug 31/93. Appetite is good; bowels regular. Still much depressed; crying, at times. Talks to himself also. Reads considerably. Goes outside for a airing occasionally, but not often.
Sept 30 Sept 30/93. Spends a good portion of his time in reading & playing checkers. Still very depressed.
Oct 3/ Oct 3/93. Is in his usual health. Oct 31/93. Always quiet & well-behaved. Continues very much depressed & cries quite often. Still holds to his delusions. Nov. 93 Wt 175. P 80. Nov 30 93 Appetite good. depressed. Nov 30 93. Depressed. Moaning & crying, thinks his children are starving. Plays cards & checkers. Reads. Appetite good. Dec 1 93 Wt 180. P 86

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1892 This man was brought here by deputy S[heriff]
following history. There is some histor
- acute; first symptoms of disease
attacks has been variable; mis an
has shown no disposition to in
ways, and propensity is ve
habits; no peculiarities o
bodily disease; Conf
at St. Peter, Minn

Aug 1. Aug 1/92. Takes food in
" 2 Aug 2/92. Was restless part
" 3 Aug 3/92. Slept but 1 hour la ...very restless. Wt 165 pds. P 88
" 4 Aug 4/92. Was restless for a couple ... n. Pulse 88.
" 5 Aug 5/92. Slept 3 hours last night, ...ulse 80.
" 6 Aug 6/92. Restless 3 hours, sleeping ... Pulse 84.
" 7 Aug 7/92. Slept 4 hours last night. ...night. Am. Pulse 88.
" 8 Aug 8/92. Slept about 6 hours last night, ...stless at times. Am. Pulse 88.
" 9 Aug 9/92. Was restless 4 hours, sleeping 3 hours, ...ght. Vomited early in the night, sweat a good deal and felt unwell. Am. Pulse 84. Had no more vomiting, but some diarrhoea.
" 10 Aug 10/92. Was restless 3 hours, sleeping 4 hours, last night. Am. Pulse 88.
" 11 Aug 11/92. Slept 6 hours last night. Am. Pulse 96. PM. Pulse 92. T(e) 99.3.
" 18 Aug 18/92. Since last note for a few nights has been quite restless and slept poorly; the balance of the time, has slept quite well. Pulse has been 88. 78. 80. 88. 86. 84. 82. on the past 5 & present mornings.
" 23 Aug 23/92. At times restless; has slept from 5 to 6 hours each night, since last note. Pulse has been 78. 82. 84. 80. the past 2 and present mornings.
" 29 Aug 29/92. Has rested better sleeping 6 to 7 hours each night (as reported by night-watch) since last note. This morning is crying, as he has done at times before, and says that "he thinks his family is perishing through his errors and mistakes"; and says he does not sleep well.
Sept 2 Sept 2/92. Has rested well and slept 7 hours each night, since last note.

Summary. Has never been noisy, either by night or day. For sleep, see above notes. Has, each day, been up on the ward, neatly dressed and tidy. Usually has spent his time sitting in the alcove among the others. Possibly, does not walk more on account of the difficulty he experiences in so doing, walking on two crutches. Has been perfectly gentlemanly & well behaved in all his talk & conduct. Talks quite freely when addressed, but always in subdued, mournful tones. At first, claimed that he was not well, frequently mentioned that his pulse was up to e.g. 88 as evidence that something was wrong; lately acknowledges that he is himself pretty well, but claims that his family is perishing and suffering through his faults. At times, is more cheerful. Reads, writes letters, & plays checkers. At the latter game he is acknowledged to be a formidable opponent. Bodily health seems fairly good.

" 5/92 Sept 5/92. Wt. 167 pds. Pulse 80. Sept 12/92. Visited today by friends.
" 13 his wife and sister.

Oct 4/92. Wt. 166½ pds. Pulse 68. Maintains a quite uniform weight.
" 7 Oct 7/92. Is resting better and sleeping somewhat better at night. Continues depressed and to worry. Has expressed himself as unable to write, at times, on account of his depressed feelings.
" 12/92 Oct 12/92. Visited, today, by his brother. Oct 16/92. Is crying today, saying that "he has got to perish" and that he does not sleep.
Nov 2/92 Nov 2/92. Wt 165½ pds. Pulse 82. Nov 7/92. Lies quietly and is quiet at night, but quite often complains that he does not sleep well. Is given occasional hypnotics. Is still considerably depressed, at times crying and wringing his hands saying "that his family is perishing on his account". Bodily
" 11 health fairly good. Nov 11/92. Complains that he does not sleep well, at times.
Dec 5/92 Dec 5/92. Wt 169 pds. Pulse 88. Dec 7/92. Still quite markedly depressed, crying & bewailing
" 9 his fate. Bodily health good. Dec 9/92. Has a cold in his head, and coughs some.
" 27/92 Dec 27/92. Was visited today by his brother. Dec 29/92. Claims he cannot sleep well.
1893 Jan 3 Jan 3/93. Wt 170 pounds; Pulse 88. Jan 7/93. At times, seems somewhat more cheerful, but again
" 7 goes into depression, and expresses his ideas that "his family is perishing &c". Seems to sleep well, but claims he does not. Health fairly good.
Feb 7 Feb 7/93. No perceptible change. Still gloomy, depressed & holding the same ideas in regard to "his family perishing &c". Is gaining some in weight.
Mar 10/93 March 10/93. Was visited by a friend to day. Mar 15/93. Claims that he does not sleep well.
" 15 Still cries at times & is depressed. Plays games quite well & intelligently —
Apl 1/93 Apl 1/93. Perfectly quiet; lies quietly, but does not sleep very well, as a rule, at night. Gets somewhat better sleep on mild hypnotics. By day, about the same.
May 11/93 May 11/93. Was to day visited by a friend. May 18/93. Since last note on this subject, patient has been resting and sleeping quite well (uniformly reported as 8 hours) each night. Hypnotics are sometimes given but not so frequently as in the past. By day, is about as usual. Reads a good deal & plays games quite intelligently & well. Still retains his sad & depressed expression of countenance and evidently still
" 31 holds to his delusions. Health is fairly good for him. May 31/93. Apparently sometimes restful & to sleep well, at night. Appetite good; bowels regular. Goes outside & sits in the grove 3 or 4 times each week, during the fine weather. Still very depressed.
June 5/93 June 5/93. Has gained some in weight the past month. June 22/93. Received fruit &c from home today.
" 30 June 30/93. No change to note in the past month. Still gloomy & depressed.
July 4 July 4/93. Has lost some in flesh the past month. Does not complain of any ill-feeling, however.
" 31 July 31/93. Physical health quite good, for a man of his age. Does not change much, if any, from month to month. Appears to hold his delusions as strongly as ever.
Aug 3/93 Aug 3/93. Weight fluctuates some, yet health is quite good. Aug 31/93. Appetite is good; bowels regular. Still much depressed; crying, at times. Talks to himself also. Reads considerably. Goes outside frequently occasionally, but not often.
Sep 30 Sep 30/93. Spends a good portion of his time in reading & playing checkers. Still very depressed.
Oct 31 Oct 31/93. Is in his usual health. Oct 31/93. Always quiet & well behaved. Continues very much depressed & cries quite often. Still holds to his delusions. Nov 93 Wt 170 Pulse Nov 10 93 Appetite good. Depressed. Nov 30 93. Depressed. Moaning & crying, thinks his children are starving. Plays cards & checkers. Reads. Appetite good. Dec 4 93 Wt 165 Pulse 86

to page 100.

Whole No. 3091.

Residence, 429 – 6th St. South, Minneapolis

Date Admission, 2nd August 1892.

Admitted by, Dr R.M. Phelps Hour, 7 P.M.

How Sent, J.R. Corrigan, Jof P. Hennepin Co.

Sex, Male

Age, 40

Civil Condition, married

Children, one

Age Youngest Child,

Occupation, Carpenter

Degree Education,

Profession Religion, Methodist

Habits, Good

Nativity, Maine

Physicians Committing, C.A. Chase & W.A. Jones

Correspondents, Mrs H.H. Chamberlain
429 – 6th St. South, City

No. for Year, 3

Insane Relatives, unknown

Cause Exciting, Epilepsy

Cause Predisposing,

Form, Dementia Epileptic

Accompanying Bodily Disorder, Epilepsy 5 years; deaf from "Grippe"

Suicidal or Not, No

Date of this Attack, probably for 5 years

Duration, Some 5 years

No. of Attack, 1st

No. of Admissions,

Age First Attack, 35, (about).

Time of Leaving, 5th December 1893

Time in Hospital, 1 year 4 mos 3 days

Result, Died. Exhaustion in Epilepsy –

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr Baker Aug 4/92

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, moderately quick

MEMORY:

Past Events, Good

Recent Events, he says, is much impaired

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fair, but fails to recognize those he has seen.

Correct or Illusive, Answers questions quite well; realizes own state

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, "

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Is temperate; says father died at 72.

EMOTIONAL STATE:

Normal, Calm, Yes, but is a little nervous.

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Some "of hearing" and within past 6 weeks "of smell" – "Bells ring" –

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, coherent

Voluble or Reticent, Talks quite freely

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet – 7 in WEIGHT, 132 pounds NUTRITION, Fair

WOUNDS OR ABNORMALITIES, Scar on left shin; and one on left side of occiput: and on left hand. abnormalities; none –

TONGUE, Tremors, markedly tremulous Coatings, Considerable Promptness Movement, quick but nervous

PUPILS, Equality, Equal Size, Normal

Response Light, Yes Accommodation, Yes

SIGHT, Quite-near-sighted – far-sight poor.

HEARING, somewhat impaired

COORDINATION, Arms, fingers to nose, eyes shut, fair; some little Errors.

Legs, Standing on foot, some swaying; standing, Eyes shut, firmly.

TREMORS, Hands, Tongue, Some

Facial Muscles, slight tremors General,

REFLEXES, Patellar, Equal; much exaggerated – 8 or 9 – (Dr P's Scale)

Other Reflexes,

ARTICULATION, Hesitating, Slurred, No; fair.

FACIAL EXPRESSION, a little startled.

SENSIBILITY,

HEART, Seems normal

LUNGS, Normal; expansion 2½ inches.

Aug 11/92 Dr M EXAM. URINE, Color, light yellow; reaction acid; Spec grav. 1028; albumen, mod; urea 1.5%

8/18 Phila (Dr B) Microscopy. Triple phosphates abundant; amorphous urates; double spheres (crystal), greenish yellow (very abundant) Dumb bells few.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Yes	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor, Yes
SLEEP, Good,	Poor,	Irregular,
PULSE, 82	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Some 5 Years. ONSET GRADUAL OR SUDDEN, Is Epileptic;

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother died when patient 6 mos old. Paternal grandmother died of consumption.

Father or Pat. Relations, Says father died at 72.

Brothers or Sisters,

1892. This man was brought here by Deputy-Sheriffs Keller & Swenson; the following history accompanied the patient; phthisis seems hereditary. Father died of phthisis, mother died when patient was 6 months old. Cause of this attack is Epilepsy; form is chronic and paroxysmal; has had epilepsy for 5 years, and deafness from "Grippe". First symptoms of disease were manifested several months ago, by incoherency and tearing clothes. Insanity is now manifested by incoherency, destructiveness and furor. Has shown no disposition to injure others; is not suicidal; has destructive (of clothing) habits; no restraint or confinement has been employed; has been under medical treatment; results negative; fits close for from 2 to 5 months; are at irregular intervals; between times he is unsettled mentally.

Aug 4 Aug 4/92. On examination to day the following additional notes were taken. Speaks of "specks" before eyes. Expresses the sensation as if "hairs were before his eyes"; in nearly a vertical line; are white when eyes are closed and dart when eyes are open; sees more of them, when eyes are shut. Has "ringing" in ears; sounds "like noise of wind in a big grove". Says he never had headaches, except very lately; and these slight; no vomiting except very recently; claims very good health; had Typhoid fever in Minneapolis, 11 years ago; from that time, upto 5 years ago, had sensations, which, he thinks, were the fore-runners of the more pronounced fits; in regard to recent events, says, he remembers some, but they appear "to have been 3 or 4 years ago". When speaking of certain subjects (as for instance of parents or family) "cannot control tears coming"; "not only seems sad, but really feels so"; "can't help it"- Last night, when just about going to sleep, heart flutters greatly; it does this, he says, when he becomes excited or hears much noise. Thinks he has seen the Dr. (Dr B) before; but cannot say positively.

" 3 Aug 3/92. Was quiet and slept 9 hours last night. States that he has, but recently, come from an Hospital in Seattle, Washington, where he had been 140 days.

" 4 Aug 4/92. Reported as quiet and sleeping 9 hours, last night. Patient claims, however, that he had 2 fits during the night, slept poorly and now feels badly & has headache.

" 6 Aug 6/92. Has been quiet and apparently slept well, the past 2 nights. Had a fit today; 3 diarrhoeal passages and 3 spells of vomiting; has been dizzy and now complains of the noise troubling him.

" 9 Aug 9/92. Has remained quiet at night; and sleeping well since the last note.

" 11 Aug 11/92. Patient has been so well-behaved, quiet & orderly, that, a few days ago, he was moved from C^3 to B^1. This evening, after supper, attendant asked patient to get up from the bench where he was lying and go out for a walk with the others; whereupon, the patient refused to go- the attendant then took him by the shoulder to assist him to rise, when patient grabbed the attendant and attempted to throw him. The only other attendant on the flat came to his assistance, as also did a patient (an inebriate). Mr Chamberlain is reported to have struggled so desperately as to have given the 3 a hard struggle to control him and get him down to C^3. Patient was somewhat bruised about the face and body. He was, later, moved up to B^2.

" 12 Aug 12/92. Was restless, complaining some of pain, sleeping but 2 hours, last night.

" 13 Aug 13/92. Slept 6 hours last night. Restless by spells.

" 14 Aug 14/92. Was irritated & became noisy last night, because his room-mate snored some. Slept & has

" 15 Aug 15/92. Was quite noisy for a couple of hours last night, sleeping but 4 hours. AM. Remains in bed today,

Chamberlain
Symptoms of Sickness
file no.

as usual; of pain in his side & epigastrium; pupils are

ing better, since the last note. Aug 23/92. Night-nurse went
mped up & ordered him out. He was noisy, "hallooing" part of
ight. Claims that he has caught cold & that he vomited. Is
had a fit. Aug 27/92. AM. Is in bed; complains of a
attendant was struggling with another patient to make
tendant; was taken off, whereupon he returned on another
. Night-nurse entered patients' room and found the latter
in to get down & go to bed; whereupon, the patient grabbed
. Was moved to C^4. Aug 28/92. Was out of bed and
72. Wt 128 lbs. Pulse 66. Sep 7/92. Since the 27th ult.
apparently slept well at night. Has been quiet and
been clean and tidy in personal care. Claims he has
-ably petit-mal. Sep 9/92. Fits are reported as usually
, their approach sometimes in advance and gets into
veral fits since yesterday; claims that "all things now look
chest.

Oct " w noisy or maniacal at night. Has been quite restless and
" ...ows him into his fits; that he is frequently awakened at night;
that he is having numerous fits and is growing worse; that his hearing and eye-sight are affected. Letters to his wife rehearse these complaints, and hint at other trouble, possibly misuse, on the part of attendants. Patient, in fact, does complain of many things in regard to the doings of the attendants; also of the
" 18 behavior of the patients toward him and others. Maintains uniform weight. Oct 18/92. Claims that
" 29 he cannot stand most of the medicines (bromides), and refuses to take his medicine. Oct 29/92. For some time past, has been growing rather more troublesome, irritable & excitable. This has occurred, in part, in his interference with other patients; E.g. If he sees any patient in any way handling or interfering with another in a manner that did not accord with his ideas of proper conduct, Mr C— would rush in and interfere, usually with violence. Today, had trouble with
" 30 the attendants. Oct 30/92. This morning, attacked a fellow-patient R. R—, whom he has a special grudge against, and cut his head by a blow with a night-vessel, and bit his finger. Chamberlain was secluded. He justifies his action on the ground that R— was not behaving a fellow patient right. In seclusion to day, has been quite noisy.—
Nov 2/92 Nov 2/92. Wt 120 lbs. (in undergarments alone). Pulse 80. Nov 8/92. Since the trouble of the 30th ult. patient has been kept in his room, spending the greater part of the time in bed. For some days was very noisy indeed, day & night; yelling loudly, pounding the screen of his door. Upon entrance to his room, would talk comparatively rational & well, but insisted that he would be noisy as long as he was kept in the room. An offer to dress him & put him out of seclusion, upon another ward, was met with the refusal to do so willingly & the declaration that he would still be noisy there. Patient has become considerably quieter & better-behaved during the past few days—

(Carried to page 224)

1892. This man was brought here by Deputy-Sheriffs
history accompanied the patient; phthisis seem
mother died when patient was 6 months old. Can
Chronic and paroxysmal; has had epilepsy for
First symptoms of disease were manifested se
tearing clothes. Insanity is now manifested
Has shown no disposition to injure others; is
no restraint or confinement has been employed;
negative; fits cease for from 2 to 5 months; a
unsettled mentally.

Aug 4 Aug 4/92. On examination to day the following
eyes. Expresses the sensation as if "hairs wer
when eyes are closed and dark when eyes a
in ears; sounds "like noise of wind in a bi
and there slight; no vomiting, wept very rece
in Minneapolis, 11 years ago; from that time, up to 5 y
the fore-runners of the more pronounced fits; in regard to recen
they appear "to have been 3 or 4 years ago". When speaking of certain su
or family) "cannot control tears coming"; "not only seems sad, but really p
Last night, when just about going to sleep, heart flutters greatly; it does this, he says, when he
becomes excited or hears much noise. Thinks he has seen the Dr (Dr B) before; but cannot say positively.

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" 4 Aug 4/92. Reported as quiet and sleeping 9 hours, last night. Patient claims, however, that he had 2 fits during the night, slept poorly and now feels badly & has headache.

" 6 Aug 6/92. Has been quiet and apparently slept well, the past 2 nights. Had a fit today; 3 diarrhoeal passages and 3 spells of vomiting; has been dizzy and now complains of the noise troubling him.

" 9 Aug 9/92. Has remained quiet at night; and sleeping well since the last note.

" 11 Aug 11/92. Patient has been so well-behaved, quiet & orderly, that, a few days ago, he was moved from C3 to B1. This evening, after supper, attendant asked patient to get up from the bench where he was lying and go out for a walk with the others; whereupon, the patient refused to go — the attendant then took him by the shoulder to assist him to rise, when patient grabbed the attendant and attempted to throw him. The only other attendant on the flat came to his assistance, as also did a patient (an inebriate). Mr Chamberlain is reported to have struggled so desperately as to have given the 3 a hard struggle to control him and get him down to C3. Patient was somewhat bruised about the face and body. He was, later, moved up to B3.

" 12 Aug 12/92. Was restless, complaining some of pain, sleeping but 2 hours, last night.

" 13 Aug 13/92. Slept 6 hours last night. Restless by spells.

" 14 Aug 14/92. Was irritated & became noisy last night, because his room-mate snored some. Slept 4 hrs.

" 15 Aug 15/92. Was quite noisy for a couple of hours last night, sleeping but 4 hours. AM. Remains in bed today,

complaining that he cannot see as well as usual; of pain in his side & epigastrium; pupils are unequal, left larger; Pulse 84.

Aug 21/92. Has been quieter, sleeping and resting better, since the last note. Aug 23/92. Night-nurse went into patient's room last night, when the latter jumped up & ordered him out. He was noisy, "hallooing" part of the night. Aug 24/92. Was restless part of last night. Claims that he has caught cold & that he vomited. Is hoarse. Aug 26/92. Remained in bed today; says he had a fit. Aug 27/92. AM. Is in bed; complains of a cold and headache. Pulse 92. PM. While an attendant was struggling with another patient to make him obey Mr C. pan up and attacked the attendant; was taken off, whereupon he returned on another attendant and fought quite viciously. 9 PM. Night-nurse entered patient's room and found the latter sitting upon the window-sill and requested him to get down & go to bed; whereupon, the patient grabbed the night-nurse and bit him in the thigh. Was moved to C4. Aug 28/92. Was out of bed and noisy for a short time, last night. Sep 5/92. Wt 128 lbs. Pulse 66. Sep 7/92. Since the 27th ult., has been comparatively quiet and has apparently slept well at night. Has been quiet and comparatively well-behaved by day. Has been clean and tidy in personal care. Claims he has occasional fits; many of them are probably petit-mal. Sep 9/92. Fits are reported as usually without active convulsive movements. Realizes their approach sometimes in advance and gets into his room usually before their onset. Says he had several fits since yesterday; claims that "all things now look yellow to him." Sep 16/92. Complains of a sore chest.

Oct 4/8 Oct 4/92. Wt 128 lbs. Pulse 88. Oct 8/92. Is never noisy or maniacal at night. Has been quite restless and irritable, complaining much that the noise drives him into his fits; that he is frequently awakened at night; that he is having numerous fits and is growing worse; that his hearing and eye-sight are affected. Letters to his wife rehearse these complaints, and hint at other trouble, possibly misuse, on the part of attendants. Patient, in fact, does complain of many things in regard to the doings of the attendants; also of the behavior of the patients toward him and others. Maintains uniform weight. Oct 18/92. Claims that he cannot stand most of the medicines (bromides), and refuses to take his medicine. Oct 29/92. For some time past, has been growing rather more troublesome, irritable & excitable. This has occurred, in part, in his interference with other patients. E.g. If he saw any patient in any way handling or interfering with another in a manner that did not accord with his ideas of proper conduct, Mr C — would rush in and interfere, usually with violence. Today, had trouble with the attendant. Oct 30/92. This morning, attacked a fellow patient R.R. —, whom he has a special grudge against, and cut his head by a blow with a night-vessel, and bit his finger. Chamberlain was secluded. He justifies his action on the ground that R— was not treating a fellow patient right. In seclusion to day, has been quite noisy.

Nov 2/8 Nov 2/92 Wt 120 1/2 lbs. (in undergarments alone). Pulse 80. Nov 8/92. Since the trouble of the 30th ult. patient has been kept in his room, spending the greater part of the time in bed. For some days was very noisy indeed, day & night; yelling loudly, pounding the screen of his door. Upon entrance to his room, would talk comparatively rational & well, but insisted that he must be noisy as long as he was kept in the room. An offer to dress him & put him out of seclusion, upon another ward, was met with the refusal to do so willingly & the declaration that he must still be noisy there. Patient has become considerably quieter & better-behaved during the past few days —

(Carried to page #24)

Personal and Medical History of Andrew O. Fredericksen

Whole No. 3094.

Residence, Vernon

Date Admission, 3rd August 1892

Admitted by, Dr. Kilbourne Hour, 12 M.

How Sent, E. F. Wray J of P. Dodge County.

Sex, male

Age, 30

Civil Condition, married

Children, Three

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Yes

Habits, Intemperate

Nativity, Canestee, Dodge County

Physicians Committing, J. Bedeist and S. H. Van Cleve

Correspondents, (Bro-in-law) Chas Moen, Rochester, Minn

No. for Year, 6

Insane Relatives, None

Cause Exciting, Epilepsy

Cause Predisposing,

Form, Dementia, Epileptic

Accompanying Bodily Disorder, None

Suicidal or Not, Not

Date of this Attack, about 1887

Duration, about 5 years

No. of Attack, not 1st

No. of Admissions,

Age First Attack, about 25

Time of Leaving, Sept. 12" '92.

Time in Hospital, 1y, 1m, 26 ds.

Result, Improved

EXAMINATION ON ADMISSION.

Exd by Dr. Baker, Aug 5/92. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, Somewhat sluggish

MEMORY:

Past Events,

Recent Events, Seems fair, but says "memory not very good."

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Ordinary observation limited;

Correct or Illusive, Answers questions fairly.

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has had epilepsy 5 years; is some intemperate; knows when fits are coming on; feels unable to do or say anything; appreciates that sensation.

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Yes

Exalted,

Depressed,

DELUSIONS: None detected

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Probably none

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Talks only in answer to questions. Quite prompt then.

Personal and Medical History of Andrew O. Fredericksen

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 1/4 inches. WEIGHT, 191 1/2 pounds NUTRITION, Good

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Steady Coatings, Considerable Promptness Movement, Slow

PUPILS, Equality, Equal Size, About normal.

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Finger to nose, eyes shut, a little inaccurate.

Legs, Standing, one foot, some unsteadiness. Standing, eyes shut, sways some. turning quickly; walking fair;

TREMORS, Hands, Tongue,

Facial Muscles, General,

REFLEXES, Patellar, Left much diminished; at times only w reinforcement; right seems more responsive.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, fair

FACIAL EXPRESSION, fair

SENSIBILITY,

HEART, Good

LUNGS, Good; Girth 38. Expansion 3 1/2 in

Aug 9/92 Dr M EXAM. URINE, light yellow color; reaction acid; spec. grav. 1022; albumen none; urea 8%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Yes	Constipated,	Irregular,
APPETITE, Good, yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 68	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Andrew O. Frederickson

1892. This man was brought here by W A. Houston, Sheriff, and Peter Frederickson, brother, with the following history; patient has been intemperate; supposed cause of attack is epilepsy; form is acute; first symptoms manifested about 5 years ago, by epileptic fits; this is not the first attack. Insanity is now manifested in a general way; has shown a disposition to injure others; is not suicidal; not disposed to filthy or destructive habits; manifested peculiarities before symptoms appeared; has been previously confined at this Hospital (Rochester).

Aug 4 Aug 4/92. Was quiet all night and slept 9 hours. Last night. Was put on bromides.

" 5 Aug 5/92. Quiet and slept 8 hours last night.

" 6 Aug 6/92. Again passed a quiet night and slept 9 hours last night. Was visited today by his sister.

" 10 Aug 10/92. Has been perfectly quiet at night, having slept 8 or 9 hours each night; visited today by his sister & friend.

" 23 Aug 23/92. Has been uniformly quiet at night since the last note, sleeping well. Was today visited by his wife and sister. Was very persistent in his request to be permitted to go home. No convulsions have been seen so far.

" 30 Aug 30/92. Has been restless, only in one instance, at night. In all other instances resting and sleeping well.

Sep 1 Sep 1/92. Was visited today by his sister.

" 5 Sep 5/92. Weight Has been moved up to B^2. Weight 190 lbs. Pulse 80.

" 6 Sep 8/92. Had a convulsion last night.

" 8 Sep 8/92. Had a very hard convulsion last night. Pulse, immediately afterwards, 120.

" 9 Sep 9/92. Summary. As described above, has passed his nights quietly and has slept well, since admission. Has also been quiet, clean, tidy and well-behaved, at all times. Has spent a good deal of time sitting apart by himself, talking with none, or engaged in no work or occupation. Has played cards some and done a little work; but seems inclined to be idle and is slow in movement and mental activity. Has never yet seemed irritable or ugly. Talks when addressed calmly; does not carry conversation very far; and is coherent. Is very anxious to go home. Bodily health good. ——— Sep 12/92. Was visited today by his wife and was permitted to go home with her, on trial.

Discharged

Personal and Medical History of Christopher H. Carli

from page 335

1893 and refusing to say anything, has lately been very talkative, in fact, too much so.

Mar 16 Mar 16/93 Since the 1st inst [illegible]

DETAILED HISTORY OF SICKNESS OF MR. C. H. Carli
DIAGNOSIS. Mar 1 — 93.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
Mar 1	7^{30}		162						
		5		52					
" 2	7^{30}		164						
		5		53					
" 3	7^{30}		170						
		5		54					Bowels Move regular appetite good. Has been very restless well day.
" 4	7^{30}		164						Very uneasy during the day always existing
		5		66					to be moving around.
" 5	7^{30}		124						Rested well day.
		5		88					
" 6	7^{30}		144						
		5		54					2 PM Bowels Moved.
" 7	7^{30}		162						
		5		52					Bowels Moved.
" 8	7^{30}		168						
		5		60					Continually talking & moving around
" 9	7^{30}		166						
		5		50					Become very noisy & restless Mond
" 10	7^{30}		178						Was B^2 — Left in cohesive & wandering
		5							

(Carried to 16)

Personal and Medical History of Andrew O. Fredericksson

1892.

Aug 4 A
" 5 A
" 6 A
" 10 A
" 23 A
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" 30 A
Sep 1 S
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" 8 S
" 9 S
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" 12 go

Personal and Medical History of Christopher H. Carli

from page 335

1893.

and refusing to say anything, has lately been very talkative, in fact, too much so.

Mar 16 Mar 16/93. Since the 1st of February, was, for a week or so, quite often restless & wakeful: for the past 4 or 5 weeks, however, has been but slightly restless & slightly noisy at times, sleeping on the whole, very well. Has been up & about the ward, daily, for several weeks; very talkative, incoherent, winking & making suggestive but usually incomprehensible allusions; having also been fairly active physically and quite persistently destructive. Remembers individuals. Has gained in bodily health.

" 20/93 Mar 20/93. Visited today by his brother. Mar 28/93. For the past 10 days or so, has been active, maniacal, and destructive. Since the 24th has slept very poorly; 3 nights in succession, none at all; & only 2 or 3 hours one night since. —

Apl 7 Apl 7/93. Gradually grew somewhat quieter at night & now restful & has slept somewhat better since last note. Has also been less restless & noisy by day; now inclined to be quiet & stupid, lying around, saying nothing. Inclined to destructive & careless habit. - April 8/93. Was destructive & filthy today. April 10/93. Was violent today, throwing things at other patients; transferred to C3 -

" 19/93 April 19/93. Was visited today by a friend. Apl 26/93. Was visited yesterday by his wife. Patient has been comparatively quiet & restful at night, sleeping fairly well; is somewhat usually restless for from 2 to 3 hours, at night. Under the strict watch & care in C3, has not been violent or indulging in destructiveness. Still inclined, however, to be excitable, maniacal etc. Mrs C - had determined to take her husband home, having brought an attendant with her; and Patient was permitted to go away with her today. — —

May 10 May 10/93. Has returned today; wife evidently finding it impossible to get along with him.

" 18 May 18/93. Is dirty & destructive; not inclined to be quarrelsome, active or talkative. Answers questions rationally, at times. Appetite good. Bowels regular. Sleeps well, at night. —

" 31 May 31/93. Apparently rests & sleeps well. Appetite continues good. Bowels normal. Is sometimes quiet; at others, has "ugly spells" when he fights with or without provocation - receives some scratches & bruises in this way, from his fellow patients. Acts as if he was crippled or stiffened in legs & back, but does not complain. Talks sometimes rationally; not inclined to say much. Seems demented. Habits are dirty & he has been destructive; especially so on the nights of the 22d & 29th. Was recently visited (May 28th) by some friends.

June 1/30 June 1/93. Tore his shirt & bedding to pieces, last night. June 30/93. Is more or less destructive, nearly every night. Also very noisy, for 4 hours or so at night, frequently. Appetite is voracious; has to be fed at on the hall. Bowels are regular. No apparent change in physical condition. Is mischievous on the hall; has to be closely watched as to his (such destructive & quarrelsome habits. Is not inclined to say much. Habits are still very dirty. Has received no injuries & has not been in seclusion. Received visits; from his wife June 6. 7. 8th & from friends June 13th —

July 13/25 July 13/93. Has visited by a friend. July 25/93. Has been reported as restless & noisy for from 4 to 6 hours, also destructive, on the nights of the 4th. 17th 21st & 22nd inst. July 31/93. Appetite continues good; bowels regular. Is in good physical condition. No change to note in either conduct or behavior by day. Has struck, on 2 different occasions by a fellow-patient, making 'out on eye & raising a lump; nothing serious, however. Still manifests delusions. Talk incoherent; very much so, at times. Is dirty & destructive in habits. Has not been in seclusion the past month.

(Carried to 16)

Personal and Medical History of Charles Blessing



Whole No. 3096

Residence, Minneapolis

Date Admission, 6th August 1892

Admitted by, Dr. Phelps Hour,

How Sent, J. R. Corrigan, Jof

Sex, Male

Age, 17

Civil Condition, Single

Children, None

Age Youngest Child,

Occupation, None

Degree Education,

Profession Religion, No

Habits, Good

Nativity, Illinois

Physicians Committing, Wm J. Bynes & W. A. Jones

Correspondents, Mary Ludwig (Aunt) 1307 Wash. ave – Mp.

8

...ves, unknown

...ng, Epilepsy

...sposing,

Epileptic Dementia

...ing Bodily Disorder, Epilepsy past 2 years

...Not, Not

...s Attack, 2 years ago last abnt 2 years

...ck, 1st, and continuous

...issions,

...Attack, abnt 15

...eaving, Apr. 2nd 94

Time in Hospital, 1y. 6mo. 26ds.

Result, Improved

EXAMINATION ON ADMISSION.

Exd by Dr. Baker, Aug 10/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, somewhat sluggish

MEMORY:

Past Events, Seems good } Says that can't remember for

Recent Events, " " } a few days after sickness.

Special Subjects,

PERCEPTIVITY: Ordinary observation seems good.

Alert or Dull, } Answers questions quite well;

Correct or Illusive, } does not realize any condition

REASONING POWER: – Fair –

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm, Yes

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, } None detected

Special Subjects, }

Transitory or Not, }

HALLUCINATIONS: None

ILLUSIONS: —

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free

GENERAL DESCRIPTIVE REMARKS:

...ets Drink-habits say he drank a little beer – Talks quite freely & clearly when questioned; does not seem to know approach of fits or to feel their after-effect much – Only knows them having occurred by headache – Has worked on his aunts' farm and in bakery; does not know of any ugliness or unmanageableness – "They never told him of any" – Says his uncle was cranky, and could not get along with anyone – our patient never quarreled with him – yielded to him.

Personal and Medical History of Charles Blessing

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5 in. WEIGHT, 123 pounds NUTRITION, not very good; fair

WOUNDS OR ABNORMALITIES, slight scars; abnormalities, none.

TONGUE, Tremors, Coarse, slight. Coatings, medium Promptness Movement, deliberate

PUPILS, Equality, Equal Size, normal

Response Light, yes Accommodation, Yes

SIGHT, Far-sight impaired; near good.

HEARING, Good.

COORDINATION, Arms, finger to nose, Eyes shut, good; (standing on foot, fair).

Legs, Standing on foot, fair; Standing, Eyes shut, 2ways;

TREMORS, Hands, slight Tongue, slight

Facial Muscles, General,

REFLEXES, Patellar, Equal; exaggerated (7-8) –

Other Reflexes,

ARTICULATION, Hesitating, Slurred, Good.

FACIAL EXPRESSION, Fairly expressive

SENSIBILITY,

HEART, 2nd Sound, some clacking; no murmur.

LUNGS, Chest 32 in Expansion 2¼ in; Seem good.

Aug 12/92 Dr Hm EXAM. URINE, Color yellowish red; reaction acid; Spec-grav. 1028; Albumen, none; urea – 8%

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Yes	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, (See history)	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 2 years Epilepsy ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother died of Consumption

Father or Pat. Relations, Father died by accident

Brothers or Sisters, of sisters one (only) + dead – Cause unknown.

1892. This patient was brought by Deputy-Sheriff Keller, with the following history;— habits have been good; Cause of attack is Epilepsy; paroxysmal; has been subject to it for past 2 years; first symptoms then manifested; fits daily or twice daily; is ugly and unmanageable; this is the first attack & seems contentious; insanity is now manifested by Epileptic seizure and furor. There is no disposition to injure others; not suicidal; no filthy or destructive habits; Has been under medical treatment, results negative; father died from accident; mother from Phthisis.

Aug 6/92 Aug 6/92. At 8:30 PM. Had a convulsion. Aug 7/92. Talked some in his sleep last night; otherwise quiet
" 8 and slept 8 hours. AM. Pulse 68. Aug 8/92. Was quiet and slept 8 hours last night. AM. Pulse 60.
" 17/92 Aug 17/92. Had a convulsion last night. Aug 18/92. Has quite often talked some and been somewhat restless at night. Has usually slept about 7 hours. Pulse has been 72. 80. 78. (?) 72. 86. 72. 80. 80. and 70 on the past 9 and present mornings.

Sep 5/10 Sept 5/92. Wt. 125 lbs 4 ozs. Pulse 85. Sep 10/92. With the exception of occasional talking, is quiet at night & sleeps well. Has been uniformly clean, tidy and well-behaved, since coming here. Has not been irritable;
" 16 has worked some; plays games, talks quite freely; recently, within 2 or 3 days, had quite a severe convulsion. Bodily health fairly good. Sep 16/92. Has been to the Fair today; had a fit, in town,
Oct 14 while returning. Oct 14/92. Wt 128 lbs. Pulse 88. Has gained in weight.
" 17 Oct 17/92. So uniformly quiet at night, sleeping well. Has occasional fits. Conducts clean, tidy and well-behaved; free, pleasant, coherent and rational in conversation. Walks quite well. Bodily health good.
Nov 7/16 Nov 7/92. Wt 128 lbs. Pulse 72. Nov 16/92. Uniformly quiet and well behaved; fairly active mentally and physically. Works quite well. Fits infrequent. Bodily health quite good.

Dec 5/7 Dec 5/92. Wt 128½ lbs. Pulse 82. Dec 7/92. Visited today by a friend.
" 16 Dec 16/92. No fit has been seen for several weeks. Conduct & health about as usual. Had an attack of acne rosea eruption on nose.

1893
Jan 3/7 Jan 3/93. Wt 125½ lbs. Pulse 84. Jan 17/93. No fit has been reported during the past 4 weeks.
" 20 Continues well-behaved and fairly well mentally. Jan 20/93. Am. Has complained of ear-ache for past 3 days: given treatment for same.

Feb 3/17 Feb 3/93. Wt 126 pounds. Pulse 82. Feb 17/93. No fit has been reported for 2 months. Conduct and behavior remain about the same. Writes occasional letters. Is fairly contented though
his homesick at times & be sent home.

Mar 25/29 Mar 25/93. Is feeling well & looks well: quite bright & active. Has not had a convulsion, so far as known, for months. Mar 29/93. Has quite severe headache today.

Apl 18 Apl 18/93. No convulsions have been reported. Is about the same.

May 8/9 May 9/93. Had a fit while at work in kitchen today: the first reported since last September. May 9/93. Went to work at
" 25 about the carriage house. May 25/93. Has continued to work outside daily and now seems more contented. Says he sleeps well at night & in every way feels much better. Does not so frequently complain of headaches now.
" 31 No fits have been reported since that of 8th inst. Appears to be in good physical health. Today, transferred to A 2.—
May 31/93. Works out well, daily, about the barn, & says he is feeling much better than when in the ward. Has a limited parole. Quiet, clean, tidy & well-behaved. Of good personal habits. Appetite good & bowels regular. Sleep & rest at night, also very good. Physical condition is quite good.

NAME. Chas Blessing

DATE. 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	125½	84	—	
Feby 3d	126	84	½	
Mar 27d	129½	94	3½	
Apl. 4th	126	84		3½
May 3d	128½	80	2½	
June 1st	129	72	½	
July 3d	125½	90		3½
Aug 4th	126	64	½	
Sept 4th	129½	81	3½	
Oct 5th	129½	80	—	
Nov 4th	130½	88	1	
Dec 7?	130	90		½
1894 Jany 2?	129	88		1
Feby 8th	130	80	1	
Mar 8	130	85	—	—

& takes quite an interest in keeping his share of the work
conversation. No fit reported since that of the 8th May last.
& are both good. Plays games, cards &c when in the hall —
& do often complain of headaches now.
open ward" — July 3/93. Appetite at times, is only medium.
ll behaved. Works out daily, as usual. Is always a
no marked delusions or other prominent symptoms —
seems more contented, now that he can work outside — takes
nings.
eldom complains of any headaches now. Aug 3/93. Works well
te good. Bowels regular. Clean, tidy & of good personal habits.
ight, the past month. Continues in good bodily condition.
the past few days, but is now better. Otherwise, no change.
Has continued, all along, to work about the barn & stable;
. No fits have been reported since that of May 8th and he
— Nov 1st 93 Wt 130 lbs P. 88 Appetite good Behavior good Dec 2 93 Wt 130 lbs P. 90 Aug 2 93 No change
sleeps Wt 129 P 88 Aug 3 93 Same as before. Works outside daily —
ysical health. Habits very neat and clean. — ——
Works daily in the Store-room — Feb 28/94. Had a fit and fell out
plained of headache this morning: knew he had a fit last night
and fell out of bed. This morning, Complained of a very severe
had a convulsion, as mentioned. Mar 31/94. Has con-
nues. Always willing & obliging. For several months,
though anxious to go home has not Complained much
neat & clean. He has attended patients entertainments
quite regularly, participating in them. Has good physical condition.
Apl 2/94 Apl 2/94. Was permitted to leave for Minneapolis today in company with some other
patients leaving for the same place. —

Discharged

Personal and Medical History of

1892. This patient was brought by Dep
habits have been good; Cause of att
for past 2 years; first symptom
unmanageable; this is the
by Epileptic seizure an
filthy or destructive h
from accident; no

Aug 6/92. Aug 6/92. At 8.30 [illegible] ht; otherwise quiet
" 8 and slept 8 hrs [illegible] ight. Am. Pulse 60.
" 17/92. Aug 17/92. Had a [illegible] ed some and been somewhat
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[illegible] somewhat anxious to be sent home.
March Mar 25/93. Is feeling well looks well: quite bright & active. Has not had a convulsion, so
" 29 far as known, for months. Mar 29/93. Has quite severe headache today.
Apl 18 Apl 18/93. No convulsions have been reported. Is about the same.
May 8/9 May 9/93. Had a fit while at work in kitchen today: the first reported since last September. May 9/93. Went to work out
" 25 about the carriage house. May 25/93. Has continued to work outside daily and now seems more contented.
Says he feels well at night & in every way feels much better. Does not so frequently complain of headaches now.
No fits have been reported since that of 2nd inst. Appears to be in good physical health. Today, transferred to A. -
" 31 May 31/93. Works out well, daily, about the barn, & says he is feeling much better than when in the ward.
Has a limited parole. Quiet, clean tidy & well-behaved. Of good personal habits. Appetite good & bowels
regular. Sleep & rest at night, also very good. Physical condition is quite good.

Personal and Medical History of Charles Blessing

1893
June 30 June 30/93. Works out daily about the barn & takes quite an interest in keeping his share of the work
in good order. Is pleasant & quite free in conversation. No fit reported since that of the 8th May last.
Bowels normal. Appetite & sleep at night are both good. Plays games, cards &c when in the hall -
Writes occasional letters. — Does not so often complain of headaches now.
July 3/31 July 3/93. Was today moved to A3 the "open ward" - July 31/93 Appetite, at times, is only medium.
Bowels apparently regular. Is quiet & well behaved. Works out daily, as usual. Is always a
very quiet, somewhat dull boy, with no marked delusions or other prominent symptoms -
No fits have been noted since May 8th. Seems more contented, now that he can work outside - Takes
a great interest in card playing in the evenings.
Aug 14/31 Aug 14/93. Physical health is good. Very seldom complains of any headache, now. Aug 31/93. Works well
& intelligently about the barn &c. Appetite good. Bowels regular. Clean, tidy & of good personal habits.
Sept 4 Sept 4/93. Has made a slight gain in weight, the past month. Continues in good bodily condition.
" 30 Sept 30/93. Has complained of a heavy cold the past few days, but is now better. Otherwise, no change.
Oct 5 Oct 5/93. Keeps in his usual good health. Has continued, all along, to work about the barn & stable;
" 31 has been very willing & faithful in such. No fits have been reported since that of May 9th and he
himself says he has had no "spells". — Nov 4/93 Wt 130 lbs P 88. Appetite good Behavior good Dec 2/93 Wt 130 lbs P 90. No change
Nov 26/93. Had a fit while [illegible] Jany 2/94 Works with stockkeeper Wt 129 P 88 Jany 31/94 Same as before. Works outside daily -
1894
Jan 31 Is always willing & obliging. Is in good physical health. Habits very neat and clean. - -
Feb 15/28 Feby 15/94. Keeps in good flesh & health. Works daily in the Store-room - Feb 28/94. Had a fit and fell out
" 28 out of bed, last night. Feb 28/94. Complained of headache this morning: knew he had a fit last night
March March 26/94. Had a fit during the night, and fell out of bed. This morning, Complained of a very severe
31 headache; was not aware that he had had a convulsion, as mentioned. Mar 31/94. Has Con-
" " -tinued quiet and gentlemanly in manner. Always willing & obliging. For several months, has been working outside daily and though anxious to go home has not Complained much
at being kept here. Habits have been neat & clean. He has attended patients entertainments
quite regularly, participating in them. Is in good physical condition.
Apl 2 Apl 2/94 Was permitted to leave for Minneapolis today in Company with three other
patients leaving for the same place —

Discharged

Personal and Medical History of John Wagner

Whole No. 3099
Residence, St. Paul.
Date Admission, 9th August 1892
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, John R. Oliver Jof P. Ramsey Co'r
Sex, Male
Age, 39
Civil Condition, Single
Children, —
Age Youngest Child,
Occupation, Laborer
Degree Education,
Profession Religion, Catholic
Habits, Good
Nativity, Poland
Physicians Committing, Pierre Marchand & Arthur Sweeny
Correspondents,
(no relative or friend Known)

No. for Year, 11
Insane Relatives, Do not know.
Cause Exciting, don't Know
Cause Predisposing,
Form, Mania deliriosa - chronic
Accompanying Bodily Disorder, No
Suicidal or Not, Not
Date of this Attack, about a month ago (in Montana)
Duration, about a month
No. of Attack, 1st (?)
No. of Admissions,
Age First Attack, 39
Time of Leaving, July 30. 1893
Time in Hospital, 11 mos 21 days
Result, Transferred Fergus Falls
Ok/pm

EXAMINATION ON ADMISSION.

Exd. by Dr. Baker, Aug 11/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Somewhat sluggish, apparently

MEMORY:
Past Events, Probably fair (?)
Recent Events, Seems good; some uncertainty
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Ordinary observation pretty fair;
Correct or Illusive, Answers questions fairly well; has headache -

REASONING POWER:
Ordinary Subjects, Perverted
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Went to Helena, Montana, last Winter, and in March last went out to work on a new Rail-road. Worked there about 2 months, when he got sick; "there was too much talking there about him" - "he heard voices talking about him all the time"; "about some kind of Electric" - Did not get mad at them, but came away; did not hear any of these voices after he came to St Paul; nor has he heard them in Hospital here; On 29th - 30th of May last "St Mary visited him"; could not see her, but heard her talking to him; when he begins to tell what message was, grows incomprehensible, probably through incoherence, mingles talk about soldiers, war &c. Claims he had "cramps all over" when he was in Hospital in St Paul - did not have them before - claims he was robbed of $130.00 in Helena

EMOTIONAL STATE:
Normal, Calm, Seems so
Indifferent,
Exalted,
Depressed,

DELUSIONS:
Systematized or Not,
Special Subjects, (see notes).
Transitory or Not,

HALLUCINATIONS: denies (about voices talking to him)

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, coherent usually.
Voluble or Reticent, quite free, when questioned. —

Personal and Medical History of John Wagner

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5½ inches WEIGHT, 133½ pounds NUTRITION, Fair
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, tremulous Coatings, slight Promptness Movement, prompt but irregular
PUPILS, Equality, Equal Size, normal
Response Light, yes Accommodation, yes
SIGHT, good; much use tries eyes.
HEARING, much impaired
COORDINATION, Arms, finger to nose, eyes shut, good.
Legs, Standing on foot, has some difficulty; Standing, Eyes Shut, steady.
TREMORS, Hands, some Tongue, some
Facial Muscles, slight tremors of face. General,
REFLEXES, Patellar, seem equal and considerably exaggerated (about 8) Dr. P's Scale.
Other Reflexes,
ARTICULATION, Hesitating, Slurred, Probably fair; foreign accent.
FACIAL EXPRESSION, about normal
SENSIBILITY,
HEART, no murmurs
LUNGS, respiratory murmur harsh at upper parts anterior; Girth 36½ Expansion 1½
Dr. W Aug 15/92 EXAM. URINE, color, light yellow; reaction acid; Spec. grav. 1029; albumen; none; urea 1.3%
8/18 or 19 Microscopy. Triple phosphates, abundant; amorphous urates; small sized dumb-bells and single spheres.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, probably	Careless,
BOWELS, Normal,	Constipated, tendency to be	Irregular,
APPETITE, Good,	Medium, fair	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
Has had "Cramps" — only once drunk, he says.
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died about 11 years ago; does not know cause.
Father or Pat. Relations, Father died when patient was about 5 years old.
Brothers or Sisters, one brother, living; 2 sisters living in Germany -

Personal and Medical History of John Wagner

1892. This man was brought by Deputy-Sheriff Kinney with the following history of his case; form of this attack is Chronic, Exalted; first symptoms were manifested about a month ago, in Montana, when he began to receive visits from St Mary, commanding him to convert the population of America to Catholicity. Do not know anything of previous history. He was found by police wandering aimlessly on the streets. Insanity is now manifested on the subject of the conversion of this Country to Catholicity. Has shown no disposition to injure others; is not suicidal; has no disposition to filthy or destructive habits. Is not subject to any bodily disease. Was restrained the first night because he insisted on going to confession; had strap on wrist - one night only; has been at City Hospital under treatment since July 21st 1892.

Aug 10 Aug 10/92. Was restless for an hours, out of bed at times; slept 7 hours last night. Am. Is up in the hall, dressed, sitting quietly, talks quietly when spoken to; ate breakfast. Am. Pulse 84. Pm. Pulse 80. Tm 98.6.

" 11 Aug 11/92. Slept 8 hours last night; was somewhat restless. Am. Pulse 82.

" 12 Aug 12/92. Was out of bed a couple of times, sleeping 8 hours last night. Am. Pulse 82.

" 13 Aug 13/92. Last night, passed the night about as usual, sleeping 8 hours. Am. Pulse 74.

" 22 Aug 22/92. Is restful at night, sleeping well. Pulse has been 82. 73. 84. 72. 80. 80. 92. 90. and 73 on the past 8 and present mornings; and has been 72. (?) 72. 74. 80. 84. and 84 on the past 6 and present afternoons, respectively. —

Sep 5 Sep 5/92. Wt. 136 lbs. Pulse 80. Has continued quiet and slept well at night, since the last note. Has been moved from B3 to B1.

" 11 Sep 11/92. Began, during afternoon, to behave peculiarly. Ate no supper. He sat upon a bench, had quite frequent spells of what appears almost like chills or 'shiverings', accompanied by a kind of sound as if in distress. The face, at the same time, wearing a look, almost of ecstasy; perspiring during these spells. Could not be made to say a word, although he recognized the fact that he was addressed, by shaking his head; got up and walked quite steadily at the Dr's request, going down stairs, (to the sick-ward). 6.45 Pm. Pulse 92. R 32. Tm 99. Sept 12/92. Was restless + had several spells of shivering

" 12 during the early part of the night; slept none at all; 6 Am. Pulse 94. R 21. Tm 98.6. Does a variety of peculiar things; laughs, cries + sings by turns; does not speak when spoken to, although he will rise and shake

" 13 hands, smilingly. Takes food. Pm. Pulse 90. R 28. Tm 99.2. Sep 13/92. Am. Pulse 86. R 22. Tm 98.8. Is more quiet, on the hall. A little restless, sleeping 6 hours last night. Pm. Pulse 88. R 28. Tm 98.6. Eats well.

" 14 Sep 14/92. Was uneasy + coughed some during the night; slept 6 hours. Am. Pulse 80. R 24. Tm 99. Is quiet and much more rational and sensible in conduct; about as he formerly was. Pm. Pulse 86. R 24. Tm 98.8.

" 15 Sep 15/92. Was restful and slept 7 hours last night. Am. Pulse 84. R 22. Tm 99. Eats well. Pm. Pulse 88. R 19. Tm 98.8.

" 16 Sep 16/92. Rested well last night; Am. Pulse 86. R 20. Tm 98.8. Has a slight, loose cough. Bowels moved. -

" 23 Sep 23/92. Has recovered from the spell, described above; now behaving quite sensibly; resting and sleeping well at night. Has been moved to A1. At other times and during the spell described above before and since, has been as follows; has dressed and cared for himself, being tidy + clean in his personal habits. Has passed the day quietly, sitting usually, by preference, when not out walking, in one place, not beginning conversation, answering pleasantly, and in a few words, questions and greetings; cheerful + expressing himself as feeling well. Has done some work. No definite

NAME. John Wagner

DATE, 189 3.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jan 5	139	72		6½
Feb 3	137½	72		1½
March 2	136½	93		1
April 4th	127½	98	1	
May 3	132	68	4½	
June 5th	132	65	-	-
July 1st	128½	90	-	3½

...ally. Bodily health fairly good.

...92. Continues quiet, and to rest and sleep well at night, ... day. Sits, unoccupied, the greater part of the time. Says

...92. very infrequently slightly restless at night. Uniformly ... has behaved strangely, much as described above when ... as said almost nothing, even when addressed making ... with a peculiar smile. Bodily health fair.

...urbed; today, much more so, making no response to ...e undressed and moved about. Was transferred to B2. —

...76. Dec 5/92. Left his bed until today, when he got up. ...been uniformly quiet, resting + sleeping well, apparently ... 5th inst, and has been behaving rather unexceptionably. ...ot indulge in any games, nor work.

...9/93. Uniformly quiet at night and by day. Kept up ...talking some, until 3 or 4 days ago, when he began ...eds, when he now lies in silence + in almost a stuporous state ...w days, seemingly a continuation of his condition as ... + got up this afternoon.

...been losing some in weight, the past 2 months. ...t + sleeping well. By day, is now up + about ...sibly; very reticent; does no work, nor appear ...ings. Feb 21/93. Was today moved to B3. —

...+ quiet, at night. Is rare + silent + strangely behaved by day. Has lost in weight

April 11 April 11/93. For some time past, has walked the floor rapidly in sullen silence, refusing to stop. Today, when addressed by the D., patient became very angry + threatening in his manner, talking

" 19 loudly and excitedly about being killed here, among other things - April 19/93. About as described above

May 3 May 3/93 Has made some gain in weight in past month.

" 18 May 18/93. Still walks restlessly + almost continually up + down the hall. Is inclined to be ugly and threatening; Easily irritated; Says nothing; does no work; Sleeps probably well; appetite + health good. —

" 30 May 30/93. Appetite not very good. Is restless; walking the hall a great deal of the time. At times, has "spells" of shouting + making threats of killing people. Talks to himself a great deal. Does no work.

June 17 June 17/93. Has conducted himself about as above described for some time. Today, was moved to B3. —

" 30 June 30/93. There is no noticeable change in his conduct or behavior, except that he seems to have become more quarrelsome. Still very restless + walks the floor almost constantly.

July 16 July 16/93. Attempted to strike an attendant today. Patient slipped + fell, bumping his forehead on the

" 19 floor, receiving a bruise. July 19/93. Is acting raw, as if he cannot talk; when spoken to, will

" 31 make some peculiar noise. July 31/93. No noticeable change. Appetite good. Bowels normal.

Was today, with several others, transferred to Hospital at Fergus Falls.

1892. This man was brought by Deputy-Sheriff Kinney his case; form of this attack is chronic, exalted; first a month ago, in Montana, when "he began to receiv him to convert the population of America to Cathol previous history. He was found by police wanderin now manifested on the subject of the conversion of t no disposition to injure others; is not suicidal; has no is not subject to any bodily disease. Was restrained to confession; had strap on wrist - one right only; ha since July 21st 1892.

Aug 10 Aug 10/92. Was restless for an hour, + out of bed at times, dressed, sitting quietly, talks quietly when spoken to;
" 11 Aug 11/92. Slept 8 hours last night; was somewhat r
" 12 Aug 12/92. Was out of bed a couple of times, sleep
" 13 Aug 13/92. Last night, passed the night about as
" 22 Aug 22/92. Is restful at night, sleeping well. Re the past 8 and present mornings; And has been afternoons, respectively. —

Sep 5 Sep 5/92. Wt. 136 pds. Pulse 80. Has continued Has been moved from B3 to B1.

" 11 Sep 11/92. Began, during afternoon, to behave he , had quite frequent spells of what appeared almost like chills w of bowed as if in distress. The face, at the same time, wearing a look, almost , spiring during these spells. Could not be made to say a word, although he recognized the fact that he was addressed, by shaking his head; got up and walked quite steadily at the Dr's request, going down stairs,

" 12 to the Sick-ward). 6.45 PM. Pulse 92. R 32. T 99. Sept 12/92. Was restless + had several spells of shivering during the early part of the night; slept none at all; 6 AM. Pulse 94. R 21. T 98.6. Does a variety of peculiar things; laughs, cries + sings by turns; does not speak, when spoken to, although he will rise and shake

" 13 hands, smilingly. Takes food. PM. Pulse 90. R 28. T 99.2. Sept 13/92. AM. Pulse 86. R 22. T 98.8. Is more quiet, on the hall. A little restless, sleeping 6 hours, last night. PM. Pulse 88. R 28. T 98.6. Eats well.

" 14 Sep 14/92. Was uneasy + coughed some during the night; slept 6 hours. AM. Pulse 80. R 24. T 99. Is quiet and much more rational and sensible in conduct; about as he formerly was. PM. Pulse 86. R 24. T 98.8.

" 15 Sep 15/92. Was restful and slept 7 hours last night. AM. Pulse 84. R 22. T 99. Eats well. PM. Pulse 68. R 19. T 98.8.

" 16 Sep 16/92. Rested well last night; AM. Pulse 86. R 20. T 98.8. Has a slight, loose cough. Bowels moved. -

" 23 Sep 23/92. Has recovered from the spell, described above; now behaving quite sensibly; resting and sleeping well at night. Has been moved to A1. At other times and during the spell described above before and since, has been as follows; has dressed and cared for himself, being tidy + clean in his personal habits. Has passed the day quietly, sitting usually, by preference, when not out walking, in one place, not beginning conversation, answering pleasantly, and in a few words, questions and greetings; cheerful + expressing himself as feeling well. Has done some work. No definite

92 delusions have been expressed usually. Bodily health fairly good.

Oct 14/92 Oct 14/92. Wt 136 pds. Pulse 100. Oct 19/92. Continues quiet, and to rest and sleep well at night, apparently. Quiet and well-behaved by day. Sits, unoccupied, the greater part of the time. Says nothing unless spoken to.

Nov 18 Nov 2/92. Wt 132 pds. Pulse 72. Nov 18/92. Very infrequently slightly restless at night. Uniformly quiet. Has been in a "spell" in which he has behaved strangely, much as described above when in one of his attacks. For some time has said almost nothing, even when addressed making no response; gets up and shakes hands with a peculiar smile. Bodily health fair.

Dec 2 Dec 2/92. Has recently been more disturbed; today, much more so, making no response to questions, shaking himself, requiring to be undressed and moved about. Was transferred to B2. —

" 3 Dec 3/92. Remains in bed today. Pulse 76. Dec 5/92. Kept his bed until today, when he got up.

" 19 Wt 135½ pds. Pulse 72. Dec 19/92. Has been uniformly quiet, resting + sleeping well, apparently, at night. Has been up daily since the 5th inst, and has been behaving rather unexceptionably.

1893 Still talks very little, however, and does not indulge in any games, nor work.

Jan 3/19 Jan 3/93. Wt 139 pds. Pulse 72. Jan 19/93. Uniformly quiet at night and by day. Kept up and around the wards; fairly active; talking some, until 3 or 4 days ago, when he began acting strangely, shaking + c; took to bed, where he now lies in silence + in almost a stuporous state.

" 24 Jan 22/93. Has been in bed the past few days, seemingly a continuation of his condition as described in last note. Dr. Feelsbetter + got up this afternoon.

Feb 3 Feb 3/93. Wt 127½ pds. Pulse 72. Has been losing some in weight, the past 2 months.

" 19 Feb 19/93. At night, apparently quiet + sleeping well. By day, is down + up + about the ward; appears to behave fairly sensibly; very reticent; does no work, nor appear to take any interest in his surroundings. Feb 21/93. Was today moved to B1. —

Mar 25 March 25/93. Quiet at night. Idle + silent + strangely behaved by day. Has lost in weight.

Apl 11 April 11/93. For some time past, has walked the floor rapidly in pallen silence, refusing to stop. Today, when addressed by the Dr, patient became very angry + threatening in his manner, talking loudly and excitedly about being killed here, among other things — Apl 19/93. About as described above

May 3 May 3/93. Has made some gain in weight in past month.

" 18 May 18/93. Still walks restlessly + almost continually up + down the hall. Is inclined to be ugly and threatening; easily irritated; says nothing; does no work; sleeps probably well, appetite + health good. —

" 30 May 30/93. Appetite not very good. Is restless; walking the hall a great deal of the time. At times, has "spells" of shouting + making threats of killing people. Talks to himself a great deal. Does no work.

June 17 June 17/93. Has conducted himself about as above described for some time. Today was moved to B3. —

" 30 June 30/93. There is no noticeable change in his conduct or behavior, except that he seems to have become more quarrelsome. Still very restless + walks the floor almost constantly.

July 16 July 16/93. Attempted to strike an attendant today. Patient slipped + fell, bumping his forehead on the

" 19 floor, receiving a bruise. July 19/93. Is acting raw, as if he cannot talk; when spoken to, will

" 31 make some peculiar noise. July 31/93. No noticeable change. Appetite good. Bowels normal. Was today, with several others, transferred to Hospital at Fergus Falls.

Personal and Medical History of Patrick O'Donnell

Whole No. 3100

Residence, 926 Conway St. St. Paul

Date Admission, 9th August 1892

Admitted by, Dr. Phelps Hour, 7 P.M.

How Sent, John B. Olivier, Jof P. Ramsey Co.

Sex, Male

Age, 27

Civil Condition, Single

Children, —

Age Youngest Child,

Occupation, Laborer

Degree Education,

Profession Religion, Catholic

Habits, Indifferent; arrested several times for drunkenness

Nativity, Ireland

Physicians Committing, Pierre Marchand & Arthur Sweeny

Correspondents, Father; Mark O'Donnell 926 Conway St.
Brother; Tom O'Donnell - St Paul Minn

No. for Year, 12

Insane Relatives, —

Cause Exciting, Exposure to sun, overwork while heated.

Cause Predisposing,

Form, Manin - Acute

Accompanying Bodily Disorder, None

Suicidal or Not, Not

Date of this Attack, about July 28th last

Duration, about 12 days

No. of Attack, 1st

No. of Admissions,

Age First Attack, 27

Time of Leaving, Aug. 29th 92.

Time in Hospital, 28 ds.

Result, Improved

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr Baker Aug 12/92.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, Fairly active

MEMORY:

Past Events, probably good

Recent Events, Seems fairly accurate

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Ordinary observation seems good;

Correct or Illusive, Answers questions fairly well.

REASONING POWER:

Ordinary Subjects,

Own Mental State, seems good

Special Subjects,

EMOTIONAL STATE:

Normal, Calm, fairly so now.

Indifferent,

Exalted, probably tendency to be

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, See notes

Transitory or Not,

HALLUCINATIONS: has had probably

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Very free.

GENERAL DESCRIPTIVE REMARKS:

Has drunk some. Was about 7 days in Hospital at St. Paul; had worked too hard; 15 hours a day; handcuffs were put on him there because he found fault with the poor and scanty food that was given him; he was not noisy and did not try to get out of bed. They called him names there and he called back in same way. A certain woman talked to him through the window but he did not see her; this was about 1 o'clock at night. He was sleeping in front part of house, and woman came to back part; seemed to know the woman; told his mother of it; who said she did not know what any woman would want there at that time of night; he put on his pants and went to open door to let her in but she was gone. Refused to take medicine because they did not give him what he wanted. Refused to speak because they made him mad. Considered all the attendants were down on him without any reason.

Personal and Medical History of Patrick O'Donnell

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet 1½ inches WEIGHT, 160 pounds NUTRITION, not very good.

WOUNDS OR ABNORMALITIES, none

TONGUE, Tremors, Tremulous Coatings, considerable Promptness Movement, fairly prompt

PUPILS, Equality, Equal, but right, at times, a little larger than left — Size, somewhat dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, finger to nose, eyes shut, fair.

Legs, standing on foot, good. Standing, eyes shut, good.

TREMORS, Hands, Tongue, None

Facial Muscles, of life or intention General,

REFLEXES, Patellar, Equal, somewhat diminished (3 or 4); (Dr. P's Scale) —

Other Reflexes,

ARTICULATION, Hesitating, Slurred, Quite good; some brogue.

FACIAL EXPRESSION, about normal

SENSIBILITY,

HEART, No murmurs

LUNGS, Chest 37 in.; Expansion 3½ inches; Resn good.

Aug 13/92 D.M. EXAM. URINE, color yellow; reaction acid; Spec. grav. 1014; albumen none; urea 2.2%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Yes	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; claims healthy.

Father or Pat. Relations, Father living; claims healthy.

Brothers or Sisters, 2 Brothers living; in good health; one died when a baby; — 1 sister living; claims healthy.

Personal and Medical History of Patrick O'Donnell

1892

Aug 10 Aug 10/92. This ma... ni habits; ... Exposure ... bodily dis... talking to ... to do hi... refuses me ... to filthy or... and leg sha...

" 11 Aug 11/92. neatly dres...

" 13 Aug 13/92 at night ...

" 18 Aug 18/92 has been ...

" 23 Aug 23/92 he is entire... him home ... for him to ... here longer ... calmly, a... brother the ... will be ol... what was ...

" 29 Aug 29/92 rote on th... dress and ... and down ... for conver... Has alwa... Bodily hea...

23

Rochester, Minn. Aug. 3rd '92.

Thomas O'Donnell, Dear Brother, I sent you a letter last Thursday and I told you every thing about how I was told you to come and take me home, and it seems to me that you did not care whether I get out or not. The Doctor received a letter from the old man, asking how I was and the Doctor wote to him and told him that he ought to retain me in this Institution a little while longer. Now I want the old man to strictly understand that I dont want him to write any more letters to any Doctor in this Institution about me it seems to me that ye believe what the doctor tells ye, and dont care for what I told you I think I know more about myself than that Doctor does He is figuring about sending me home i a year or so then claimi g the honor of curing me and have it in all of the news papers in S .Paul, as soon as I will get back there I did not think or believe that you was foolish enough to be led by this doctor after the letter that I sent you When he knew that he had no authority over me, since you would come then He answered your father letter so that is to stop your coming As long as he can use you for a tool let him do it I can not help you, you can suit yourself. Now whether you will come or not, but I am not pressing you. This is the last letter that I ever will write out of this building, if I was here for lo years. The old man thought that he did not do me harm enough when he told the doctor that came to see me in the Margret station, that I was running away and could not do anything with me, that gave him a chance to send me to the City Hospital Now he goes to work and commences writing to those doctors to give them a chance to get a dig at me I want such work stopped at once and be done with. This is all I care to say this time about that part of it.

Now you will tell my mother to send me two or threedollars if she can, and if she can not send me any more, send me two dollars any how I want to buy a shirt and a hat, and I could notget along without them There is a few more things I need first I dont like to ask for any more than I can help Now I want the answer of this note right off I dont want you to keep it 25 minutes I will be expecting an answer Thursday evening. All that I can say I said in my last letter.

Delia, Dear, I have a few verses here, and they answer you very well and I am going to send them to you If Tom dont answer this letter just as s on as he gets it, you will send me a few lines and let me know if my mother can send me them few dollars or not.

Good Bye every body I r main your true friend Patt

Dorect Pat O'Donnell, Rochester, Minn. c/o the Asylum.

—Desckarged—

Personal and Medical History of D. W. Kerr

from page 96.

1893

March 28 March 28/93. During the past 4 or 5 weeks, has been slightly restless + noisy, almost nightly and for a week or two quite decidedly so. Sleeping then but from 2 to 5 hours; at best from 6 to 8 hours. By day, is more or less active physically, moderately talkative, excited + showing delusions.

April 25 April 25/93. Is nightly, more or less noisy + restless. For the 1st 3/4 of the past 4 week, mattress night, quite noisy for the greater part of the night. For the past 2 weeks, has seemed somewhat quieter at night. By day, seems quieter + on the whole better behaved, although occasionally getting into a fight; working in the ward, going out, and participating in dances —

May 27 May 27/93. For the past month, has been more or less restless + noisy each night. for from 2 to 3 hours, sleeping from 5 to 7 hours, occasionally 8 hours. Conduct + behavior by day, have, of late, much improved. — Works well in the ward + sometimes does outside work. Still attends dances quite regularly, also services in Chapel. Has not been reported as ugly or pugnacious during the past month, though he is still inclined to be irritable + easily excited at times. Physical health seems quite good. May 31/93. Appetite good; somewhat inclined to over-eating. Bowels regular. Patient is in good physical condition. Is more or less noisy at night; also during the day. Is very quick to take offence + will fight desperately. Is somewhat incoherent; full of delusions. Has not been in seclusion, this month. Clean, tidy + of good Personal Habits. Helps some with ward-work.

June 3/93 June 3/93. Maintains his usual good physical health. June 25/93. Very noisy for 5 hours or so, each of past 2 nights. June 30/93. Appetite is voracious; he has to be fed out in the hall. Bowels regular. Physical condition good. Still is more or less noisy by day + night. Irritable. Easily excited + quarrelsome; strikes his fellow patients + will fight, if not closely watched. Has not been in seclusion, this past month. Neat + tidy; of good habits. Attends dances; also Chapel.

July 5/93 July 5/93. No very noticeable change. July 31/93. Patient does not change much, in regard to his conduct or behavior, from month to month, except that he does not have now those more "active spells" he had at time of coming + for some months afterwards. At times, behaves quite well; at others, is irritable, ugly + quarrelsome. During this month, has got into 3 or 4 fights with his fellow-patients + has received some bruises. Neat + clean in his habits. Works some.

Aug 10/93 Aug 10/93. Maintains his usual good Physical health. Aug 21/93. Appetite continues good; bowels regular. Physical condition very good. Is noisy, day + night. By day, will stand near a window, at end of the hall, and keep up a continual make up-rhyming + singing for hours at a time, until moved away. Is not considered quarrelsome, but will fight quite savagely, when provoked. Has been quite obedient, for some time. Works a little on ward. Attends Chapel-services also entertainments, and is then exceedingly well-behaved + seems to take great pleasure at being there. Reads; plays games: Habits neat + clean. Still manifests delusions. Was today transferred to B 3.

Sep 3/15 Sep 3/93. Has made a slight gain in weight in past month. Sep 15/93. Has recently visited by brother. Patient was permitted the liberty of the grounds with him. Was quite well behaved. Seemed quite rational in conversation. Sep 30/93. Appetite continues good; bowels normal. Quiet + well-behaved. Has given up his habit of "comparing" + singing. Talks rationally. — Works a little on the ward. Reads some.

Oct 7/19 Oct 7/93. Continues to increase in flesh. Oct 19/93. Although patient has been quite quiet

(Carried to page 104)

Personal and Medical History of Patrick O'Donnell

1892

This man was brought by Deputy Sheriff Kinney, with the following history; indifferent in habits; has been arrested several times for drunkenness & assaults; Cause of this attack is exposure to sun, and overwork while heated; form is acute, exalted; has no accompanying bodily disorder. First symptoms were manifested about July 28th; has hallucinations of hearing; talking to imaginary persons. Had delusions of persecution, believing people were after him to do him harm. Insanity is now manifested by delusions of persecution, as above. He refuses medication and will not talk. No disposition to injure others; not suicidal; no disposition to filthy or destructive habits; no peculiarities of temper manifested; has been restrained by hand cuffs and leg straps since his arrival at City Hospital; because he was noisy, restless & hard to keep in bed.

Aug 10 Aug 10/92. Was slightly restless last night. Sleeping 5 hours. Coughed some. Am. Is up in the hall, neatly dressed, walking about; is quiet; ate breakfast. Pulse 96.

" 11 Aug 11/92. Slightly restless during last night; slept 7 hours. Coughed some. Am. Pulse 88.

" 13 Aug 13/92. Has rested quite well, sleeping 7 hours on each of past 2 nights. Coughs occasionally at night. Am. Pulse 84.

" 18 Aug 18/92. Has rested comparatively well, sleeping quite well, since the last note. Pulse has been 73. 80. 72. 92. and 80 on the past 4 and present mornings.

" 23 Aug 23/92. Patient has written several letters to his relatives, brother and father, claiming that he is entirely well and demanding in a peremptory way that they come immediately and take him home. The father had written the Drs asking how his son was doing and if it was advisable for him to come home; they replying that they considered it best for the patient to remain here longer, and mentioning this fact also to the patient. He received the news apparently calmly, at the time, showing very little emotional disturbance. The patient then wrote to his brother the letter, of which the attached is a copy, the original being forwarded. From this letter it will be observed that the patient had erroneous ideas and misconceptions of his own state and what was being done for him.

" 29 Aug 29/92. Patient has continued to rest well and sleep well at night, ever since the last note on this subject. He has dressed and taken care of himself; has been clean & tidy in dress and personal habits. Has spent the day out walking, and, while on the hall, in walking up and down the floor, rather restlessly. Has always approached the Physicians & others ready for conversation; free & coherent in conversation, talking comparatively calmly & pleasantly. Has always claimed that there was nothing the matter with him. Has done little & no work. Bodily health has been fairly good.

Was visited to day by his brother & taken home by him.

—Discharged—

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Whole No. 3101
Residence, St Paul
Date Admission, 9th August 1892
Admitted by, Dr Phelps. Hour, 7 PM
How Sent, John B. Oliver, Jr P. Ramsey Co
Sex, Male
Age, 35
Civil Condition, Single
Children, —
Age Youngest Child,
Occupation, Laundry-man
Degree Education,
Profession Religion, Do not Know
Habits, Do not Know
Nativity, China
Physicians Committing, P Marchand & Arthur Sweeney
Correspondents, (Friend) W A Grey, Farmington, Minn

No. for Year, 13
Insane Relatives, Do not Know
Cause Exciting, Trouble over a laundry dispute with a woman
Cause Predisposing,
Form, Melancholia - Acute
Accompanying Bodily Disorder, None
Suicidal or Not, Not
Date of this Attack, Probably a week ago
Duration, about a week
No. of Attack, 1st
No. of Admissions,
Age First Attack, 35
Time of Leaving, 29th November 1893.
Time in Hospital, 1 Year 3 mos 20 Days
Result, Died: Pulmonary Tuberculosis.

EXAMINATION ON ADMISSION.

Exd by Dr Baker 15th Augt 1892

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Quite quick

MEMORY:
Past Events, Seems good
Recent Events, Good
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Ordinary observation seems fair. Answers questions as well as could be expected —
Correct or Illusive, does not realize his condition —

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Says he does not drink; Says "Man say me too much money" — him want to Kill me.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Probably some
Depressed,

DELUSIONS:
Systematized or Not,
Special Subjects, that a man threatened to kill him.
Transitory or Not,

HALLUCINATIONS: that the man talked of killing him.

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, free

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5 in. WEIGHT, 106 pounds NUTRITION, Fair
WOUNDS OR ABNORMALITIES, Swelling and discoloration above right clavicle; abnormalities, probably from
TONGUE, Tremors, coarse Coatings, none Promptness Movement, Prompt
PUPILS, Equality, Equal Size, about normal
Response Light, Yes Accommodation, Yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Finger to nose, Eyes shut, Fairly good.
Legs, Standing on foot, some unsteady; Standing, Eyes shut, Good.
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Equal; about normal; response slow.
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, about normal
SENSIBILITY,
HEART, Impulse very strong; no murmurs.
LUNGS, Left apex; sound harshness; Chest 31 inches; Seem otherwise fairly good.
EXAM. URINE, Color yellow; reaction acid; Spec. grav 1027; albumen, none; urea .9%.
Aug 15/92 D M

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, Probably Constipated, Irregular,
APPETITE, Good, Probably Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow, probably.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother dead
Father or Pat. Relations, Father dead
Brothers or Sisters, None

1892

This man was brought by Deputy-Sheriff Kinney, with the following history; form of attack is acute, wailed; supposed cause, trouble over a laundry dispute with a woman; first symptoms manifested in the belief that he was being watched; that holes were being bored in the ceiling and water was poured in him. Believes people want to kill him, because he has too much money. Wants to cut off his queue. Insanity is now manifested by persecutory delusions. No disposition to injure others. Not suicidal; not disposed to filthy or destructive habits; no peculiarities of disposition as shown; not subject to any bodily disease. Has been kept at City Hospital for a week. Has not been under medical treatment.

Aug 10 Aug 10/92. Was restless for a couple of hours last night, sleeping 6 hours. This morning is up on the hall, neatly dressed and quiet. Ate breakfast. Pulse 72. PM. Pulse 72. Temp 98.

" 11 Aug 11/92. Passed a quiet, restful night, sleeping 8 hours. AM. Pulse 74.

" 14 Aug 12/92. Slept 8 hours last night. Am. Pulse 78.

" 16 Aug 16/92. Has passed quiet, restful nights, sleeping well since the last note. Pulse has been 72. 80. 72. 86. on the past 3 and present mornings.

" 17 Aug 17/92. Was restless for a couple of hours last night, sleeping 6 hours. AM. Pulse 86. PM. Pulse 76.

" 18 Aug 18/92. Quiet and slept 8 hours last night. AM. Pulse 104. PM. Pulse 82.

" 22 Aug 22/92. Pulse has been 88. 98. 100. and 88. on the past 3 + present mornings and has been 62. 86. 92 and on the past 3 afternoons.

" 30 Aug 30/92. Has been uniformly quiet and restful at night, sleeping well since the 18th inst.

Sep 5 Sept 5/92. Wt 118 pounds. Pulse 68. Has gained 12 pounds, since admission. Has been transferred to A'.

" 23 Sept 23/92. Has been uniformly quiet and restful, sleeping well at night. Has, ever since admission been quiet, clean, tidy and well-behaved; very neat in personal care + appearance. Has been free in conversation, coherent, as far as his language, could be understood (broken-English), could be understood; very pleasant in manner and talk. Has been an active faithful and willing worker. Has gained in bodily health. Has written several letters in Chinese to various friends and has heard from some of them. He received a letter from a fellow-Chinaman in St Paul, who, it seems, had taken charge of settling Hing-Kee's Estate, from which Patient read to the Physicians that this party had spent $50.00 for Doctor's fees; $11.00 to Chicago and $1.00 to Faribault. Patient indicated that money paid for Physicians' fees was all right but seemed to think that he was being cheated out of the balance by fraud, and calls this fellow-Chinaman "Good melican man". Has always, however, been well-behaved here and was today moved to A2.

Oct 1/92 Oct 1/92. Wt 130 lbs nds. Pulse qr. Oct 21/92. Appears to sleep well and is quiet at night. Made quite a decided gain, for a time, in physical health, in activity of mind + body, in cheerfulness and apparent freedom from delusion. For a week or two past, has not been so well. Less active and less cheerful. For past few days has eaten very little; has quit work also. It is difficult to make out what his ideas are, but he is evidently suffering from some depressing delusion or possibly from simple discouragement. Oct 28/92. Has grown more and more depressed + more confused and stupid: tongue is coated. Was today moved to A2. Oct 29/92. For 4 nights following last

" 29 poor. Coughing + raising Phlegm. Bowels moved. July 27/93. Bowels now more regular. Still

" 29 coughs a great deal. July 29/93. Appetite not very good; coughs considerably; noisy, talking to self.

" 31 July 31/93. Appetite some better; bowels more regular (see attached clinical record). —

Aug 3/93 Aug 3/93. Continues those in flesh. Aug 22/93. Sleep has been poor, only 4 or 5 hours, in the average each night. Lies quietly in bed, day + night. Coughs a good deal + raises considerable phlegm + at times, blood. Of late, will not talk but very little; does not seem to understand anything. Is very

(carried to page 236)

1892

DETAILED HISTORY OF SICKNESS OF MR. Hing Kee 3101
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	
1893 July 6	9		90						Came on Ward. Coughing and raising phlegm. Appetite very poor. Bath.
7		5		80		26		102.2	
8	7	5	88	80	26	28	101.4	102.2	Coughing and raising phlegm.
9	7	5	96	100	28		101.2		
10	7	5	98	96	28	28	101.2	102	Bowels Costive. Gave dose. Temp examined
11	7	5	88	86	28	28	101.2	102	Left lung sum- mot impaired. Low
									Rt. Upper lobe slight fine sum sound
									Rt. Lower
12	7	5	114	84	30	28	102	102	Coughing and raising Phlegm - light
13	7	5	96	88	26		99.6	102	Ate no breakfast - Coughing.
14	7	5	78	80	26	28	100.6	101.8	Ate no breakfast. No Supper
15	7	5	82	72	24	26	100.6	100.6	
16	7	5	80	78	26		100.6		Bowels Costive. Cough. Continuedly
17	7	5	78	84	26	24		100.2	Bowels moved
18	7	5	84	86	26	26	100.8	100	
19	7	5	70	70	28	24	100.4	101	Appetite poor. Coughs Continuallyand raises
									Phlegm
20	7	5	90	80	30	24	100.4	101.3	
21	7	5	76	80	26	28	101	101.8	Bowels moved. Coughing and raising
									Phlegm
22	7	5	86	84	27		100.2		Appetite poor. Bath
23	7	5	80	84	26	28	100.8		
24	7	5	72	80	28	26	100.8	101.8	
25	7	5	86	76	28	30	100.8	100.8	
26	7	5	84	80	30	26	100		
27	7	5	86	84	26	28	100.2	100	Bowels regular. Appetite very poor. Coughing and raising Phlegm.
28	7	5	88	74	22	22	100.4	100.6	
29	7	5	76	82	28	24	99.6	101.4	Coughs Considerable. Appetite not
									very good. 8 A.M. Bath. Noisy talking
									to himself
30	7	5	90	76	22	22	100	100.4	
31	7	5	90	78	22	22	100.6		Appetite poor. Bowels regular

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-Chinaman in St Paul,

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to Chicago and 1st to Faribault. On

fees was all right but seems to think that

fraud, and calls this fellow Chinaman "Good mele

been well-behaved here and was today moved to A2.

Oct 21/92 Oct 4/92. Wt 120½ lbs. Pulse 92. Oct 21/92. Appears to sleep well and is quiet at night. Made quite a decided gain, for a time, in physical health, in activity of mind & body, in cheerfulness and apparent freedom from delusion. For a week or more past, has not been so well. Less active and less cheerful. For past few days has eaten very little; has quit work also. It is difficult to make out what his ideas are, but he is evidently suffering from some depressing delusion or possibly from simple discouragement. Oct 28/92. Has grown more depressed & more confused and

" 23

" 29 stupid: tongue is coated. Was today moved to B2. Oct 29/92. For 4 nights following last

NAME Ning Kee

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	123	110		
Feby 3d	122	94		1
March	122	88		
April 4th	125½	92	3½	
May 3d	123	100		2½
June 7th	119	—		4
July 4th	116½	108		2½
(dated) Aug 3d	101½	80		7. (Estd)
Sept 4th	97½	88		4.
Oct 4th	95	104		2. ½
Nov 1st	87	—		8

4 and 5 hours, each night. Has since rested & slept better.
at 6½ pds in past month.
1/93. Became more restful at night, sleeping better & well.
bed and more cheerful. Ate better.
gained 9 pounds in weight.
ully quiet, resting & sleeping well apparently. By day,
& confused. His ideas cannot be made out.
w on A1. Jany 21/93. Is quiet, & apparently restful
leads done or makes the show of doing so. Is somewhat
. Jany 22/93. Struck a fellow-patient today.
eeping well at night. By day, seems, at times especially,
ating in manner & speech; more so of late than usual -

not improved as much as at one time.
t. Recently had a confused, depressed spell, when he

more active, doing some work. Has attempted to escape.
for past 2 days. Is refusing food again, today. May 19/93. Has
ting better & taking his medicine. May 20/93. Probably sleeps
manner. Scarcely speaks now, when addressed; keeps apart from others.
understands English very poorly, these cannot be ascertained.
3. Eats fairly well, now. Bowels regular. Is quiet & well-beha-
only depressed. Sits about in a dull quiet way.
past 2 months. June 30/93. Appetite good; bowels regular.
tried to pick a quarrel with a fellow patient today
in the dining-room. Works some; speaks only when spoken to & then in low, almost inaudible, tones.

July 4/93 July 4/93. Still continues to lose in flesh. July 8/93. Was today noticed to have high pulse and fever
temperature. Has pulse 120 & Respiration about 30. His right lung is quite inactive. Is probably
in a pneumonic or tubercular condition. Was moved from A1 to C2, the "Sick Ward." —
Upon coming into this ward, appetite is found to be very poor; coughs & raises a good deal of phlegm. Bowels costive.
" 11 July 11/93. Lungs examined today. Left lung seems most impaired; lower lobe has tales & slight friction
" 14 sounds, at times. July 14/93. Has been coughing & raising phlegm a good deal, the past 3 days. Has
" 16 also been refusing food, one or two meals each day. July 16/93. Is coughing continually. Bowels constipated
" 19 July 19/93. Appetite poor. Keeps up a continuous coughing & raising phlegm. July 21/93. Appetite
" 27 poor. Coughing & raising phlegm. Bowels moved. July 27/93. Bowels now more regular. Still
" 29 coughs a great deal. July 29/93. Appetite not very good; coughs considerably; hoarse, talking is sore.
" 31 July 31/93. Appetite some better; bowels more regular (See attached Clinical record). —
Aug 3/93 Aug 3/93. Continues to lose in flesh. Aug 22/93. Sleep has been poor, only 4 or 5 hours, in the average,
each night. Lies quietly in bed, day & night. Coughs a good deal & raises considerable phlegm &
at times, blood. Of late, will not talk but very little; does not seem to understand anything. Is very

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-Chinaman in St Paul, who,
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fees was all right but seemed to think that
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been well-behaved here and was today moved to A2.

Oct 21/92 Oct 21/92. Wt 120 lbs. Pulse 92. Oct 29/92. Appears to sleep well and is quiet at night. Made quite a decided gain, for a time, in physical health, in activity of mind & body, in Cheerfulness and apparent freedom from delusion. For a week or more past, has not been so well. Less active and less Cheerful. For past few days has eaten very little; has quit work also. It is difficult to make out what his ideas are, but he is evidently suffering from some depressing delusion or possibly from
" 23 simple discouragement. Oct 28/92. Has grown more and more depressed & more confused and
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wife was restless, out of bed, sleeping 4 and 5 hours, each night. Has since rested & slept better.
Nov 1/92. Wt 114 lbs. Pulse 70. Has lost 5½ lbs in past month.
Nov 17 Nov 17/92. Today transferred to B2. Nov 21/92. Became more restful at night, sleeping better & well.
Became less confused & restless & disturbed and more cheerful. Ate better.
Dec 5 Dec 5/92. Wt 123 lbs. Pulse 78. Has gained 9 pounds in weight.
" 21 Dec 21/92. Has remained uniformly quiet, resting & sleeping well apparently. By day,
1893 has seemed less disturbed, restless & confused. His ideas cannot be made out.
Jan 3 Jan 3/93. Wt 122 lbs. Pulse 110. Is now on A1. Jan 21/93. Is quiet, & apparently restful
" 21 at night. Has written a few letters. Reads some or makes the show of doing so. Is somewhat
" 27 confused and hesitating in manner. Jany 27/93. Struck a fellow-patient today.
Feb 21 Feb 21/93. Quiet, apparently resting & sleeping well at night. By day, seems, at times especially,
greatly confused & dull. Also very hesitating in manner & speech; more so of late than usual.
Bodily health seems good.
March 13 March 13/93. Is not at his worst, yet has not improved as much as at one time.
" 27 March 27/93. Uniformly quiet at night. Recently had a confused, depressed spell, when he
refused several meals. Is inactive.
April 21 April 21/93. Has seemed somewhat brighter & more active, doing some work. Has attempted to escape.
May 11/93 May 11/93. Is reported as having refused all food for past 2 days. Is refusing food again today. May 19/93. Has
" 20 been eating scantily for some days; but is now eating better & taking his medicine. May 20/93. Probably sleeps
well at night. Has a confused, dull, dazed manner. Scarcely speaks now, when addressed; keeps apart from others.
Does no work. Evidently holds delusions, but as he understands English very poorly, these cannot be ascertained.
" 31 Seems in fair physical health. — May 31/93. Eats fairly well, now. Bowels regular. Is quiet & well-beha-
-ved. Talks but very little. Is quite uniformly depressed. Sits about in a dull quiet way.
June 5 June 5/93. Has been losing in weight the past 2 months. June 30/93. Appetite good; bowels regular.
30 Is not very well-behaved; is quarrelsome; tried to pick a quarrel with a fellow patients today
in the dining-room. Works some; speaks only when spoken to & then in low, almost inaudible, tones.
July 4 July 4/93. Still continues to lose in flesh. July 8/93. Was today, noticed to have high pulse and fever
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" 29 coughs a great deal. July 29/93. Appetite not very good; coughs considerably; busy talking to self.
" 31 July 31/93. Appetite some better; bowels more regular (is attached clinical record). —
Aug 3 Aug 3/93. Continues to lose in flesh. Aug 22/93. Sleep has been poor, only 4 or 5 hours, in the average,
22 each night. Lies quietly in bed, day & night. Coughs a good deal & raises considerable phlegm &
at times, blood. Of late, will not talk but very little; does not seem to understand anything. Is very

(carried to page 236)

Whole No. 3102

Residence, Evira, Iowa

Date Admission, 10th August 1892.

Admitted by, Dr. Phelps Hour, 7 P.M.

How Sent, Rudolph Schmicke J of P. Washington Co.

Sex, male

Age, 27

Civil Condition, single

Children, —

Age Youngest Child,

Occupation, Tramp

Degree Education,

Profession Religion, No.

Habits, not good

Nativity, Iowa

Physicians Committing, B. J. Merrill and J. C. Clark

Correspondents, (Mother) Mrs. E. A. Bell, Evira, Audubon Co. Iowa
(Sister) Mrs. E. L. Stringer, Decorah, Iowa

No. for Year, 14

Insane Relatives, —— Insanity hereditary not known

Cause Exciting, not known

Cause Predisposing,

Form, Mania — Chronic

Accompanying Bodily Disorder, not known

Suicidal or Not, not known

Date of this Attack, probably 3 or 4 years ago

Duration, probably 3 or 4 years.

No. of Attack, not the 1st

No. of Admissions,

Age First Attack, about 24

Time of Leaving, Oct. 19 '93

Time in Hospital, 1 yr. 2 m. 9 d.

Result, Recovered.

EXAMINATION ON ADMISSION.

Evid'ly Dr. Baker, 15th Aug 1892.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Somewhat confused

Quick or Sluggish, active

MEMORY:

Past Events, Seems fairly good

Recent Events, " "

Special Subjects,

PERCEPTIVITY:

Alert or Dull, ordinary observation good; answers questions well; does not realize own condition —

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Says: "Drinks hard — gets drunk as often as he wants to."

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes

Depressed,

DELUSIONS: See notes

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Yes

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, fairly coherent

Voluble or Reticent, Voluble

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 3 inches WEIGHT, 130 pounds. (usually 145 - 150 pds) NUTRITION, below normal

WOUNDS OR ABNORMALITIES, Scar on right side of head; and one on right foot; tattoo on right fore-arm. abnormalities, probably nine —

TONGUE, Tremors, Coarsely tremulous Coatings, yes Promptness Movement, deliberate

PUPILS, Equality, Equal Size, about normal

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, finger to nose, Eyes Shut, fair.

Legs, Standing on foot, fair. Standing, Eyes Shut, Slight Swaying. Turning quickly, good.

TREMORS, Hands, Yes Tongue,

Facial Muscles, Slight tremors of face General,

REFLEXES, Patellar, Equal; somewhat diminished.

Other Reflexes,

ARTICULATION, Hesitating, prompt Slurred, Slightly

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Seems normal

LUNGS, Chest 35 in. Expansion 3 in; Seems good.

11/5/91 Dr. Mc. EXAM. URINE, Color yellow; reaction acid; Sp. gr. 1018. Albumen none; urea 1.8%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Yes	Constipated,	Irregular,
APPETITE, Good, yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother is living, he thinks, but not healthy.

Father or Pat. Relations, Father, dont know if living.

Brothers or Sisters, Brother died at Jamestown (Dakota) Hospital, of measles — "he had a set-back" — Sisters both living —

1892 This man was brought here by deputy-sheriff C. O. Anderson, with the following history. He is a tramp; habits not good; cause of this attack is not known; form is paranoyonal; was found in this condition, Aug 6th 1892, wandering about the streets of Stillwater. This is not the first attack; others occurred about 3 or 4 years ago. Insanity is now manifested by his having delusions. Probably has not shown any disposition to injure others; Cannot say as to his suicidal propensity; no disposition to filthy or destructive habits; peculiarities of temper etc are not known; no history of bodily disease. Claims to have been in the Iowa State Insane Asylum at Independence, Iowa, some 3 or 4 years ago.

Exam Aug 15/92. Feel out of a buggy once, in to his head; feels some dizziness at times. Has travelled "all over"; "Earned money honestly to do so"; has not any regular occupation; did not do much of anything; does not believe in working; says he is a "travelling gentleman" - "The deputy-sheriff did not bring me here; I brought him" - but "they took me up to the Ward and I have not come out until today" - "Don't like the Whisky & drink they get here"; "it is all poisoned"; Says he has been a patient in hospital at Independence, Iowa; "knows all the Doctors there"; "I'm as good a Doctor as any of them & can prove it" - Says he has not rested or slept any since he came here. "My stomach was poisoned and that was the reason they sent me to Hospital in Iowa" - Thinks some one has been trying to get rid of him for past 2 years but "I'll get out on top" - "Poison does not hurt me; I make money by eating poison; I get 2 kinds; one dark; one light. I know what I'm taking it for; I get (I think) 10 to 15 000 dollars for every drink of it I take." Says he knew men in Stillwater prison, who had been hung; one was named Peterson. Says, a man after he has been hung must come back to life, and "I can make him own up to his crime."-

Aug 10/ On admission, comparatively quiet. Put upon B2. Aug 11/92. For an hour & a half was quite & extremely
" 11 noisy, laughing & talking to himself; slept 5 hours, last night. Am. Pulse 68. Was so manifestly maniacal
" 12 that he was removed to C3 during the day. Aug 12/92. Was extremely noisy for about 3 hours last night
" 13 sleeping 5 hours. Am. So excited and noisy, and pugnacious. Pulse 72. Aug 13/92. Was let out of his room early last evening by night-watch and refused to go back. Was extremely noisy for 7 hours, sleeping but 1 hour, last night. Am. Is noisy. Quiets down as being addressed. Is incoherent in talk. Is shut in his room; Keeps his clothes on. Eats rather scantily. Tongue slightly coated and moist. Pulse 86, irregular. Pm. Last seclusion; has denuded himself. Broke one of the screens in his room. Aug 14/92. Was extremely noisy for 3 hours, sleeping 6 hours, last night.
" 14 Am. Pulse 66. Is out on the ward, comparatively quiet, and dressed. Talks calmly.
" 15 Aug 15/92. Was extremely noisy and restless last night, sleeping none at all. Am. Pulse 66. Is out in the hall.
" 16 Pm. Pulse 88. Aug 16/92. Noisy for a couple of hours, sleeping 6 hours, last night. Complained of being sick.
" 17 Am. Pulse 84. Was secluded today. Aug 17/92. Was noisy & restless, sleeping but 4 hours last night. Tore up his bedding. Am. Pulse 84. Denudes himself and is in seclusion. Pm. Pulse 60.
" 18 Aug 18/92. Extremely noisy for a couple of hours, restless, sleeping 4 hours last night. Am. Pulse 72.
" 19 Is out on the hall. Pm. Pulse 66. Aug 19/92. Was quiet, somewhat restless, sleeping 6 hours last night.
" 20 Am. Pulse 72. Pm. Pulse 64. Aug 20/92. Again quiet but restless for a couple of hours, sleeping 5
" 21 hours last night. Am. Pulse 86. Pm. Pulse 72. Aug 21/92. Noisy for a couple of hours, restless. Sleeping 4
" 22 hours last night. Am. Pulse 74. Pm Pulse 74. Aug 22/92. Somewhat noisy & restless sleeping 6 hours

1892 Aug 23 last night. Am. Pulse 72. Had a fight today with a fellow-patient. Aug 23/92 Was extremely
" 30 noisy for 6 hours last night [illegible] hours. Aug 30/92. Has been noisy, usually extremely so, each night, since the last note. By day, has been more or less nely so, and pugnacious.
[illegible] Is somewhat quieter by day.
tely & often that he be allowed to go out. Today, he escaped and attempted to run away, but was caught & returned.
iets at night; occasionally somewhat noisy & restless, ssing the whole night quietly, and sleeping well.
locked in his room today. Sep 26/92. Following the 10th last ight, for about 10 nights. Is now again quieter at night, uiacal and noisy by day. Is not so troublesome. Does lmost daily. Bodily health is fairly good; has gained

[illegible] Was especially unruly, cursing and swearing at Has been quarrelsome, attacking fellow patients quite on some. Oct 24/92. Occasionally somewhat restless been fairly quiet and slept fairly well, during the ly and ugly at times. At all times, inclined g left here, and declaring there was no reason for odily health fairly good. Oct 31/92. Has been so

. Given hypodermic of hyoscine. Wt 139 lbs. Pulse 72 without being somewhat restless & noisy. At times, ; & occasionally, Extremely so; sleeping for 2 to 6 ays more or less maniacal, excited, walking about, dly, showing delusions & mistaking identity of persons, calling them by other names than their own. Bodily health keeps fairly good.

Dec 5 Dec 5/92. Wt 141½ lbs. Pulse 86. For some time after the last note, was extremely restless &
" 15 noisy at night. Has quieted down some lately. Dec 15/92. Has been even more noisy and
" 29 wakeful than usual, for a few nights past. Dec 29/92. Has lately been almost perfectly quiet and slept very well indeed, at night. Has also grown quieter & less maniacal by day. Delusions persist.

1893 Jan 3/ Jan 3/93. Wt 140 lbs. Pulse 80. Jan 24/93. Has been comparatively restful & quiet at night during the past 3½ weeks. Has been less excited & less noisy by day, as a rule.
" 26 Jan 26/93. Has a fight today with a fellow patient.

Feb 4/ Feb 4/93. Struck a fellow patient in the face today. Feb 24/93. Was recently visited by a brother.
" 25 Feb 25/93. On about 2/3 of nights during past month, has been more or less restless, noisy & sleeping for from 2 to 3 hours after going to bed, sleeping from 5 to 6 hours, occasionally 7 or 8 hours. Lately, however, is more quiet, apparently resting & sleeping better, & for the past few nights, very well. Conduct & behavior by day have also improved somewhat. Has good bodily health.

(carried to 88)

NAME: D. W. Kennedy

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	140	80		1½
Feby 3	145	72	5	
Mar 2d	141½	72		3½
April 4th	141	92		½
May 3d	142½	88	1½	
June 13th	142	82		½
July 2d	139½	72		2½
Augt 1st	140	90	½	
Sept 2d	143	60	3	
Oct 2d	147	86	4	

1892 This man was brought here by depr
He is a tramp; habits not good; can
found in this condition, Aug 5th
first attack; others occu
having delusions. S
suicidal propensity
not known; no hist
at Independence, Iowa

Exam. Aug 15/92. Fell out of a ... travelled
"all over"; "Earned money ho ... much of anything;
does not believe in working; Sa ... it did not bring me
here; I brought him" - but "Hey ... out until today" - "Dont
like the Whiskey & drink they get here ... in a patient in hospital at
Independence, Iowa; "knows all the D ... a Docta as any of them & can provid
Says he has not rested or slept any since ... stomach was poisoned and that was the
reason they sent me to Hospital in Iow ... one he has been trying to get rid of him for past
25 years but "I'll get out on top" - "Po ... does not hurt me; I make money by eating poison;
I get 2 kinds; one, dark; one, light. I know what I'm taking it for; I get (I think) 10 to 15 000 dollars
for every drink of it I take." Says he knew men in Stillwater prison, who had been hung; one was named
Peterson. Says, a man after he has been hung must come back to life and "I can make him own up
to his crime." —

Aug 10/92 On admission, comparatively quiet. Put upon B2. Aug 11/92. For an hour & a half was quite & extremely
" noisy, laughing & talking to himself; slept 6 hours, last night. Am. Pulse 68. Was so manifestly maniacal
" 12 that he was removed to C3 during the day. Aug 12/92. Was extremely noisy for about 3 hours last night
" 13 sleeping 5 hours. Am. Is excited and noisy, and pugnacious. Pulse 72. Aug 13/92. Was let out of
his room early last evening by night-watch and refused to go back. Was extremely noisy for 7
hours, sleeping but 1 hour, last night. Am. Is noisy. Quiets down as being addressed. Is incoherent
in talk. Is shut in his room; keeps his clothes on. Eats rather scantily. Tongue slightly coated
and moist. Pulse 86, irregular. Pm. Last seclusion; has denuded himself. Broke one of the
" 14 screens in his room. Aug 14/92. Was extremely noisy for 3 hours, sleeping 6 hours, last night.
Am. Pulse 66. Is out on the ward, comparatively quiet, and dressed. Talks calmly.
" 15 Aug 15/92. Was extremely noisy and restless last night, sleeping none at all. Am. Pulse 66. Is out in the hall.
" 16 Pm. Pulse 88. Aug 16/92. Noisy for a couple of hours, sleeping 6 hours, last night. Complained of being sick.
" 17 Am. Pulse 84. Was secluded today. Aug 17/92. Was noisy & restless, sleeping but 4 hours last night.
Tore up his bedding. Am. Pulse 64. Denudes himself and is in seclusion. Pm. Pulse 60.
" 18 Aug 18/92. Extremely noisy for a couple of hours, restless, sleeping 4 hours last night. Am. Pulse 78.
" 19 Is out on the hall. Pm. Pulse 66. Aug 19/92. Was quiet, somewhat restless, sleeping 6 hours last night.
" 20 Am. Pulse 92. Pm. Pulse 64. Aug 20/92. Again quiet but restless for a couple of hours, sleeping 5
" 21 hours last night. Am. Pulse 86. Pm. Pulse 72. Aug 21/92. Noisy for a couple of hours, restless. Sleeping 4
" 22 hours last night. Am. Pulse 74. Pm. Pulse 74. Aug 22/92. Somewhat noisy & restless sleeping 6 hours

last night. Am. Pulse 72. Had a fight today with a fellow patient. Aug 23/92 Was extremely
noisy for 6 hours last night sleeping but 2 hours. Aug 30/92. Has been noisy, usually extremely so,
restless, out of bed, sleeping from 1 to 6 hours each night, since the last note. By day, has been more or less
excited nearly all the time; at times, extremely so, and pugnacious.
Sep 5/92 Sep 5/92. Weight 139 pds. Pulse 72. Sep 9/92. Is somewhat quieter by day.
" 10 Sep 10/92. Has demanded very importunately & often that he be allowed to go out. Today, he escaped
through a window with a fellow patient and attempted to run away, but was caught & returned.
Since the 30th ult., has, as a rule, been quiete at night; occasionally somewhat noisy & restless,
sleeping but from 5 to 7 hours, again passing the whole night quietly, and sleeping well.
" 17 Sep 17/92. Made trouble in the hall, and locked in his room today. Sep 26/92. Following the 10th inst
" 26 was again somewhat more disturbed at night, for about 10 nights. Is now again quieter at night,
sleeping better. Has also grown less maniacal and noisy by day. Is not so troublesome. Does
not decide himself. Goes out walking almost daily. Bodily health is fairly good; has gained
some in weight, at time of last weighing.
Oct 4/92 Oct 4/92. Wt 144½ pds. Pulse 60. Oct 5/92. Was especially unruly, cursing and swearing at
" 12 everybody, this morning. Oct 12/92. Has been quarrelsome, attacking fellow patients quite
" 24 often, recently. Has been in seclusion some. Oct 24/92. Occasionally somewhat restless
and noisy at night; on the whole, has been fairly quiet and slept fairly well, during the
past month. Has been quite unruly and ugly at times. At all times, inclined
" 31 to talk loudly, and denounce his being kept here, and declaring there was no reason for
his coming here, or being kept here. Bodily health fairly good. Oct 31/92. Has been so
badly behaved that he is put in seclusion.
Nov 2/92 Nov 2/92. Is maniacal & noisy, in his room. Given hypodermic of hyoscine. Wt 139½ lbs. Pulse 92.
" 23 Nov 23/92. Has scarcely passed a night, without being somewhat restless & noisy. At times,
only slightly so; usually, considerably so; & occasionally, Extremely so; sleeping for 2 to 6
or 7 hours per night. By day, is always more or less maniacal, excited, walking about,
talking, more or less, constantly & excitedly, showing delusions & mistaking identity of
persons, calling them by other names than their own. Bodily health keeps fairly good.
Dec 5 Dec 5/92. Wt 141½ pds. Pulse 86. For some time after the last note, was extremely restless &
" 15 noisy at night. Has quieted down some lately. Dec 15/92. Has been even more noisy and
" 29 wakeful than usual for a few nights past. Dec 29/92. Has lately been almost perfectly quiet
and slept very well indeed, at night. Has also grown quieter & less maniacal by day. Delusions
1893 persist.
Jan 3/93 Jan 3/93. Wt 140 pds. Pulse 80. Jan 21/93. Has been comparatively restful &
quiet at night during the past 3½ weeks. Has been less excited & less noisy by day, as a rule.
" 26 Jan 26/93. Has a fight today with a fellow patient.
Feb 4/93 Feb 4/93. Struck a fellow patient in the face today. Feb 24/93. Was recently visited by a brother
" 25 Feb 25/93. On about 2/3 of nights during past month, has been more or less restless, noisy & sleeping for from 2 to
3 hours after going to bed, sleeping from 4 to 6 hours, occasionally 7 or 8 hours. Lately, however, is more
quiet, apparently resting & sleeping better, & for the past few nights, very well. Conduct & behavior
by day have also improved somewhat. Has good bodily health.

(carried to 88)

Personal and Medical History of Mark H. Beecher

Whole No. 3104

Residence, Austin, Minnesota

Date Admission, 16th August 1892.

Admitted by, Dr Kilbourne Hour, 8 Am.

How Sent, S S Washburn, Jof P. Mower County

Sex, Male

Age, 40 years old

Civil Condition, Married

Children, 3

Age Youngest Child,

Occupation, Railroad man

Degree Education,

Profession Religion, Yes, Methodist

Habits, Intemperate to excess

Nativity, Watertown, Wisconsin

Physicians Committing, D.H. McKenna & J. N. Wheat

Correspondents, Irvin Deihy, Austin Minn
Henry Herzog " "

No. for Year, 16

Insane Relatives, None (Insanity not hereditary)

Cause Exciting, Intemperance + trouble &c

Cause Predisposing,

Form, Mania - a - potu

Accompanying Bodily Disorder, None

Suicidal or Not, Not

Date of this Attack, not given in Committment

Duration, " " "

No. of Attack, 1st

No. of Admissions,

Age First Attack, not stated

Time of Leaving, Sept 15. '92

Time in Hospital, 29 ds.

Result, Recovered,

EXAMINATION ON ADMISSION.

Evid by Dr Baker Aug 22/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, fairly active

MEMORY:

Past Events, Seems good

Recent Events, "

Special Subjects,

PERCEPTIVITY: ordinary observation, seems fair, not close

Alert or Dull, Answers questions quite well.

Correct or Illusive, Realizes own condition; Charges his trouble to Drink -

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has drunk for 10 or 12 years, off + on. Been this time, on a 2 weeks spree. After sprees, would go to work again, and probably not drink for 9 months - maybe a year.

EMOTIONAL STATE:

Normal, Calm, Yes

Indifferent, Some

Exalted,

Depressed,

DELUSIONS: None detected

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Denied

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Free

Personal and Medical History of Mark H. Beecher

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 4½ inches WEIGHT, 137½ pounds (Greatest wt. 143 pds.) NUTRITION, Fair

WOUNDS OR ABNORMALITIES, Contracture of 2nd finger, left hand. Abnormalities, none. —

TONGUE, Tremors, Yes Coatings, None Promptness Movement, Fairly prompt. sound irregular

PUPILS, Equality, Right pupil larger. Size, Somewhat dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, finger to nose, eyes shut, some inaccuracy

Legs, standing on foot, fairly steady. Standing, Eyes shut, fairly steady. Turning quickly, fairly Good

TREMORS, Hands, also some Tongue,

Facial Muscles, tremors of face on intention, quite marked. General, tremors of head, during intention.

REFLEXES, Patellar, Equal; much exaggerated (9-10) Dr P's scale

Other Reflexes,

ARTICULATION, Hesitating, prompt Slurred, a little

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Seems good

LUNGS, Good. Chest 35in - Exp'n 2½in -

Aug 18 92 Dr M EXAM. URINE, Color yellowish brown; reaction acid; Spec. grav. 1025. Albumen, none; Urea 1.2 %.

8 18 92 Microscopy. crystal phosphate of lime, much - Triple phosphates; Epithel. few.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Yes	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living, claims healthy.

Father or Pat. Relations, Father died suddenly, of heart disease or apoplexy

Brothers or Sisters, Brother dead; suddenly; age 37. Sister living at Austin; claims in good health.

Personal and Medical History of Mark H. Beecher

1892

This man was brought here by Frank Reiley, Sheriff, with the following history of case; Is intemperate to excess; form of attack is acute; the cause, intemperance, trouble &c. First symptoms of disease were manifested by hallucinations of various kinds; this is the first attack; insanity is now manifested by hallucinations. Has shewn no disposition to injure others; is not suicidal; no disposition to filthy or destructive habits; is not subject to any bodily disease; confinement has been employed for a few days; has not been under medical treatment.

Aug 16 On admission, pulse was 68. —

" 17 Aug 17/92. Was restless for a couple of hours last night, sleeping 6 hours. Am. Pulse 72.

" 18 Aug 18/92. Was somewhat restless last night, sleeping 6 hours. Am. Pulse 68.

" 19 Aug 19/92. Rested quite well, and slept 7 hours, last night.

" 20 Aug 20/92. Slept 8 hours last night.

" 21 Aug 21/92. Rested well and slept 8 hours last night. Am. Pulse 68.

" 22 Aug 22/92. Slept 7 hours last night. Am. Pulse 66.

Sep 3 Sep 3/92. Has been restful at night, sleeping well, since the last note. Pulse has been 76. 82. 80. 74. 76. (?) 80. 68. 68. 80. 64. and 72, in the past 11 and present mornings. Was visited in the 27th ult., by his uncle.

" 5 Sep 5/92. Wt 149 pounds. Pulse 74. Has gained 11½ pounds, since admission.

" 15 Sep 15/92. Has passed quiet and restful nights, sleeping well since 3d inst. Since day of admission, has been up daily in the hall, neatly dressed, clean and tidy in appearance and personal habits, attending to his own personal care. Sat quietly and read, or played games, while in the hall, going out walking at almost every opportunity. Entering into conversation quite freely with those about him and with the officers, answering questions promptly and coherently; Eating regularly and having good bodily health. He claimed that his sole trouble was due to drink. Did not show detectable depression or exaltation of spirits. Did not express recognizable delusion. Facial expression was somewhat hard and unpleasant. Some of the motor symptoms suggested a possibility of General Paresis, but careful examination failed to reveal sufficient ground for making such diagnosis. He has lately been on A2 — Was today taken away by his uncle, on trial.

Discharged Nov. 9th 92.

Personal and Medical History of Alfred Morse

from page 124

1892
Dec 12/3 Dec 12/92. Transferred to A2. Dec 31/92. Has been uniformly quiet, apparently resting and sleeping well. Complains, however, that his sleep is disturbed by his roommates. Is up and around daily, eating well, and in good physical health. Reads a good deal, writes letters. Is pleasant and good natured. Wants to go home. Seems to realize his acts which led to his being sent here & promises to avoid their repetition when he goes home. (See letters in letter-file).

1893
Jan 3/93 Jan 3/93. Sprained his back & side in a fall on the stairs yesterday. Is lame & sore.

Jan 25/93. Has complained of lameness and stiffness since the injury, but has been almost completely recovered from some time. Mentally about the same.

Feb 3/93 Feb 3/93. Wt 145 pds. Pulse 84. Feb 25/93. Is quiet, apparently resting & sleeping well at night. Does not now get excited, behavior seemingly quite calm & normal. Converses, smiles freely & coherently, with anyone who approaches him. Has not mentioned his delusions for some time, though he may yet hold them to some extent. Is very pleasantly disposed, only somewhat feeble in mind. Physical health good, for him.

Mar 2/93 March 2/93. Wt 143 pds. Pulse 70. March 27/93. Today, transferred to the "Open Ward" A3.

" 30 March 30/93. Is cheerful, fairly active, good natured & well-behaved & of good habits. Seems quite free from definite delusions, or, at least, never mentions them. Desires to go home.

April 4/93 April 4/93 Wt 144 pds. Pulse 76.

" 13 April 13/93. Has visited today by a friend & taken home by him & Austin.

— Discharged —

Chas. A. B. Weide.

from page 60

Dec 25/93 Christmas present from home. Dec 31/93 No change. Jany 2/94 Wt 183. P 88. Jany 31/94 No change. Feb 1/94 Wt 184½ lbs. Pulse 90. —

June 30/94
Feb 10/94 Feb 10/94. Stumps (where legs were amputated) are sore. They are dressed daily. Feb 28/94. Stumps are still more or less sore, and cause him considerable pain. Spends a good deal of his time in reading & playing games. Is still very depressed & evidently still holds to his delusions. Talks & moans a good deal. March 2/94. Wt 184½ lbs. P 98. March 27/94. The stumps are swollen and very sore, from time to time. March 31/94. No material change in patient's condition.

March 27/94

April 2/94 April 2/94. Wt 190 lbs. Pulse 76. April 27/94. Stumps are, again, swollen & sore; caused him a good deal of pain.

" 28/29 April 28/94. Patient in bed, today; legs are wrapped in hot cloths. April 29/94. Still in bed; under same treatment

" 30 April 30/94. Still confined to bed. In all other respects, patient continues as he has been for several months past.

May 15 May 15/94. Patient was in bed, on account of sore limbs, but was out on the grounds in a wheel-chair for

" 18/19 a short time today. May 18/94. In bed again. May 19/94. Is up today. Taken out of doors a while.

" 31 May 31/94. Does not, at present, use artificial limbs & is taken outside, daily, in a roller-chair. His condition does not seem to change any, mentally & he is still much depressed, at times. —

June 2/30 June 2/94. Pulse 90. June 30/94. About the same. Very much depressed & crying, at times. Health seems good.

July 2/31 July 2/94. Wt 193 lbs. July 31/94. No special change to note. Much depressed. Evidently holds to his delusions.

Aug 2/31 Aug 2/94. Wt 193. Pulse 90. Aug 6/94. Went to bed, complaining of left limb being sore. Aug 31/94. Has been

" 25 confined to bed since 8th inst; abscess formed on end of stick of left leg. Same was dressed, daily; has been discharging freely & is now about healed. Taken in invalid chair, today. Aug 26/94. Wt. dressed & onward, today. —

(carried to Discharge Book A page 130)

Personal and Medical History of Ole Christoffson

or Ole Christoferson

Whole No. 3107

Residence, 746 Pierce St. N E.

Date Admission, 17th August 1892

Admitted by, Dr. Phelps Hour, 7 P.M.

How Sent, J R. Corrigan Jof P. Hennepin Co.

Sex, Male

Age, 41 Years

Civil Condition, married

Children, one

Age Youngest Child,

Occupation, Laborer

Degree Education,

Profession Religion, Not a church member

Habits, good

Nativity, Norway

Physicians Committing, E S. Kelley & Wm J. Byrnes

Correspondents, Mrs Ole Christoffson, 746 Pierce St. Minneapolis, Minn

No. for Year, 19

Insane Relatives, none (Insanity not hereditary)

Cause Exciting, Religion

Cause Predisposing, Religion seemingly

Form, Melancholia – Acute

Accompanying Bodily Disorder, None

Suicidal or Not, attempted it (8 years ago)

Date of this Attack, 8 years ago; Seems continuous

Duration, Probably 8 years.

No. of Attack, Not 1st

No. of Admissions,

Age First Attack, 33 years.

Time of Leaving, Sept. 19th 92.

Time in Hospital, 1m, 2d,

Result, Improved

EXAMINATION ON ADMISSION.

Exd by Dr Baker 22nd Aug 1892. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Medium

MEMORY:

Past Events, Probably fair

Recent Events, Confused; can't tell how long he has been here

Special Subjects,

PERCEPTIVITY: ordinary observation fair, but not close.

Alert or Dull, Answers questions fairly well. Realizes

Correct or Illusive, own condition.

REASONING POWER: Less exercise

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Is tenturate. Says, sometimes a "blurring" comes over his eyes. Was at St. Peter about 8 years ago, he thinks. Says, when questioned about his thinking so much all the time, that he thinks he is lost forever.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not,

Special Subjects, Thinks he has committed sin & is lost.

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Wont talk, only in answer to questions

Personal and Medical History of Ole Christoffson

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 8 3/4 in. WEIGHT, 139 pounds. usual Wt. 150-160 lbs. NUTRITION, Rather thin & pale.

WOUNDS OR ABNORMALITIES, Part of index and 2nd finger of right hand gone – 3d finger deformed, abnormality, none

TONGUE, Tremors, slight coarse Coatings, Yes Promptness Movement, prompt

PUPILS, Equality, Equal Size, somewhat dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Finger to nose, eyes shut good

Legs, Standing erect, somewhat unsteady; Standing, Eyes shut, some swaying. Turning quickly, fairly good.

TREMORS, Hands, Tongue, Yes

Facial Muscles, tremors slight General,

REFLEXES, Patellar, Equal; respond to moderate stroke; limited.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, fair

FACIAL EXPRESSION, a little sad

SENSIBILITY,

HEART, Good

LUNGS, respiratory murmur, left apex, somewhat harsher. Chest 35½ in. expansion about 2 inches

Aug 18/92 EXAM. URINE, reaction acid; Spec grav. 1032; albumen none; urea 1.2%.

D.M.

Sept 19 D.B. microscopy. Uric acid crystals numerous – amorphous.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Yes	Constipated,	Irregular,
APPETITE, Good,	Medium,	Lacking Poor, but is better now.
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Sudden, probably; no convulsion or vertigo – no headaches.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living (74) good health.

Father or Pat. Relations, Father died of cancer of lip.

Brothers or Sisters, 3 brothers, living, all in good health. 1 brother died when a child. 1 sister; married; good health.

Personal and Medical History of Ole Christoffson

1892 This man was brought here by Deputy Sheriff H. J. Johnson; the following is the history of his case. Habits are good; cause of this attack is religion and it takes the form of acute religious excitement; there is no accompanying bodily disorder. First symptoms manifested about 8 years ago, when he went to St. Peter Hospital for Insane; confined there 9 months. Was well, upto a few days ago. Insanity is now manifested on the subject of religion. Has shown no disposition to injure others. Attempted suicide 8 years ago. There is no disposition to filthy or destructive habits. Has been under treatment, as above stated. Was then discharged, cured.

Aug 18 Aug 18/92. Was restless last night, sleeping but 3 hours. AM. Pulse 83.

" 19 Aug 19/92. Somewhat restless. Sleeping 5 hours last night.

" 20 Aug 20/92. Restless 2 hours, sleeping 6 hours last night.

" 21 Aug 21/92. Slept 7 hours last night. AM. Pulse 77.

" 22 Aug 22/92. Slept 7 hours last night. AM. Pulse 78.

Sep 3 Sep 3/92. Has been somewhat restless on a few nights, but, on the whole, has slept well, from 6 to 8 hours, each night. Pulse has been 84. 70. 88. 88. 78. (?). 84. 100. 84. 88. 88. 96 & 82 on the past 11 and present mornings.

Sep 5 Sep 5/92. Weight 141 1/2 pds. Pulse 100. Was today visited by the Rev. Mr. Audason

" 8 Sep 8/92. Pulse 100, yesterday and this morning.

" 19 Sep 19/92. Has continued to rest well and to sleep well at night. Has, each day, been up on the hall, neatly dressed, taking care of his own personal wants. Has been clean, tidy and well behaved. Was rather inclined to sit unoccupied. However, he read and wrote some, and talked quite freely when approached. Was always pleasant. On admission, somewhat depressed in spirits, he gradually grew more cheerful, with, on a few occasions, some relapse into his depression, at which times, he said, rather emotionally & sorrowfully, that he did not feel well. Did not express definite delusions. Went out walking. On admission, was rather pale and thin; gained in flesh & in healthful appearance, quite steadily and is, at present, looking much better than when he came here.

Was today visited by his brother, and by him taken home at the patient's rather urgent request.

— Discharged —

Personal and Medical History of C. E. Bradford

From page 108

1893 as last described. Is in fair health.

Mar 29 March 2/93. Wt 137 1/2 pds. Pulse 86. March 29/93. Is quiet & apparently restful at night. Does not go out walking. Walks the hall. Rarely talks to any one. Responds promptly & pleasantly to the Drs greetings. Recently, when his wife's name was mentioned to him he did not seem to much interested in it. He will not write her, however, & says she knows where she can find him.

Apl 4/ " 14/7 April 4/93. Wt 139 pds. Pulse 100. Was transferred yesterday to A — April 5/93. Did not sleep well last night. April 14/93. Became stubborn & disobedient and was moved back to B2. April 27/93. Is still living quietly & unusual as B2.

May 3/ " 30 May 3/93. Wt 142 1/2 pds. Pulse 78. May 22/93. Has been reported as restless for an hour or so at about 3 the nights, during the past month or so. Behavior & conduct by day do not change much. Reads some. Fellow talks. Bodily health seems good. Bowels regular. Has no cough. Lately, for some time, has declined to go out walking. Paces up & down the hall most of the time, talking to himself. Does not have anything to do with his fellow-patients.

June 5/ " 30 June 5/93. Weight 145 3/4 pds. (a slight gain). June 30/93. Keeps about as described in last month's general note. Goes out walking now, but sits by himself, apart from the others, talking & himself & laughing a good deal. Is irritable.

July 3 " 4 July 3/93. For some time has apparently been resting & sleeping fairly well at night. Last night, however, slept but 3 hours, being quite restless when awake. July 4/93. Wt 141 pounds. Was today, visited by his father. During the interview, patient became very greatly excited and noisily profane, evidently showing that his delusions had quite a strong hold upon him still.

" 5 July 5/93. Has been steadily the same. Appears fairly intelligent, but, in conversation about special subjects, is found to be full of delusive ideas.

Was, this evening, taken out by his father for the purpose of placing him in another asylum, probably in Illinois.

Discharged July 7, 1893.

From page 88.

D. W. Kennedy.

1893 Oct 19 Contd for past three weeks, yet he was rather reserved, moody & even sullen. There is a periodic or recurrent element in his case, which will likely again show itself.

Went home on trial, with brother, today.

— Discharged —

Personal and Medical History of C. E. Bradford

Whole No. 3108.

Residence, Moline, Ills

Date Admission, 18th August 1892.

Admitted by, Dr. Phelps Hour, 7 P.M.

How Sent, P. Corrigan for P. Hennepin 687.

Sex, Male

Age, 37 years

Civil Condition, Married

Children, No

Age Youngest Child,

Occupation, Works in Lumber mills

Degree Education,

Profession Religion, Is a church member?

Habits, Temperate

Nativity, Quincy, Ills

Physicians Committing, E. S. Kelley & E. T. Gibson

Correspondents, (wife) Mattie Bradford - 391 - 11th st Moline, Ill

(Father) Leonard M. Bradford, Moline, Ill.

No. for Year, 20

Insane Relatives,

Cause Exciting, not known

Cause Predisposing,

Form, Mania - Acute

Accompanying Bodily Disorder, No

Suicidal or Not, not known

Date of this Attack, Aug 12th - 1892

Duration, 6 days

No. of Attack, not the 1st

No. of Admissions,

Age First Attack, 37

Time of Leaving, July 5. 93.

Time in Hospital, 10 mos. 17 ds.

Result, Improved.

EXAMINATION ON ADMISSION.

Exd by Dr. Baker Aug 24/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quite active

MEMORY:

Past Events, Says - is good.

Recent Events, Seems fair

Special Subjects,

PERCEPTIVITY:

Alert or Dull, ordinary observation fairly good - answers questions fairly well - does not

Correct or Illusive, realize his condition -

REASONING POWER:

Ordinary Subjects, Good

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Convulsions or vertigo - none - Drank a little whiskey up to about 12 years ago. Drinks now about 4 glasses beer a day -

EMOTIONAL STATE:

Normal, Calm, Seems calm

Indifferent,

Exalted,

Depressed, inclined to be

DELUSIONS: see notes

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS: Hears voices

CONVERSATION:

Coherent or Incoherent, Coherently -

Voluble or Reticent, Talks freely

Personal and Medical History of C. E. Bradford

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 1/2 inches WEIGHT, 138 pounds (usual wt. 155 pds.) NUTRITION, below normal

WOUNDS OR ABNORMALITIES, (wounds) - wrist of right hand - Old fracture (5 yrs) - (Abnormalities) - varicocele

TONGUE, Tremors, slight, coarse Coatings, slight Promptness Movement, Prompt

PUPILS, Equality, Equal Size, abt normal

Response Light, Yes Accommodation, Yes

SIGHT, Considerably impaired - left eye a little more so.

HEARING, Good

COORDINATION, Arms, fingers & nose, Eyes shut, some inaccuracy.

Legs, Standing on foot; right well; left a little weak. Standing, Eyes shut, well.

TREMORS, Hands, of left hand especially Tongue, slight, coarse

Facial Muscles, slight, of right Cheek an intension General,

REFLEXES, Patellar, Equal; some exaggerated (7-8): Response movement slow

Other Reflexes,

ARTICULATION, Hesitating, and prompt Slurred, fairly good

FACIAL EXPRESSION, Normal

SENSIBILITY,

HEART, Sounds clear

LUNGS, Chest 37 1/2 inches - Expansion 3 1/2 inches. Lungs seem good.

Aug 24/92 Dr. Ba EXAM. URINE, Color yellow: reaction acid; spec. grav. 1028. Albumen, none. urea 1.4%

Aug 26/92 Dr. B Microscopy. Amorphous (urate or phosphate) considerable. Triple phosphate crystals, few: uric acid crystals, few; small spheres - single (+ grouped) - very many.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Yes Constipated, Irregular,

APPETITE, Good, Medium, Yes now; was very Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, died, think of Cholera Morbus.

Father or Pat. Relations, Father living; thinks in good health.

Brothers or Sisters, 1 brother living; fairly well: 3 brothers died in infancy - Sisters, 2 died, young - 2 living, well -

1892 This man was brought here by Robert Watson, Deputy-Sheriff, with the following history. Habits are temperate. Cause of this attack is not known; form is acute mania; no accompanying bodily disorder; first symptoms of disease manifested August 12th 1892; drew a revolver on a man because of a delusion that his wife was living with this man; although she is really living in Moline, Ill. This is not the first attack; not known when others occurred. Insanity is now manifested by the delusion that his wife is in Minneapolis with another man; also other delusions. Would have shot this man; not known if suicidal; no disposition to filthy or destructive habits; This man's wife is a loving & true wife, as shown by her letters in his possession.

Aug 22 Aug 24/92. The following were noted on examination today: Has nystagmus; movements almost constant and lateral; trouble dates from birth. Says he does not remember dates well, but thinks his memory otherwise good. Considers he was well when he came here with the exception that he was tired out. Says he saw a woman in a carriage but she was too far away for him to recognize her; considered it to be his wife; "heard her voice" – This was at Minneapolis. Thinks he has heard her voice here, when he was outside with the ward; Believes that she is now living in Minneapolis. There might be a possibility of his being mistaken about this. Thinks his wife's letters were sent to Moline from Minneapolis to be mailed; "heard parties say such was the case" – "I first suspected my wife when I saw her in a buggy with a railroad physician – I used to sit up, nights, doing 'detective work', trying to satisfy myself as to this matter, and this tires me out. I think my wife is not in Minneapolis now, but that she is here." Has used tobacco & opium & morphine; says "Doctor 'doped' my cigars to make me sleep". This was about 2 weeks ago.

Aug 19 Aug 19/92. Was somewhat restless last night, sleeping 6 hours. Aug 20/92. Slept 6 hours last night. This " 20 morning is lying down, feeling somewhat weak. Pulse 78, small ish. Aug 21/92. Was restless for " 21 a couple of hours, sleeping 5 hours last night. Am. Pulse 76. Eats poorly. Aug 22/92. Rested " 23 better and slept 7 hours last night. Am. Pulse 78. Aug 23/92. Slept 8 hours last night. Am " 24 Pulse 78. Is up daily and feels well. Aug 24/92. Rested fairly well and slept 7 hours last night. " 30 Am. Pulse 84. Aug 30/92. On one night, was quite restless, sleeping but 4 hours. On all others, since the last note, has slept from 6 to 7 hours. Pulse has been 84. 88. 82. 88. 96. 100. on the past 5 present mornings. Has been constipated for 2 or 3 days.

Sep 1 Sep 1/92. Slept 7 hours, night before last; last night 6 hours; Restless 2 hours. Pulse 108. yesterday; " 2 120 this morning, and is irregular. Resp, setting & does not seem to feel badly. Is merely weak. Says he had a chill, night before last & fever yesterday. Ordered to bed. 12 M. In bed. Pulse 98. R 20. T 99. " 2 6 PM. Pulse 84. R 16. T 99.2. Sep 2/92. Was restless for 3 hours, sleeping 5 hours, last night. 6 AM. Pulse 86. " 3 R 18. T 99.2. 10 AM. Pulse 80. Is given permission to get up; feels fairly well. Sep 3/92. Rested, and slept " 5 7 hours, last night. Am. Pulse 120. Sep 5/92. Has been quite uneasy & restless the past 2 nights, sleeping 4 and 5 hours, respectively. Weight 129 pounds. Pulse 108. (Has lost 9 pounds in weight). (probably weighed " 10 without clothes). Was put to bed last evening for a rest and observation. Sep 10/92. Was more or less restless every night, sleeping 2, 3, 4 to 6 hours. Refused breakfast this morning because he detected an " 13 aroma of something. Has probably an hallucination of smell. Sep 13/92. Has rested somewhat better and slept from 6 to 7 hours since last note. Says he was put in here by the Odd Fellows and " 14 says that the Dr is an Odd Fellow and a member of the visiting Committee. Sep 14/92. Rested

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DETAILED HISTORY OF SICKNESS OF MR. Bradford
DIAGNOSIS .

DATE	HOUR	PULSE: AM	PULSE: PM	RESP.: AM	RESP.: PM	TEMP.: AM	TEMP.: PM	OTHER DATA
4th	8		116		24		994	Admitted 8 P M. put in bed
5th	6	90		123		988		bowels not moved since 8 am yesterday
	6		112		22		998	Went to closet 2 PM
6th	6	94		122		996		restless. Confidential
	6		72		22		992	Went to closet 11 am 4 PM
7th	6	86		120		998		
	7		76		22		992	Eat less than usual offers irregular
8th	6	90		122		98		very illnatured, threatening to shoot some one
	7		80		20	98		offers irregular. some what excited
9th	6	88		122		998		Eat good breakfast
	6		70		19	99		Eat very little of each meal
10	6	76		120		988		says he was sick at stomach refused breakfast
	6		88		20		992	Eat very little, obstinate. bowels moved 4 PM
11th	6	76		120		986		refused breakfast gave no reason why
	6		68		20	99		Bowels moved 10 am Refused food each meal
12	6	70		120		988		refused breakfast. Condition same
	6		70		21		992	went to closet 2 PM
13	6	68		122		988		will not eat says he will not till he is up
	6		70		20		994	would not eat. drowns bills
14	6	72		120		996		refuses food
	6		74		20		994	eat a little bread & milk
15	6	78		120		984		eat a little thy morning. bowels not moved
	6		74		20	99		Bowels not moved eat some but much
16	6	66		122		976		" " " eat better
	6		78		22		988	" " "
17	6	84		120		982		
	6		72		21		994	bowels moved 730 PM.
18	6	68		120		980		refused breakfast weaker. cross & irritated
	6		76		20		994	Bowels moved 4 PM
19	6	84		122		996		says he feels sore all over
18		6		72		20		986
19	6	74		122		98		
	6		80		23		994	
20th	6	108		24		994		Bowels moved 4 & 10 PM
	6		76		24		98	got up and dressed says he feels better. sent back to bed
21st	6	112		122		996		condition some what well
	6		66		23		988	Bowels moved during night 3 times
22	6	68		120		984		dressed on & out Pulse & Temp taken after he got up on hall
	6		86		20		98	" " dumfish went to bed on bed
23	6	80		120		986		on hall Bowels not moved eat well at table
								condition some bowels not moved

Bradford

Feb 24 of Grippe – Feb 3/93. Tt 137 pd. Pulse 88. Feb 24/93. Had a night today with a severe paroxysm – no hemorrhage recorded.
" 25 Feb 25/93. Uniformly quiet at night, apparently resting & sleeping well. Conduct & behavior, by day, about as

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Night
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my wife
detective
is not in
: Doctor

t night this
Was restless for
/92. Rested
t night. Am
hours last night.
On all others, since
the past 5 present

Pulse 108. yesterday;
arly. Is merely weak.
In bed. Pulse 96. Res. 24, 99.
last night. 6 AM. Pulse 86.
Sep 3/92. Rested, and slept
es the past 2 nights, sleeping
s in weight). (probably weighs

Says
" 2 6 PM. Pulse 92.
" 3 R 18. Ta, 99.2. 10 AM. Pulse -
" 5 7 hours, last night. Am. Pulse 120. Sep
4 and 5 hours, respectively. Weight 129 pounds. Was
" 10 without clothes). Was put to bed last evening for a rest and w. Sep 10/92. Was more or less
restless every night, sleeping 2, 3, 4 to 6 hours. Refused breakfast this morning because he detected an
" 13 aroma of something. Has probably an hallucination of smell. Sep 13/92. Has rested somewhat
better and slept from 6 to 7 hours since last note. Says he was put in here by the Odd Fellows and
" 14 says that the Dr is an Odd Fellow and a member of the visiting Committee. Sep 14/92. Rested

well and slept 7 hours last night. Has kept his bed until today, since the 4th Inst. Has given per-
" 21 -mission to sit up but found himself too weak. Sep 21/92. Was permitted to get up today.
" 23 Sep 23/92. See attached Clinical record of patient's condition from the 4th to present date. The
marked acceleration of pulse, which led this being put to bed, was almost entirely absent, when
in bed; fever was absent. Refusal of food at times, through fear of being poisoned, sometimes on
excuse of being sick or something, and a tendency to constipation, are the chief points noted.
" 28 Sep 28/92. On the nights of the 16th-17th-18th-19th & 20th. 24th was quite restless and slept but 4 to 5 hours.
At other times has been more restful and slept better. At all times has been clean and tidy in per-
-sonal habits and dress; has been quiet; has always talked freely, coherent always and calmly
usually. At first, his delusion concerned only his wife, relative to her unfaithfulness; later,
the form of belief that the food was poisoned, that he was put here by the Odd Fellows & that the
Dr was one of their number. Has written letters and given them to the Dr for mailing; his sus-
-picions and at times impatient, although usually exercising self-control. Eyes the Dr rather
doubtfully, when he assures the patient that his letters have been mailed. Has been up & around
since the 21st Inst. Is rather thin and pale & rather weak, but is gaining some.
" 30 Sep 30/92. Has a sore throat.
Oct 4/ Oct 4/92. Wt 134 pds. Pulse 64. Oct 7/92. Struck at an attendant today, when asked to go out
for a walk. Has on 2 or 3 other occasions attacked attendants. Will not explain why he does so.
" 28 Oct 28/92. Occasionally restless at night, but on the whole, sleeps fairly well. Continues quiet, and
is fairly well-behaved, although showing irritability and anger, at times. Has said and
acted so that it is evident he has delusions concerning those about him, as (for example)
his Physician, but will not state them in detail. Bodily health somewhat better.
Nov 2/ Nov 2/92. Wt 135 pds. Pulse 80. Nov 5/92. Is quite excited and demands to know why he is kept. Claims
that the Dr who examined him, said, after the examination, (saying involuntarily (he is as sound as a nut)
" 6 he, Dr, did not say it out loud, but I know he said so. Nov 6/92. Eating down this morning
" 11 Complaining of headache & constipation. Nov 11/92. Has been somewhat restless & sleepless the
" 14 past 3 or 4 nights, talking with his room-mate. Nov 14/92. Is in bed today, complaining of
" 28 headache, constipation, and feeling sick. Nov 28/92. With the exceptions noted above, has been
quiet at night, resting and sleeping well, apparently. Has been quite impatient at being
held here. Is quite free of delusions. Bodily health fairly good.
Dec 5/ Dec 5/92. Wt 140 pds. Pulse 80. Dec 31/92. Uniformly quiet, resting and sleeping well at night.
Much more approachable & good-natured than at one time. Walks the floor a good deal;
answers greetings pleasantly; does not show marked discontent; seems better mentally;
but, on questioning, shows that he holds delusions. Bodily health fair.
1893
Jan 3/ Jan 3/93. Wt 137 pds. Pulse 96. Jan 6 25/93. Restful at night. Quiet. Rarely entering
into conversation. Walking the floor. Responding promptly & pleasantly to greetings. Re-
-cently when told that his wife had written, asking concerning him, and when asked why he
" 31 did not write her, said that it was his duty to come here & see him. Jan 31/93. Has a slight attack
Feb 3/ of "Grippe" - Feb 3/93. Wt 137 pds. Pulse 88. Feb 4/93. Had a fight today with a fellow patient - no hurt received.
" 25 Feb 25/93. Uniformly quiet at night, apparently resting & sleeping well. Conduct & behavior, by day, about as

(carried to page 1024)

Personal and Medical History of Nicholas Kouter

Whole No. 3109
Residence, Glasgow township
Date Admission, 19th August 1892.
Admitted by, Dr Kilbourne Hour, 12.30 PM
How Sent, Malcolm Kennedy J of P, Wabasha Cty
Sex, Male
Age, 28 years
Civil Condition, Single
Children, No
Age Youngest Child,
Occupation, Farmer
Degree Education,
Profession Religion, Member of Catholic Church
Habits, Temperate; has practised Masturbation to some extent
Nativity, Minnesota
Physicians Committing, J. A. Low and Geo. C. Wellmer
Correspondents, Theobold Kouter, Thielmanton, Minn (Father)

No. for Year, 21
Insane Relatives, None; not hereditary
Cause Exciting, Masturbation
Cause Predisposing, Epilepsy probably
Form, Demented — Epileptic
Accompanying Bodily Disorder, Epilepsy
Suicidal or Not, Not
Date of this Attack, about 1886
Duration, about 6 years —
No. of Attack, Not the 1st
No. of Admissions,
Age First Attack, about 22 years
Time of Leaving, Dec. 20 '93,
Time in Hospital, 1y 4ms. 1da
Result, Died — Status Epilepticus

EXAMINATION ON ADMISSION.

Exd by Dr Bakes Aug 22/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused at present
Quick or Sluggish, sluggish —

MEMORY:
Past Events, Confused at present
Recent Events,
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Can be made to talk much and cannot find out as to these points.
Correct or Illusive,

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Has Epilepsy - Only 15 or 20 minutes ago (before Examination 3.50 PM) he had a fit - Very reluctant to talk -

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Cannot be made to talk much and cannot find out as to these points -
Exalted,
Depressed,

DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,

HALLUCINATIONS:
ILLUSIONS:

CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent, wont talk much.

Personal and Medical History of Nicholas Kouter

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8 inches WEIGHT, 153 pounds NUTRITION, Good
WOUNDS OR ABNORMALITIES, Probably none
TONGUE, Tremors, Coarse Coatings, Yes - tooth-marked Promptness Movement, Slow
PUPILS, Equality, Equal Size, about normal
Response Light, Yes Accommodation, Yes
SIGHT, Probably good
HEARING, fairly good
COORDINATION, Arms, finger to nose, eyes shut, fair -
Legs, standing on foot, somewhat unsteady - Standing, Eyes shut, sways -
TREMORS, Hands, Tongue, Coarse
Facial Muscles, General,
REFLEXES, Patellar, Equal + + aggravated (7-8) Dr. B's Scale.
Other Reflexes,
ARTICULATION, Hesitating, Yes Slurred,
FACIAL EXPRESSION, Sleepy + dull
SENSIBILITY,
HEART, ? Probably good
LUNGS, ? " "
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, fairly Careless,
BOWELS, Normal, ? Constipated, Irregular,
APPETITE, Good, ? Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 78. RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Epilepsy ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

1892

This patient was brought here by Sheriff Weimerskirch and Clerk of Court Stauppf with the following history; Habits are temperate; has practiced masturbation to some extent. Cause of this attack is masturbation. Form of attack is chronic and paroxysmal. Has epilepsy. First symptoms of disease manifested about 6 years ago. Has had several attack of epilepsy, occurring at intervals during past 6 years; short duration; insanity now manifested in no special way. Is disposed to injure others from sudden passion. Is not suicidal. No disposition to filthy or destructive habits. Has been restrained from 12 to 2 hours. Has been given the usual treatment for epilepsy. Is not hereditary. Is an epileptic, with symptoms of imbecility more marked at times than others, and with paroxysms of great violence. Has several times injured people who have tried to restrain him.

Aug 21 Aug 21/92. Was quiet night before last; last noisy a part of the night. Had a fit during the night.
" 23 Aug 23/92. Is having fits and is put on the bromides.
" 24 Aug 24/92. Was quite noisy for an hour last night. Had a fit during the night.
" 25 Aug 26/92. Noisy for a couple of hours last night; had a fit.
" 27 Aug 27/92. Was noisy for 4 hours last night & restless. Sleeping but 3 hrs. Had a fit during night.
" 28 Aug 28/92. Was restless, noisy for 4 hours, sleeping 3 hours last night.
" 30 Aug 30/92. Noisy for a couple of hours last night.
Sep 1 Sep 1/92. Was quite noisy for 1 hours last night. — For a time, following admission, had quite frequent fits and was very stupid.
" 5 Sep 5/92. Weight 151 pounds. Pulse 88.
" 29 Sep 29/92. Since above notes, has been comparatively quiet at night, sleeping well, and having no nocturnal fits as far as seen. Fits by day have also become less frequent and there is now less marked dullness & stupidity. Is quite dull, however, mentally; sluggish in mental and physical activity. Seems quite good bodily health. Is comparatively quiet by day. Clean and fairly tidy. Is apparently contented on B4.
Oct 14 Oct 14/92. Wt 160 pds. Pulse 72. Oct 21/92. Had a fit last night and fell out of bed.
" 28 Oct 28/92. Almost always quiet at night, resting well. Quiet and fairly well-behaved by day.
" 29 Bodily health good. Oct 29/92. Visited today by his father.
Nov 2/29 Nov 2/92. Wt 165 pds. Pulse 99. Nov 29/92. Is quiet at night, resting & sleeping well. Fits are infrequent. Bodily health good. Recently complained in a very nervous, excited way about a slight injury to his arm, exaggerating very much, the actual suffering & injury.
" 30 Nov 30/92. Became quite wildly maniacal last night, being extremely noisy for about 3 hours. Is today excited, talking noisily & incoherently.
Dec 1 Dec 1/92. Was destructive & extremely noisy last night, sleeping 6 hours. Has been maniacal & noisy today; quiets by spells. PM. Is lying down. Pulse 112. Refused dinner & supper & his medicine.
" 2 Dec 2/92. Pugnacious and destructive and noisy last night. AM Pulse quite rapid. Ate breakfast. Is out on the hall. Dec 5/92. Wt 163 pds. Pulse 98. Has quieted down fairly well. Dec 31/92. Has been fairly quiet at night, resting and sleeping fairly well since the last note. Has been also fairly quiet and well-behaved by day, though somewhat more excitable than before the above maniacal attack. Was recently visited by his father.

1893

Jan 2 Jan 2/93. Is maniacal and noisy. Has to be held in order to keep him in order.
" 3/5 Jan 3/93. Pulse 108. Denudes himself today and is kept in seclusion. Jan 5/93. Has been very excited and violent today. Fought attendants violently, broken up dishes &c. Jan 8/93. Has been kept in seclusion daily until today. Is now out on the hall, although still irritable & excited.
" 8 Although though disturbed by day, has been fairly quiet and has secured a fair amount of sleep
" 25 last night. Jan 25/93. Has calmed down and has been fairly well behaved for some time past; is quite stupid. ——
Feb 3/12 Feb 3/93. Wt 162 lbs. Pulse 100. Feb 12/93. Has, for the past week, refused to take his bromides. Thinks that taking medicine keeps him from getting well, & that the officials want to keep him here.
" 25 Feb 25/93. For past 4 week, has been uniformly quiet, resting & sleeping well, at night, apparently. Only 2 nocturnal fits have been reported in that period. Since the maniacal spell of January last, day, continued calm and quite well-behaved. Is dull & stupid. Still somewhat inclined to be irritable.
Mar 7 March 7/93. Wt 158½ pds. Pulse 92. March 7/93. Has been pugnacious in 2 or 3 occasions lately.
" 29 March 29/93. Has had a few nocturnal convulsions; as a rule, passes quiet & restful nights. Has been quiet and well-behaved, as a rule, by day. Is quite markedly demented. Visited today by his father.
April 4/28 April 4/93 Wt 156 lbs. Pulse 104. April 28/93. Has not had a maniacal spell since last note. Has been quiet & fairly well-behaved. Does not complain of feeling ill, though he has lost in weight.
May 3/22 May 3/93. Wt 152 lbs (is still losing). Pulse 104. May 22/93. Last night, was so extremely noisy that he had to be taken out & put into a single room. May 23/93. Seems, as a rule, to rest well at night. No fits have been reported either by day or by night for some time. Seems a little brighter, at times, though he is generally dull & stupid. By day, is fairly well-behaved, though irritable & easily excitable, when he becomes very ugly & pugnacious. June 30/93. Is still subject to epileptic fits & while suffering from these & prior & subsequent thereto, is often violent & dangerous. Generally, however, he is quiet and well-behaved. Bowels regular. Habits cleanly. Talks freely & is willing to work. July 31/93 No
Aug 10 change from last note. Aug 10/93. Has had some very severe fits yesterday & today & has been violent
Sep 7 and put in seclusion. Sep 7/93. Has been having some bad spells the last few days; noisy & violent & has been in seclusion a good deal of the time. Weight, on 4th inst. 151 lbs. Pulse 82. —
" 9 Sep 9/93 Health good. Patient's father visited him today, for 3 hours or so, & after his departure,
" 20 patient had to be put in seclusion, he became so violent. Sep 20/93. Patient has, with few intervals of quietude, been mostly kept in seclusion this month. Refuses food & medicine for from 24 to 36 hours, at a time. Sep 30/93 During the past few days, he has not been so noisy & dangerous. He has had no fits during all the time he has been so violent & violent.
" 30 Was kept in seclusion during the month 179 hours. (Was secluded 82 hours in August). —
Oct 3/10 Oct 3/93. Wt 148 pounds. Pulse 98. Oct 10/93. Has been quite well-behaved, during
" 13 the last 3 weeks. Oct 23/93. Had some trouble with a fellow patient (Struckle) today in a
" 31 row which ensued between Attendants & Kouter. He (Latter) had his nose swollen and forehead was struck. Oct 31/93. Is showing symptoms of again becoming restless,
Nov 7 & quarrelsome, but, as yet, has not injured anyone. Nov 7/93. Wt 153 pds. Pulse 84.
" 16 Nov 16/93. Wrongly & quarrelsome, this morning. Struck a fellow-patient (Denny McCarthy)

(Carried to page 113)

Personal and Medical History of Chas. J. Pendergast

Whole No. 3110

Residence, Detroit, Michigan

Date Admission, 20th August 1892.

Admitted by, Dr. Phelps Hour, 7 P.M.

How Sent, J. L. Corrigan, Jof D. Hennepin Co'y

Sex, male

Age, 28 years

Civil Condition, single

Children, none

Age Youngest Child,

Occupation, no regular occupation on account of his condition

Degree Education,

Profession Religion, Not a church member

Habits,

Nativity, Niles, Michigan

Physicians Committing, A. K. Norton and E. J. Gibson

Correspondents, Brother George Pendergast
417 - 5th Street South

No. for Year, 22

Insane Relatives, his father had 3 strokes of paralysis.

Cause Exciting, Masturbates + is subject to epileptic attack,

Cause Predisposing,

Form, General Paresis

Accompanying Bodily Disorder, Epilepsy

Suicidal or Not, Not

Date of this Attack, For several years subject to such attack,

Duration, of several years.

No. of Attack, 1st (Continuous)

No. of Admissions,

Age First Attack,

Time of Leaving, October 17th 1892

Time in Hospital, 1 month 27 days

Result, Died. General Paresis

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Ex'd by Dr. Baker August 92.

MENTAL ACTIVITY:

Clear or Confused, Somewhat Confused

Quick or Sluggish, Probably fairly active

MEMORY:

Past Events, Seems good

Recent Events, " "

Special Subjects,

PERCEPTIVITY:

Alert or Dull, ordinary observation, fairly good; answers

Correct or Illusive, questions fairly well - realizes own condition

REASONING POWER:

Ordinary Subjects, } Probably somewhat

Own Mental State, } impaired -

Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

Is temperate probably; has masturbated some - Patient examined in bed as he is sick. Complains of nervousness + of being made to. Is, at times, quite emotional, cries; says, had a nervous disease for about a year + a half. Used to fall down when he went to his work at coopering; used to fall down often in the shop. Says he had for when a very young boy + again in San Francisco, some years afterward. also had a spell of "Chancres" -

EMOTIONAL STATE:

Normal, Calm, Changeable

Indifferent,

Exalted,

Depressed, tendency to be

DELUSIONS: none detected

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: "of sight"

ILLUSIONS: Probably none

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Chas. J. Pendergast

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8 3/4 inches WEIGHT, 119 pounds NUTRITION, Rather poor

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Slight, coarse Coatings, Slight Promptness Movement, rather spasmodic, prompt

PUPILS, Equality, unequal, left larger Size, about normal

Response Light, Yes Accommodation, Yes

SIGHT, Seems to be good

HEARING, Good

COORDINATION, Arms, finger to nose, eyes shut, poor.

Legs, Standing, eyes shut, very poor; staggers about + fall

TREMORS, Hands, Tongue, Slight, coarse

Facial Muscles, General, irregular muscular movements

REFLEXES, Patellar, absent; even on reinforcement

Other Reflexes,

ARTICULATION, Hesitating, fairly prompt. Slurred, Seems fairly good.

FACIAL EXPRESSION, rather haggard -

SENSIBILITY,

HEART, Sounds loud; no murmurs -

LUNGS, respiratory murmur, left apex, somewhat harsh -

8/19/92 P.M. EXAM. URINE, Color very pale; reaction acid; Spec. grav. 1014. Albumen none; urea - 4%.

8/19/92 P.M. Microscopy - no sediment visible to naked eye. microscop. nothing.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes		Careless,
BOWELS, Normal,		was Constipated, but loose to day	Irregular,
APPETITE, Good, Yes	Medium,		Poor,
SLEEP, Good,	Poor,		Irregular,
PULSE, 92.	RESP.,		TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow, probably - Convulsion or vertigo, probably -

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, mother living; claims not in good health.

Father or Pat. Relations, Father died of paralysis;

Brothers or Sisters, one brother in Minneapolis - not very good health; has malaria - Sisters - 4 - all living claims healthy

Personal and Medical History of Chas. J Pendergast

1897

This man was brought here by Deputy-Sheriff Kellar, with the following history; form of attack is Chronic; cause masturbation; and he is subject to Epileptic attacks. For several years he has been subject to mild Epileptic attacks and has been treated for the same, irregularly and of various kinds. Father had 3 strokes of paralysis. Attack is continuous. Insanity is now manifested by hallucinations and delusions. Has shown no disposition to injure others. Is not suicidal. Has no disposition to filthy of destructive habits. Has not been restrained or confined. This man is guilty of larceny, but as the Court decided that he was probably not responsible for his acts, he was ordered before the Probate Court for examination.

Aug 21 Aug 21/92. Was restless 7 hours, sleeping but 1 hour last night. Complains that the noise disturbes him.
" 22 Am. Pulse 100. Pm. Pulse 96. Aug 22/92. Restless a couple of hours, sleeping 6 hours last night—
" 23 Am. Pulse 116. Tem 99.6. Pm. Pulse 96. Tem 99. Aug 23/92. Restless an hour, sleeping 8 hrs last night. This morning is crying, + says he "feels badly all over." Was sent to bed on C[t]. Pulse 120. Tem 99.6.
" 24 Aug 24/92. Quite noisy 3 hours, restless + slept but 2 hours last night. Bowels moved 3 times
" 25 during the night. Aug 25/92. Somewhat noisy, quite restless, sleeping but 2 hours, last night.
" 26 Aug 26/92. Slightly noisy, very restless and slept none last night. Today is excited and very
Sept restless and noisy by spells. Sept 4/92. Quite often somewhat noisy, almost always considerably restless and has slept but from 2 to 5 hours each night, since the last note. Bowels are irregular. At times loose, + again quite obstinately constipated. Was constipated for
" 5 the past 3 days; today passed considerable blood with his feces. Sept 5/92. Weight (without
" 29 Clothing) 114 pounds. Pulse 90. Sept 29/92. Has become less restless, less noisy at night and sleeping rather better, from 5 to 7 hours. Has, at times, wet and soiled his bed and room. For a time, after admission, was, by spell, very much excited + quite noisy, nervously + aimlessly active. Talked then quite freely + complained of nervousness + felt badly. Has, lately, been quieter and less restless. Has, at times, seemed unwilling to talk when spoken to, never actively repelling. Distinct convulsions have not been seen. Definite delusions have not been heard expressed. Has a startled rather anxious expression of face. Is quite thin and bodily health is not good. Has had retention of urine for some time, being catheterized daily. Has passed blood per rectum on 2 or 3 occasions. Patient has had irregular feverishness and quite a decidedly accelerated pulse oftentimes in the absence of any coincident rise of temperature. Has been kept in bed steadily since the 23d ult. Clinical record has been kept and is attached.

Oct 4 Oct 4/92. Wt 103 lb pds. Has lost about 9 pounds.
" 8 Oct 8/92. Since the 29th ult., has been more or less restless at night, sleeping for 3 to 5 hours; at times a little more; has been growing more restless until he will not now stay in bed. To prevent exposure to cold, was ordered dressed and kept seated. Pupils are markedly unequal, right the larger.
" 11 Oct 11/92. Since last note, has been up some each day. He is quite feeble, however, the attempt to keep him in bed is only successful when he is absolutely held there; patient struggling strongly against being kept in bed and against Everything that is attempted to be done for him.

Personal and Medical History of Chas J Pendergast

No 1

DETAILED HISTORY OF SICKNESS OF MR. Pendergast
DIAGNOSIS.

	TEMPERATURE AM	TEMPERATURE PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
Aug	23	6	88	I	24	I	100	I	Admitted by Mr Z ox to ward 10 on foot-in bed
	24	6	88	22	I	552	I		has had diarrhea all night-5 stools
		6	I	100	I	23	I	98	I	bowels moved drawn. The day twice
	25	6	108	I	20	I	588	I	bowels moved once during night-asks for he
		6	I	98	I	20	I	99	I	feels much better less nervous
	26	6	106	I	18	I	100	I	appetite fair
		6	I	104	I	24	I	994	I	very much excited eat but little
	27	6	I	96	I	22	I	996	I	less excited. Cares about diet &c
		6	I	96	I	20	I	998	I	greatly gained. less excited bowels moved 3 Pm
	28	6	98	22	I	994	I		I	nervous fears will come to him
		6	I	108	I	22	I	99	I	bowels moved slightly 2 Pm. Less excited, on bed
	29	6	112	I	22	I	988	I	had slight hemorrhage from rectum while feeding of some
		I	I	I	I	I	I	I	I	kind from flown smoothly about 2 teaspoonfuls full Coops
		I	I	I	I	I	I	I	I	ortered but rejected on drying to flow of pattered on feet
		I	I	I	I	I	I	I	I	extraordinary thermometer did not exhibit secondary hemorrhage
		I	6	I	84	I	22	I	998	I
	30	6	I	98	I	22	I	994	I	less excited evening well
		6	I	96	I	22	I	996	I	retires drinks often sent to closet
	31	6	I	94	I	20	I	982	I	more excited evening well passed more blood from rectum
		6	I	100	I	24	I	992	I	less excited evening well bowels moved slightly 3 Pm
Sept	1st	6	I	100	I	22	I	99	I	condition same.
		6	I	88	I	22	I	988	I	
	2nd	6	I	98	I	24	I	998	I	bowels not moved. somewhat excited
	3	6	I	80	I	22	I	994	I	" " " no excitement
		6	I	86	I	24	I	998	I	Bowels moved freely 4 Pm after taking oil
	4	6	I	100	I	28	I	996	I	appetite fair more quiet-less nervous
		6	I	104	I	28	I	1005	I	quiet restless all day passed some blood from
	5	6	I	112	I	26	I	998	I	bowels noted above 8 am Bowels moved 4 Pm
		6	I	108	I	26	I	100	I	more quiet. slept by night
	6	6	I	106	I	28	I	994	I	More quiet. than usual dumpish
		6	I	88	I	24	I	996	I	Bowels moved 4 Pm no blood
	7	6	I	130	I	22	I	992	I	Very restless nervous and excited
		8	I	118	I	24	I	99	I	quiet but nervous. mortified
	8	6	I	80	I	23	I	988	I	Consultation meeting at 8 am. very nervous
		9	I	84	I	20	I	98	I	Very nervous all day refused breakfast-
	9	6	I	96	I	25	I	986	I	less excited bowels moved during night-
		6	I	74	I	22	I	994	I	more tearful. seems weaker
	10th	6	I	116	I	24	I	99	I	had stool 7 am. stool bloody
		6	I	88	I	24	I	98	I	less restless stool at 4 Pm no blood
	11	6	I	84	I	22	I	992	I	conditions same a little more nervous
		6	I	86	I	20	I	98	I	more quiet. sleeps at times Bowels moved 6 Pm
	12	6	I	104	I	33	I	994	I	quiet in bed. took bath
		6	I	84	I	21	I	992	I	Bowels moved 3 Pm.
	13	6	I	94	I	26	I	100	I	quiet but so nervous
		6	I	70	I	22	I	988	I	restless
	14	6	I	80	I	22	I	984	I	Bowels moved during night
		6	I	76	I	22	I	982	I	conditions same
	15	6	I	108	I	24	I	98	I	restless and peevish
		6	I	108	I	22	I	992	I	
	16	6	I	108	I	24	I	982	I	
		6	I	104	I	28	I	994	I	more quiet
	17	7	I	104	I	28	I	994	I	condition same
		6	I	92	I	24	I	998	I	More quiet but feeble take but little

Died Oct 17th 8.26 am

Pendergast

Personal and Medical History of Chas. J. Pendergast

1892

This man was brought here by Deputy-Sheriff Kellar, with the following history; form of attack is Chronic; cause masturbation; and he is subject to Epileptic attacks. For several years he has been subject to milk Epileptic attacks and has been treated for the same, irregularly and of various kinds. Father had 3 strokes of paralysis. Attack is continuous. Insanity is now manifested by hallucinations and delusions. Has shown no disposition to injure others. Is not suicidal. Has no disposition to filthy of destructive habits. Has not been restrained or confined. This man is guilty of larceny, but as the Court decided that he was probably not responsible for his acts, he was sent before the Probate Court for examination.

Aug 21 Aug 21/92. Was restless 7 hours, sleeping but 1 hour last night. Complains that the noise disturbs him.
" 22 Am. Pulse 100. Pm. Pulse 96. Aug 22/92. Restless a couple of hours, sleeping 6 hours last night.
" 23 Am. Pulse 116. Temp 99.6. Pm. Pulse 96. Temp 99. Aug 23/92. Restless an hour, sleeping 8 hrs last night. This morning is crying, & says he "feels badly all over". Was sent to bed on Ct. Pulse 104. Temp 99.6.
" 24 Aug 24/92. Quite noisy 3 hours, restless & slept but 2 hours last night. Bowels moved 3 times during the night. Aug 25/92 Somewhat noisy, quite restless, sleeping but 2 hours, last night.
" 26 Aug 26/92. Slightly noisy, very restless and slept none last night. Today is excited and very restless and noisy by spells. Sep 24/92 Quite often somewhat noisy, almost always considerably restless and has slept but from 2 to 5 hours each night, since the last note. Bowels are irregular. At times loose, & again quite obstinately constipated. Was constipated for
" 27 the past 3 days; today passed considerable blood with his faces. Sep 5/92 Weight (without Clothing) 114 pounds. Pulse 90. Sep 29/92. Has become less restless, less noisy at night and sleeping rather better, from 5 to 7 hours. Has, at times, wet and soiled his bed and room. For a time, after admission, was, by spells, very much excited & quite noisy, nervously & aimlessly active. Talked then quite freely, & complained of nervousness & "felt badly". Has, lately, been quieter and less restless. Has, at times, seemed unwilling to talk when spoken to, never actively repelling. Distinct convulsions have not been seen. Definite delusions have not been heard expressed. Has a startled rather anxious expression of face. Is quite thin and bodily health is not good. Has had retention of urine for some time, being catheterized daily. Has passed blood per rectum on 2 or 3 occasions. Patient has had irregular feverishness and quite a decidedly accelerated pulse oftentimes in the absence of any coincident rise of temperature. Has been kept in bed steadily since the 23d ult. Clinical record has been kept and is attached.

Oct 4 Oct 4/92. Wt 103½ pds. Has lost about 9 pounds.
" 8 Oct 8/92. Since the 29th ult., has been more or less restless at night, sleeping for 3 to 5 hours; at times a little more; has been growing more restless until he will not now stay in bed. To prevent exposure & cold, was ordered dressed and kept seated. Pupils are markedly unequal, right the larger.
" 11 Oct 11/92. Since last note, has been up some each day. He is quite feeble, however, the attempt to keep him in bed is only successful when he is absolutely held there; patient struggling strongly against being kept in bed and against everything that is attempted to be done for him.

Personal and Medical History of Chas. J. Pendergast

DETAILED HISTORY OF SICKNESS OF MR. C. J. Pendergast
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
Sept 18th	6		118	123		25	99		Condition same. Continues fears harm
		6		104		22		100	" " " eat on request
19	6		116	122		22	99		Con and continues his urine.
		6		94		25		100	drew about 1 qt of urine on 1 Pt 6 PM
20	6		98	126		24	98		drew & find urine sour pass the bed during night
		6		96		24		98	had a Copious passage from bowels followed by
									diarrhoea. eats apparently & slowly
21	6		100	124		24	99		slight diarrhoea often but little at a time seems
		6							incontinent. Voided urine with a stool.
		6		100		24		100	drew 1 Pint and a half urine diarrhoea controlled
22	6		106	124		22	99		condition same diarrhoea controlled drew urine 4 PM
		6		104		22		99	Condition same Spirits no diarrhoea retains
									4 urine drew urine 8 30 am
23	6		108	124		22	98		condition same
		6		92		22		98	Eats eats well
24	6		112	126		22	98		drew 1½ pints urine am
		6		104		22		100	drew 1 pint urine 2 30 PM eats well
25	6		114	125		20	100		" 1½ pints urine 8 am had wet bed
		6		108		24		100	drew urine 8 pm
26	6		112	124		22	98		" " 7 am Condition same
		6		96		22		98	
27	6		96	122		18	98		drew urine 7 PM
		6		92		24		98	" " 8 am — 5 PM
28	6		112	125		24	98		" " 8 am
		6	106		24		100		" 5 PM. eats well
29	6		108	125		24	100		Clothes tumbles
		6		84		22	98		
30	6		116	124		24	100		Condition same drew urine
		6		120		24		100	
Oct 1st	6		108	126		24	99		" " " " "
		6		104		26		98	drew urine 6 20 PM.
2nd	6		74	120		26	98		drew urine 7 30 am
		6		86		26		98	" " 5 PM
3rd	6		118	128		22	98		" " 8 am Condition same
		6		94		22		98	refused dinner & supper
4th	6		102	124		24	98		drew urine 8 am
		6		104		22		98	quite nervous and stubborn
5th	6		116	126		24	98		drew urine
		6		86		21		98	more nervous than usual
6	6		108	124		24	98		exited out of bed after drew urine
		6		110		24		98	
7	6		106	125		24	98		more quiet eats well bowels not moved
		6		108		24		98	
8th	6		120	123		22	98		
		6		114		22		98	restless will not remain in bed
9	6		122	124		22	98		
		6		112		24		98	bowels moved twice in afternoon
10			128	122		22	98		restless out of bed restless
		6		112		23		98	bowels moved on bed twice
11	6		116	123		18			Can not be kept in bed very nervous
		6		122		26		100	dressed on bed all day
12	6		116	124		18	98		very restless up in room refuses to remain in bed
		6		114		24		98	" " " "

Pendergast

189?

Aug 21 (

" 22 (

" 23 (

" 24

" 25 (

" 26 (

Sept 4 (

" 6 (

" 27 (

" 29

Oct 4

" 8

" 11

C. J. Pendergast

Oct 13/92. Since the 8th inst, has been much more restless at night, sleeping only from 1 to 3 hours and, last night, none at all. Patient strenuously resists taking food, staying in bed or being kept in bed and even fights at the approach of any one; is kept in his room but refuses to dress. Pulse is small and feeble; patient is growing thin. Friends were written to. Pm. Pulse 110. R 24.

" 14 Oct 14/92. Was very restless last night, asking for a razor to cut his throat, at one time. Slept none at all. Am. Pulse 116. R 26. Pm. Pulse 118. R 26.

" 15 Oct 15/92. Persistently out of bed and restless last night, sleeping none at all. Am P 118 & nervous and excited; out of bed much; if not watched. Wants a weapon to cut his throat. 6 Pm. Pulse 116. R 24. Has been kept in bed for several days, by personal restraint.

" 16 Oct 16/92. Was restless last night, sleeping but 3 hours. Am. Pulse 114. R 24. Is very restless, Eats poorly. Pulse is feeble. Food is given at frequent intervals. Pm. Is very restless; is very haggard and feeble; shows marked failure during the day. Very strongly resists all interference. Was restrained in bed.

" 17 Oct 17/92. Was given food and medicine every 2 hours last night. Slept none. At 4 am, had a chill; hot sand-bags were applied by the nurses. Pulse 112. R 54. About 6 am Pulse was 114. R 50. T (R) 103.8. Is very weak; cold surface; Cheyne-Stokes breathing; at times is semi-unconscious. Continued to fail very rapidly during last night and early this morning, and died at 8.26 this morning.

Summary. Ever since admission, patient has been very nervous, restless and highly Emotional. At first, able to talk at times, for a short spell, grew duller and more confused, mentally, not able to talk intelligently. There was present marked ataxic symptoms, and these, with the mental state, and the history of Epilepsy, so-called, led to the diagnosis of General Paresis in its later stages. There was no convulsion seen while here, however; there has been a pronounced tendency to acceleration of pulse, without sufficient demonstrable Cause; and occasional feverishness. Has lately resisted taking food and has taken very little food, indeed.

Friends were notified of his death, and a brother came & removed the remains.

— Died —

Personal and Medical History of Charles H Haupt

Whole No. 3112

Residence, St Paul, Minn

Date Admission, 23rd August 1892

Admitted by, Dr Baker Hour, 7

How Sent, John. B. Olivier, Jof C

Sex, male

Age, 53 years

Civil Condition, widowed

Children, None

Age Youngest Child,

Occupation, Physician and Drug

Degree Education,

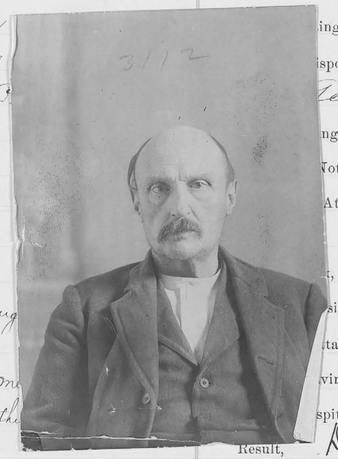
Profession Religion, Yes; a church me

Habits, Intemperate; otherwise, cle

Nativity, Pennsylvania

Physicians Committing, W. S. Briggs & W. F. Fisher

Correspondents, address of Cousin; Rev. A. J. D. Haupt
St. Paul. Minn



No. for Year, 24

Insane Relatives, Insanity not hereditary

ing, Intemperance, Sudden loss of wife, financial trouble

isposing,

General Paresis

ng Bodily Disorder, None

Not, Not

Attack, about 3 week ago

about 3 weeks.

1st

sions, —

ttack, 53

ving, 30th June 1894

spital, 1 year 10 mos & 7 Days.

Result, Died; Chron ic General paresis

EXAMINATION ON ADMISSION.

Exd by Dr Baker Aug 24/92

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, somewhat sluggish

MEMORY:

Past Events, probably fair

Recent Events, Poor probably; thinks has been here 12 days.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, } ordinary observation, poor probably;

Correct or Illusive, } realizes own condition.

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Cries; Emotional at times.

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Has heard music

ILLUSIONS:

CONVERSATION: On questioning

Coherent or Incoherent, coherent.

Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:

Drank to excess lately. Examination made of patient while in bed, as he is on "sick ward". While testing patellar reflex, muscles of legs went into irregular spasmodic action. Skin seems hyperaesthetic - plantar reflex excessive, followed by quite violent spasmodic contraction of the leg; Says about a year since he felt his brain was affected; feel a "cracking" in it. "heard music" - These he deems hallucinations - Has, he claims, had spells of unconsciousness - were quite frequent - did things afterwards could not recall having done them - Wonders at his having done them - Says he lost power of concentration.

Houpt, March 10-93.

nt times, that he would leave
th he would be married to a
seen this lady, nor does he
er in Church and that pastor
them.
reams of a somewhat similar
ts, and he has asked God if
SURED HIM that these dreams

ieve in dreams before, but now

name, replied that her first
name. She is about 5' 5",
re "embonpoint" than our pa-
this lady about him (patient)
cognize each other.

late wife appeared to him,
ion he had made, and of his
e was Miss Lilian G Titus;
e to appear in the St. Paul
ys it is more the money this
wants that.

ty

20/117

Rochester Minn
Tuesday October 24/93

Rev A J D Haupt
Dear Cousin

I suppose you will be surprised to rec a letter from me. But you will be more surprised when you have read this little I have had dreams that I know come from God and I have I ~~know~~ shocked his blessing in this letter I have always called my intended wife Mary Bourn but when I opened the book I was reading ~~that~~ morning I the first two words of the new chapter was L

Hgio, 2

twitchings - yes.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Died at 73 yrs. (old age).

Father or Pat. Relations, Father dead - (dissipated.)

Brothers or Sisters, one brother, good health; Sisters none (2 dead - died young)

Personal and Medical History of Charles H

Whole No. 3112

No. for Yea

Residence, St Paul, Minn

Insane P

Date Admission, 23rd August 1892

Admitted by, Dr. Baker Hour, 7

How Sent, John. B. Oliver, Jof C

Sex, Male

Age, 53 years

Civil Condition, Widowed

Children, None

Age Youngest Child,

Occupation, Physician and Drug

Degree Education,

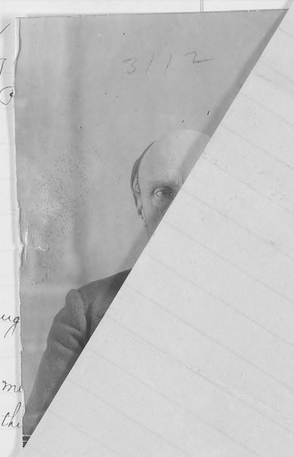
Profession Religion, Yes; a church m

Habits, Intemperate; otherwise, th

Nativity, Pennsylvania

Physicians Committing, W. S. Briggs & W.

Correspondents, address of Cousin; Rev. H. J. D. Sta
St. Paul. Minn



EXAMINATION

Exd by Dr. Baker Aug 24/92 MENTAL CHARAC

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, somewhat sluggish

MEMORY:

Past Events, probably fair

Recent Events, Poor probably; thinks has been here 12 days.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, } ordinary observation, fair probably;

Correct or Illusive, } realizes own condition.

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL

Normal, Calm,

Indifferent,

Exalted,

Depressed, Cries; Emotional at times.

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Has heard music

ILLUSIONS:

CONVERSATION: On questioning

Coherent or Incoherent, Coherent.

Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:

Drank to excess lately. Examination made of patient while in bed, as he is on sick ward: While testing patellar reflex, muscles of legs went into irregular spasmodic action - Skin seems hyperaesthetic - plantar reflex excessive, followed by quite violent spasmodic contraction of the leg; This about a year since he felt his brain was affected; feel a "cracking" in it. Heard music" - These he deemed hallucinations - Has, he claims, had spells of unconsciousness - were quite frequent - did things afterwards could not recall having done them - Wondered at his having done them - Says he lost power of concentration.

N O T E D.C.H.Houpt, March 10-93.

Says he has now dreampt, three different times, that he would leave the Hospital in May next, and that same month he would be married to a very wealthy lady in St.Paul: he has never seen this lady, nor does he know her -but God tells him he is to meet her in Church and that pastor of Church) Rev. Dr. Smith) will introduce them.

Also says he has had lately many dreams of a somewhat similar nature and regarding his own future prospects, and he has asked God if they will come to pass and that God HAS ASSURED HIM that these dreams will come true.

Claims that he never used to believe in dreams before, but now HE DOES.

When asked if he knew the ladies name, replied that her first name was"Lily" -he does not know her other name. She is about 5' 5" , quite fairly well proportioned, a little more "embonpoint" than our patient has. Believes also that God has told this lady about him (patient) and that when they meet they will readily recognize each other.

MARCH 23.

Had another dream last night -his late wife appeared to him, and told him that she approved of the selection he had made, and of his marrying this lady. Dreampt the lady's name was Miss Lilian G Titus; an advertisement over her signature is liable to appear in the St.Paul Pioneer Press, perhaps even to day. He says it is more the money this lady has ($100,000) that he is after, as he wants that.

twitchings - yes.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Died at 73 yrs. (old age).

Father or Pat. Relations, Father dead - (dissipated.)

Brothers or Sisters, one brother, good health; Sisters none (2 dead - died young)

Chas H Haupt
Autograph Aug 30/97

N D

4

+ 7 Days.

General paresis

EXAMINATION ON ADMISSION—(Continued.)

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Evd ly.

MENTAL AC...

Clear or Confused,

Quick or Sluggish, Lo...

MEMORY:

Past Events, probably fa...

Recent Events, Poor probably; then...

Special Subjects,

PERCEPTIVITY:

Alert or Dull, } ordinary observation, poor probably;

Correct or Illusive, } realizes own condition.

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

...STATE:

Calm,

...ferent,

Exalted,

Depressed, Cries; Emotional at times.

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Has heard music

ILLUSIONS:

CONVERSATION: On questioning

Coherent or Incoherent, Coherent.

Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:

Drank to excess lately. Examination made of patient while in bed, as he is on sick ward. While testing patellar reflex, muscles of legs went into irregular spasmodic action. Skin seems hyperaesthetic - plantar reflex excessive, followed by quite violent spasmodic contraction of the leg; Says about a year since he felt his brain was affected; feel a "cracking" in it. "heard music" - These he deemed hallucinations - Has, he claims, had spells of unconsciousness - were quite frequent - did things afterwards could not recall having done them - Wondered at his having done them - Says he lost power of concentration.

...ICS.

...(60+) NUTRITION, Good

...Promptness Movement, rather jerky

...about normal

...lation, Yes

...s shut, sways badly.

...ue, Marked, rather coarse

Facial Muscles, Twitching considerable of lips & face. General,

REFLEXES, Patellar, appear much exaggerated and spasmodic. Ankle Clonus

Other Reflexes, Plantar excessive

ARTICULATION, Hesitating, Explosive Slurred, deliberate

FACIAL EXPRESSION, Dull

SENSIBILITY, probably hyperaesthetic

HEART, No murmurs; Sounds not very strong.

LUNGS, Seem Good.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, Four several days (on admn)	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 87 (on admn) - 73 on ex^n today	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow - Vertigo, ?

Twitchings - Yes.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Died at 73 yrs. (old age)

Father or Pat. Relations, Father dead - (dissipated.)

Brothers or Sisters, one brother, good health; Sisters none (2 dead - died young)

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 inches WEIGHT, 147 1/2 lbs. (usual 160+) NUTRITION, good

WOUNDS OR ABNORMALITIES, none; tattoo left arm

TONGUE, Tremors, marked, rather coarse Coatings, yes, quite marked now Promptness Movement, rather jerky

PUPILS, Equality, Equal Size, about normal

Response Light, yes Accommodation, yes

SIGHT, Impaired; wears glasses

HEARING, Impaired

COORDINATION, Arms, finger to nose, Eyes Shut, poor;

Legs, standing on foot, poor; standing, Eyes Shut, sways badly.

TREMORS, Hands, Tongue, marked rather coarse

Facial Muscles, twitching considerable of lips & face General,

REFLEXES, Patellar, appear much exaggerated and spasmodic. Ankle Clonus

Other Reflexes, Plantar excessive

ARTICULATION, Hesitating, explosive Slurred, deliberate

FACIAL EXPRESSION, Dull

SENSIBILITY, probably hyperaesthetic

HEART, no murmurs; sounds not very strong.

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HABITS, Dirty,	Clean, yes	Careless,
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CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow - Vertigo, twitchings - yes.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

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Father or Pat. Relations, Father dead - (dissipated.)

Brothers or Sisters, one brother, good health; Sisters none (2 dead - died young)

1894
nos & 7 days.
m' General paresis

MISSION.
CS.

Evd by D.

MENTAL ACT.

Clear or Confused,

Quick or Sluggish, D.

MEMORY:

Past Events, probably fa

Recent Events, Poor probably; thi hours ago.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, } ordinary observation, poor probably;

Correct or Illusive, } realizes own condition.

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

TIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Cries; Emotional at times.

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Has heard music

ILLUSIONS:

CONVERSATION: On questioning

Coherent or Incoherent, Coherent.

Voluble or Reticent,

Drank to excess lately. Examination made of patient while in bed, as he is on "sick ward". While testing patellar reflex, muscles of legs went into irregular spasmodic action. Skin seems hyperaesthetic - plantar reflex excessive, followed by quite violent spasmodic contraction of the leg; this about a year since he felt his brain was affected; felt a "cracking" in it. "heard music" - These he deemed hallucinations - Has, he claims, had spells of unconsciousness - were quite frequent - did things afterwards could not recall having done them - Mother at this having done them - Says he lost power of concentration.

1892

This patient was brought here by P. N. Kirk, deputy and Rev. A. Haupt (Cousin), with the following history. Has been intemperate; otherwise thought moral; form of this attack is acute; supposed cause, intemperance, sudden loss of wife & financial troubles; no accompanying bodily disorder; first symptoms manifested about 3 weeks ago. Insanity is now manifested in that he imagines everybody enemies. Has shown no disposition to injure others, except threats. Is not suicidal; not disposed to filthy or destructive habits. Do not think any peculiarities manifested before symptoms of insanity appeared. No restraint or confinement has been employed, except to watch him; it requiring two men, at times, to handle him. Sedatives and narcotics have been administered but with no permanent effect.

Aug 23 Aug 23/92. Received at 7 P.M. Is quiet. Ate a quite hearty supper, after admission.

" 24 Aug 24/92. Rested well and slept 8 hours last night. Am. Remained in bed this morning. Complains of back-ache and headache. When asked to spell his name, attempted and toned not doso. Cousin reports that he had paralysis of speech for a time, within the past week. Has had nervous twitchings for over one year. Ate a good breakfast. Is constipated & was given rectal injections of glycerine & water.

" 25 Was restless for a couple of hours, sleeping 5 hours last night. Napped some during the day. Keeps his bed by day. —

" 26 Aug 26/92. Restless a couple of hours, sleeping 5 hours, last night.

" 27 Aug 27/92. Restless 2 hours, sleeping 6 hours last night. Was out of bed once. Am. Claims he cannot sleep. Has had a good appetite so far. Was up part of the afternoon.

" 28 Aug 28/92. Slept 7 hours last night. Very slightly restless. Am. Complains of quite a severe headache and a "swimming sensation" - has no vomit or nausea. Also has back-ache. Sees black specks before his Eyes. Complains bitterly of the pain. Was up on the hall part of the afternoon.

" 29 Aug 29/92. Was out of bed last night; slept but 5 hours.

" 30 Aug 30/92. Slept 7 hours last night. Was up and dressed, nearly all day to day. Has eaten well nearly all the time, since coming here.

" 31 Aug 31/92. Slept 7 hours & rested well last night. Up on the hall, feeling bright & cheerful.

Sep 5 Sep 5/92. Has been somewhat restless on several nights, but has slept on the whole, quite well. Has been somewhat bothered with constipation. Weight 131 pounds. Pulse 76.

" 7 Sep 7/92. Was last night, unusually restless; out of bed 3 times, dressing; slept 2 hours.

" 9 Sep 9/92. Has rested and slept well, the past 2 nights.

" 10 Sep 10/92. Was restless, out of bed last night, sleeping but 4 hours. Am. Was up in the night & dressed, but has no memory of it this morning. Told the attendant he does not feel well and slept badly, and the Dr. that he feels quite well and is gaining. Was caught by the nurse in the act of pulling a long string or tape out of his pocket, while, in fact, there was nothing in his hand while performing the motion. Has continued to be up daily and has been out walking several times & once to a dance once.

" 11 Sep 11/92. Caught in the illusionary act of putting things in his pocket.

" 12 Sep 12/92. Writing letters to his friends to day.

" 17 Sep 17/92. Went to the Fair this week & enjoyed it.

" 24 Sep 24/92. Has been almost uniformly restful and has slept well at night.

" 30 Sep 30/92. Continues restful and to sleep well at night. Even when most restless, has never

DETAILED HISTORY OF SICKNESS OF MR. Dr Chas Haupt
DIAGNOSIS .

DATE	HOUR	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	OTHER DATA
Aug 23	8		56		22			admitted by Mr Howe 7 P.M. ext hourly temp
24	6	78	70		20		986	Says he slept well till down and then awoke
								with severe pain in the lumbar region
								ext hourly temp & pulse - dressed and sat on hall
								When asked to spell his name tried and could
								not do so.
	6		80		20		988	bowels moved 6 P.M.
25	6	78		22		99		more quiet. Eats well. Takes short walks
	6		70		20		994	Conditions unchanged
26	6	70		19		98		appetite not so good
	6		74		21		996	
								Dressed and on hall 2 P.M.
27	6	74		20		994		appetite good. had 4 good stools during day
	4		82		18		998	in bed wishes to be left alone
28	6	72		20		99		Bowels moved 8 am dressed and up 4 P.M.
	6		74		18		994	Says he feels much better & stiff. Well if approached
29	6	72		18		99		Eats well dressed and on hall
	6		66		18		1008	up and dressed 7 hours
30	6	78		20		988		eats well bowels not moved
	6		84		20		99	up on hall feels bright & cheerful
31	6	86		21		988		" " eats well bowels not moved
	6		68		20		99	Says he feels well
Sept 1	6	78		16		994		
	6		86		22		996	bowels not moved
2nd	6	80		22		99		Bowels not moved appetite not so good
3	6	82		21		994		Bowels moved very freely 3 P.M. after taking oil
	6		86		20			" 230. Appetite good
4	6	84		22				Bowels moved 8 am
	6		84		21			Seems low, strong and kinder quiet to be with
5	6	116		20				was out rolling & walked out & felt better
	6		86		20			on hall cheerful converses well
6	6	104		21				on hall
	6		72		20			No movement of bowels
7	6	84		21		99		" " "
	7		114		20		982	Went to down a last evening he was much flowed
8th	6	102		20		984		quiet and on hall
	7		88		20			Condition same. bowels not moved
9th	6	98		20				has been muttering all forenoon
	6		108		20	98		" " "
10	6	88		20				says he does not feel good. Pleads to be left
	6		84		21			Condition same. Bowels low irregular illusion
								of pulling a long string or tape out of his pocket
								Showed much fun out when he now he was watched
								Said nothing about it. Conversed
11th	6	114		22		988		More cheerful talks Roosevelt
	6		92		21			Illusion of putting away imaginary objects in
								his pocket on two occasions
12	6	88		22				Quiet writing letter to friends.
	6		96		20			No action of bowels.
13	6	98		20				Bowels moved 7 am
	6		94		21			Condition same
14	6	92		20				Appetite good.
	6		86		22			Took a walk out side
15	6	88		20				is well and on hall

deteriorated very markedly.

April 4/93. Pt 145 lbs. Pulse 84. April 9/93. Thinks his & go shortly. Letter & conduct show pathemic mixed with delusions.

(carried to 136)

1892 This patie
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Aug 23 Al
" 25 C
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dresses,
slept badly, aim
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" 17 Sep 17/92. Went to the Fair this week + enjoyed it.
" 24 Sep 24/92. Has been almost uniformly restful and has slept well at night.
" 30 Sep 30/92. Continues restful and to sleep well at night. Even when most restless, has never

been noisy at night. From date of admission to 15th inst, clinical record of his condition was kept by the nurse. Temperature was normal, except one evening when there was a slight feverishness (100.8). Pulse frequently somewhat accelerated, and on 4 or 5 occasions quite decidedly so, being as high as 114 and 116 without apparent cause. Respiration was not noticeably disturbed (see attached record). Patient kept his bed for some time after coming here, but has been up and around daily, since the 30th ulto, seeming fairly strong. At first complained of aches and pains and general bad-feelings; has lately been quite uniformly cheerful and has claimed to be feeling very well indeed. Dresses self, and attends to his personal wants. Is clean, tidy, and well-behaved. Free and pleasant in conversation. Has engaged in some quite excited political arguments. A quite marked tremulousness of the face and lips is quite noticeable almost at all times during conversation.

Oct 14/92 Oct 14 92. Wt 149½ (140th 9½) lbs. Oct 29/92. Sometime ago, moved to A2; seems quite contented and happy. Is quiet and sleeps well at night. Bodily health improved.

Nov 1/92 Nov 2/92. Wt 151 lbs. Pulse 80. Nov 15/92. Complains of tendency to constipation + of nervousness. Does not sleep well, due, in part, to disturbance of room-mate, patient thinks.

" 30 Nov 30/92. Seen A3. Is quiet + apparently rests + sleeps quite well. Writes and reads a good deal. Feels well. Has been overheard talking to himself; expresses no definite delusions.

Dec 5/92 Dec 3/92. Wt 151½ lbs. Pulse 81. Dec 31/92. Is uniformly quiet at night, resting and sleeping well. Reads almost constantly. Goes out for a walk about once a day. Has a parole. Writes occasional letters. Seems fairly contented. Marked tremor of face persist.

1893.

Jan 3/93 Jan 3/93. Wt 150½ lbs. Pulse 99. Jan 25/93. Fairly quiet and restful at night apparently. Shows rather more pronounced mental confusion. For 2 or 3 days, was very excited, almost beside himself with excitement, over a dream which he had concerning his own case. Telling it to almost every one whom he met. In his dream says "God told him to do certain things" Patient seemed inclined to act upon the suggestions of the dream.

Feb 3 Feb 3/93. Wt 144¼ lbs. Pulse 110. Has been losing in weight the past 2 months, without apparent
" 11 cause, as his appetite is good + he says he feels very well, indeed. Feb 24/93. Com. Complains of
" 25 pains in his joints, today. Thinks it is rheumatism. Feb 25/93. Since the "spell of excitement" in the latter part of January (noted above) patient has been more calm + rational in behavior, though he still shows quite marked mental confusion at times. Uniformly rests + sleeps well at night. By day, reads, or makes an appearance of so doing, almost continually. Writes letters to relatives + friends quite often. Says he never felt better in years than he does now, + is laying great plans for his future. Sometime ago, was very anxious she allowed to go, but is contented, he says, now to remain a while longer. Complains some of constipation still.

Mar 2/93 March 2/93. Wt 146½ lbs. Pulse 100. March 10/93. See attached copy of a "dream."
" 30 March 30/93. Is quiet at night + seems to sleep fairly well. Still has a parole + goes out walking daily. Keeps fair habits. Reads a great deal. Does not appear to have deteriorated very markedly.

April 4/93 April 4/93. Wt 145½ lbs. Pulse St. Aff'l 9/93. Thinks he is to go shortly. Letters + conduct show gentle mindedness and delusions.

(carried to 136)

Personal and Medical History of Alfred Morse

Whole No. 3113

Residence, Austin, Mower County, Minnesota

Date Admission, 25th August 1892.

Admitted by, Dr. Baker Hour, 7.20 P.M.

How Sent, S. S. Washburn, J of P. County of Mower

Sex, Male

Age, 80 years, 23rd June 1892.

Civil Condition, Married

Children, no children

Age Youngest Child,

Occupation, Retired Minister of the Gospel

Degree Education,

Profession Religion, He is

Habits, Strictly temperate + moral

Nativity, Bath, Maine, Lincoln County

Physicians Committing, O.W. Gibson & W.L. Hollister

Correspondents, Mrs E.M. Morse (his wife) Austin, Minn

No. for Year, 25

Insane Relatives, none (don't know of hereditary insanity)

Cause Exciting, old age and business troubles

Cause Predisposing,

Form, Senile Dementia

Accompanying Bodily Disorder, Nothing except what is ordinary to old people

Suicidal or Not, Not

Date of this Attack, some three months ago.

Duration, some three months

No. of Attack, 1st

No. of Admissions,

Age First Attack, about 80.

Time of Leaving, Aug. 13th 92

Time in Hospital, 7 mos. 18 ds.

Result, Improved.

EXAMINATION ON ADMISSION.

Exd by Dr. Baker 30th Aug/92

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, somewhat confused

Quick or Sluggish, very active

MEMORY:

Past Events, probably good

Recent Events, " "

Special Subjects,

PERCEPTIVITY: ordinary observation good. Answers

Alert or Dull, questions fairly well. Does not probably

Correct or Illusive, realize his condition

REASONING POWER: Is in exercise

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

(see notes page 123)

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, and emotional

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Probably none

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, incoherent in the long run but each sentence complete –

Voluble or Reticent, Very voluble

Personal and Medical History of Alfred Morse

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 inches WEIGHT, 141 pounds NUTRITION, Not very good

WOUNDS OR ABNORMALITIES, Scar on right side of upper lip: abnormalities, none –

TONGUE, Tremors, some coarse Coatings, slight, moist Promptness Movement, prompt, ratha irregular

PUPILS, Equality, Equal Size, abnt normal

Response Light, some Accommodation,

SIGHT, fairly good (for old age) –

HEARING, very much impaired; quite deaf.

COORDINATION, Arms,

Legs, not tested

TREMORS, Hands, Tongue,

Facial Muscles, General,

REFLEXES, Patellar, Equal, abnt normal.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, ~~good~~.

FACIAL EXPRESSION, Normal

SENSIBILITY, probably normal

HEART, Sounds rather feeble + accelerated.

LUNGS, Seem good.

Aug 27/92 D.M. EXAM. URINE, Cola yellow; reaction acid; Sp. gr. 1024; albumen none; urea –

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, Yes	Irregular,
APPETITE, Good,	Medium,	Poor, Yes
SLEEP, Good,	Poor,	Irregular,
PULSE, 96. arteries somewhat stiff	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1892. This patient was brought here by A. Mollison, Sheriff, and W. T. Mantorville, Deputy, with the following history. Is strictly temperate & moral. Supposed cause of this attack, is old age and business troubles; form is exalted; no accompanying bodily disorder except what is ordinary to old people. First symptoms were manifested about three months ago, by unwise pecuniary dealings. This is the first attack. Insanity is now manifested religiously and pecuniarily. Has not shown any disposition to injure others; gets very much excited, when opposed, but has not offered violence. Is not suicidal. Has no disposition to wilfully or destructive. Has not been restrained or confined. Has had no treatment for this mental trouble. Has had some medical treatment for bodily ailments, but has not been seriously ill.

Exm 8/30. Eyes; marked arcus senilis; says he has been subject to rheumatism for some time; did not think anything at all about money until he was 78 years old. "Always could get money when he wanted it; just go to the Post-office and it was there for me" — For 2 years can get money; faster than any man in town; Can get 600 a year from his hennery. Indulged in business he had never tried in, and can now do more in one day than then in 1 month. Very few men know how to plant a strawberry plant. (Goes on now at great length about his business). And "they thought him crazy" — Then suddenly changes from this business to religion again; finds fault with the people; for rebuilding the Church, for going to horse-races and betting, for patronizing the Saloons; thinks the Minister is a man without religion & is supremely selfish — thinks the bottom of the whole trouble — to get rid of himself (pat) he was sent here to Hospital; the minister will not visit the poor sick. Has the power of reading a man through & through by looking at him, at the first meeting — Then suddenly bursts into tears; telling about an old man, an acquaintance, who was separated from his wife & left his family.

On admission, had been brought here under false pretences; deceived as to where he was going. On reaching the ward, at bed time refused to retire and had to be undressed by force.

Aug 26 Aug 26/92. Restless an hour, sleeping 8 hours, last night. Am. Realizes where he is and talks quite
" 27 freely about his condition and about his being brought here. Aug 27/92. Rested well and slept 7 hr last night. Am. Eats quite poorly. Talks very freely, even garrulously. Rehearses again the story told yesterday of his work at Austin, in which he condemns the people of gambling, horse-racing and drunkenness; charges the Pastor of the Church with being a dead man, spiritually; he, as patient, recognized this fact, instantly that the pastor came in charge of the Church. Claims that he did not go to the Court-house or the Judge come to him or that the saw no Doctors; i.e. he had no trial or
" 28 examination. Aug 28/92. Passed a quiet night, sleeping 7 hours last night. Does not eat well. Has
" 29 been kept in bed until this noon, when he was permitted to dress & get up. Aug 29/92. Slept 8 hours last night. Got up and dressed, at rising hour; remains in his room reading his Testament.
" 30 Refuses food. Speaks only when spoken to and is irritable. Aug 30/92. Rested well and slept 8 hours last night. Eats a little better today. Is constipated but says he does not need medicine. —
" 31 Aug 31/92. Slept 7 hours last night. Eats poorly. Is constipated. Pm. Eats but very little: less excitable.
Sep 1 Sep 1/92. Restless for a couple of hours, sleeping 8 hours, last night. Refuses food; but ate a little at supper. Declared this forenoon that he would not eat until released; but was made to understand by the Dr that he would be compelled to feed him forcably if he (patient) did not take food —
" 2 Sep 2/92. Slept 7 hours last night. Ate a quite good breakfast. Expressed the feeling that the Dr.

1892

Sep 3
" 5/6
" 8/9
" 10
" 11/12
" 16/23
" 24

" 30

Oct 4/9

Nov

" 30

Dec 5

1

DETAILED HISTORY OF SICKNESS OF MR. Alfred Morse
DIAGNOSIS .

DATE: 1892	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
Aug 26				90		18			
" 27			86	90	20	18			
" 28			88	100	20	22			
" 29			110		21				
" 30			92	92	22	20			
" 31			96	84	22	22			
Sep 1			88	80	21	20			
" 2			84		21				
" 3			82	84	22	20			
" 4			88	88	20	20			
" 5			82	80	21	22			
" 6			78	80	22	20			
" 7	7.00		100		24				7 am. Rested talkative restless, walking the hall very greatly
"	10.00		89						
"		7.00		90		22			
" 8	6.		92		22				
"		7.00		92		21			
" 9	6.	8	94		22				
"		6		92		22			
" 10	6.		92		22				
"				88		20			
" 11			108	88	24	22			
" 12			78	86	20	22			
" 13			80	86	20	20			
" 14			92	84	20	21			
" 15			72	72	20	21			
" 16			76	72	23	22			
" 17			92	64	22	22			
" 18			84	70	23	22			
" 19			88	66	22	22			
" 20			74	84	20	22			
" 21			76	66	20	20			
" 22			100		26				Does not feel so well this morning
"				96		22			
" 23			72	70	21	20			
" 24			74		22				

Opens former more disturbed state. Bodily health seems fairly good. Is not troubled now with Constipation. —

Dec 5/92. Wt 140 pds. Pulse 66.

(carried to 100)

Personal and Medical History of *Alfred Morse*

...in any
...ence). Is not
...confined. Has had
...ery ailments, but has not

...ation for some time; did not think any-
... Always could get money when he wanted it;
... for 2 years can get money; faster than any man in town;
...dulged in business he had never tried in, and can now do more
... very few new know how to plant a strawberry-plant. (Goes as near as
...uess). And "they thought him crazy" - then suddenly changes from this business
...nds fault with the people; for rebuilding the Church, for going to horse-races and
... patronizing the Saloons; thinks the minister is a man without religion & is supremely
... - thinks the bottom of the whole trouble - to get rid of himself (pat) he was sent here to Hospital;
the minister will not visit the poor sick. Has the power of reading a man through & through by looking
at him, at the first meeting - then suddenly bursts into tears; telling about an old man, an acquaint-
-ance, who was separated from his wife & left his family.

On admission, had been brought here under false pretence; deceived as to where he was going. On
reaching the ward, at bed time refused to retire and had to be undressed by force.

Aug 26 Aug 26/92. Was restless an hour, sleeping 5 hours, last night. Am. Realizes where he is and talks quite
" 27 freely about his condition and about his being brought here. Aug 27/92. Rested well and slept 7 hs
last night. Am. Eats quite poorly. Talks very freely, even garrulously. Rehearses again the story
told yesterday of his work at Austin, in which he condemns the people of gambling, horse-racing and
drunkenness; charges the Pastor of the church with being a dead man, spiritually; he, as patient,
recognized this fact, instantly that the Pastor came in charge of the Church. Claims that he did
not go to the Court-house or the Judge come to him or that the saw no Doctors; i.e. he had no trial or
" 28 examination. Aug 28/92. Passed a quiet night, sleeping 7 hours last night. Does not eat well. Has
" 29 been kept in bed until this noon, when he was permitted to dress & get up. Aug 29/92. Slept 8
hours last night. Got up and dressed, at rising hour; remains in his room perusing his Testament.
" 30 Refuses food. Speaks only when spoken to and is irritable. Aug 30/92. Rested well and slept 8 hours
last night. Eats a little better to day. Is constipated but says he does not need medicine. ——
" 31 Aug 31/92. Slept 7 hours last night. Eats poorly. Is constipated. Rx. Eats but very little: less excitable.
Sep 1 Sep 1/92. Restless for a couple of hours, sleeping 6 hours, last night. Refuses food; but ate a little at
supper. Declared this forenoon that he would vote at once released; but was made to understand by
the Dr that he would be compelled to feed him forcably if he (patient) did not take food —
" 2 Sep 2/92. Slept 7 hours last night. Ate a quite good breakfast. Expressed the feeling that the Dr.

right in the matter of his eating and has evidently concluded to take food. Sep 3/92. Eats quite
ll now. Is still quite obstinately constipated. Sep 5/92. Weight 131 pounds. Pulse 76. Sep 6/92 Refused
breakfast. Sep 8/92. Eats fairly well. Sep 9/92. Is troubled with obstinate constipation. Refuses
" 10 medicine by mouth. Takes rectal injection with remonstrance. Sep 10/92. Has been noisy, singing and
" 11/12 preaching. Sep 11/92. Is nervous and very quarrelsome and abusive. Restless all day. Sep 12/92. Is
" 13/23 more quiet today. Sep 13/92. Continues comparatively quiet. Sep 23/92. Continues comparatively
" 24 quiet and well-behaved. Feels quite well, as a rule. Takes food regularly. Sep 24/92. From date of
admission to present date, Pulse and respiration have been taken twice a day. During the first
week pulse was regularly somewhat accelerated; it gradually came down to normal, with oc-
-casional accelerations. On 3 or 4 occasions, was from 100 to 120. Respiration but little disturbed:
" 30 (see attached records). Sep 30/92. Has continued quiet, restful and to sleep well at night,
since the early part of this month. Has also continued to take food regularly and in sufficient
quantity since the above note in that subject. Upon arrival here, he recognized where he was; com-
-plained of the injustice of being sent here, pleading his own years and the age & feebleness of
those dependent upon him as the reason why he should be at home. Stated also his belief
that he was sent here to be got out of the way by those whom he condemned, viz the Pastor of the
Church and the people of Austin. Complained of being shut in from freedom of open air
exercise; claims that he has treated his bodily ailments, constipation and other minor
troubles, not by medicines but by certain exercises. Hence, refused medicine, or took it
reluctantly & complained of the lack of opportunity for these exercises. Had to be con-
-strained, on several occasions, to do things which were necessary here, for example,
the retiring at a certain hour, in which he had perfect freedom of choice before coming
here. These conflicts between his wishes and our requirements led to some complaints
on his part, which he has given expression to in some of his writings. On a few
occasions, has been excitable & resisting; at times, loudly talkative, singing and
preaching; but has lately been quite uniformly quiet and well behaved. At all times,
clean and tidy. Reads a good deal and writes quite often. Quite active physically. Has
written letters to his wife, some of them of length, in which he has given expression to delusive
-ed accounts of his absurd schemes of building a house &c.

Oct 4 Oct 4/92. Wt 129½ pds. Pulse 72. Oct 29/92. Is uniformly quiet, apparently resting & sleeping
" 29 well at night. Is quiet and apparently mind rational. Reads a good deal. Seems to
realize why he was sent here. Is reported as having a very good appetite but
has lost in weight.

Nov 2 Nov 2/92. Wt 135 pds. Pulse 66. Has put upon medicine, on account of loss of weight, which
he consented to take; formerly refusing strenuously to take any medicine.
" 30 Nov 30/92. Is quiet, resting & sleeping well at night. Goes to Chapel; has behaved
sensibly there. Reads much & converses freely. On one or two occasions has shown some signs
of his former more disturbed state. Bodily health seems fairly good. Is not troubled now with
constipation. ——

Dec 5 Dec 5/92. Wt 140 pds. Pulse 66.

(carried to 100)

Personal and Medical History of Henry Mitchell

Whole No. 3115

Residence, Austin, Minn

Date Admission, 30th August 1892.

Admitted by, Dr Phelps Hour, 730 PM

How Sent, S.S. Washburn, J of P, County of Mower

Sex, male

Age, 80

Civil Condition, Widower

Children, yes; two living

Age Youngest Child,

Occupation, None

Degree Education,

Profession Religion, not a church member

Habits, Good

Nativity, N. Y

Physicians Committing, W. H. McKenna & O. W. Gibson

Correspondents, Lynds S. Mitchell (son)
Austin, Minn

No. for Year, 27

Insane Relatives, None; Insanity not hereditary

Cause Exciting, unknown

Cause Predisposing,

Form, Senile Dementia

Accompanying Bodily Disorder, none known of

Suicidal or Not, not

Date of this Attack, 2 or 3 years ago - Seems continuous

Duration, 2 or 3 years

No. of Attack, not the 1st

No. of Admissions,

Age First Attack, about 77.

Time of Leaving, 23rd November 1893.

Time in Hospital, 1 year 2 mos - 23 days.

Result, Died. Exhn in Senile Dementia

EXAMINATION ON ADMISSION.

Exhibit Dr Baker Sep 2/92. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, very much confused

Quick or Sluggish, Considerable activity

MEMORY: almost entirely gone

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY: almost gone

Alert or Dull,

Correct or Illusive,

REASONING POWER: almost gone

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent, yes

Exalted,

Depressed,

DELUSIONS: various

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: ?

ILLUSIONS: ?

CONVERSATION:

Coherent or Incoherent, Incoherent

Voluble or Reticent, talks almost constantly to himself

GENERAL DESCRIPTIVE REMARKS:

Has marked senile senilis; left pupil covered with dense opacity; a gutta in right eye; in anterior Chamber. Is extremely demented; probably not at all recognizing where he is or who those are about him. Has no memory at times & probably does not carry the identity of persons in his mind. Is restless, fussing, talking almost constantly to himself; frequently repeating to himself that "he is wanting something to eat"; "that he is hungry." Is feeble, wrinkled & sallow; walks with difficulty. Slobbers food on his clothes; has to be guided when it is desired to have him moved about. Resists being moved.

Personal and Medical History of Henry Mitchell

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8 inches WEIGHT, 144½ pounds NUTRITION, Poor

WOUNDS OR ABNORMALITIES, probably none - scar on vertex: Abnormalities, inguinal hernia & hydrocele.

TONGUE, Tremors, slight Coatings, slight Promptness Movement, slow

PUPILS, Equality, "see notes" Size, about normal

Response Light, ? Accommodation, ?

SIGHT, Impaired

HEARING, Much impaired

COORDINATION, Arms,

Legs, not tested

TREMORS, Hands, Tongue, slight

Facial Muscles, General,

REFLEXES, Patellar, seem to be gone

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART, 2nd sound loud & accentuated; over heart, sounds are faint and distant.

LUNGS, probably good.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, yes	Clean,	Careless,
BOWELS, Normal, probably	Constipated,	Irregular,
APPETITE, Good,	Medium, yes	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, previous attack? ONSET GRADUAL OR SUDDEN, slow

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1892

This patient was brought here by his son — .. ———— with the following history. Habits are good; cause of attack is unknown; form, chronic and paroxysmal; first symptoms of disease manifested 2 or 3 years ago; this is not first attack; in 1890 (May) was sent to this (Rochester) Asylum. Insanity is now manifested by loss of memory and paroxysmal attacks of violence. Has, not this time, shown any disposition to injure others. Is not suicidal. Think not inclined to filthy or destructive habits; not subject to any bodily disease. For the last 2 months has been under restraint. Has just returned from a visit and knows everyone.

Augᵗ30 Aug 30/92. On admission, is found to be a very weak, feeble wrinkled old man. Has inguinal hernia + hydrocele. Was put in Aᵗʰ. Aug 31/92. Has very quiet and slept nearly all last night. Am. Pulse 62. Pm. Pulse 68. Is quietly-behaved. wandering about ward in an aimless, tottering way. Has to be guided when it is desired to move him about. Does resist.

Sept 1 Sept 1/92. Was restless last night, + noisily talkative; and slept but 4 hours. Am. Pulse 62. Sits quietly; talks almost incessantly to himself. Pm. Pulse 65. Sept 2/92. Again quite restless last night; getting up, and scattering his bed clothes about the room; slept but little; Am. Pulse 64. Behavior about as usual. Eats well. " 3 Pm. Pulse 54. Was examined to-day in office; (see particulars). Sept 3/92. Was very restless and noisy " 5 a great portion of last night, sleeping but 3 hours. Am. Is about as usual to-day. Sept 5/92. Wt 144 lbs, " 12 Pulse 62. Sept 12/92. Has been, nightly, more or less restless, noisy + out of bed; talking a great deal Oct 4 loudly, and sleeping but from 2 to 4 hours each night. Oct 4/92. Weight 148 pounds. Pulse 70. — " 15 Oct 15/92. Continues somewhat restless + noisily talkative at night, but, on the whole, seems to have been " 20 sleeping some better during past month or so. Conduct + behavior by day, unchanged. Oct 20/92. Struck a " 22 harmless fellow-patient to-day. Oct 22/92. Again struck his same patient to-day. Oct 30/92. Since " 30 coming here, appetite has been quite good, and bowels have been about normal.

Nov 2 Nov 2/92. Wt 157 pounds, Pulse 67. (Has made a large gain in flesh, during the past month.). — " 8/13 Nov 8/92. Fell out of bed last night. Nov 13/92. Is restless to-day, talking to himself constantly; is " 16 incoherent and confused. Destroys his clothing. Is in bed; naked. To-day, transferred to Cᵗʰ — Nov 16/92. Has remained in bed the past 3 days. Is up to-day. Nightly, continues restless and noisy; Dec 5 also is quite destructive at times; yet, as a rule, appears to be resting and sleeping somewhat better. — Dec 5/92. Wt 151½ pounds — (some loss in weight); Pulse 58. Recently went back to bed, and morning " 16 complaining of headache. Dec 16/92. On a few nights (since last note hereon) has been restless and quite noisy for from 4 to 5 hours at night, sleeping only 3 or 4 hours: but on the majority of the nights in the past 4 weeks, patient has (though still somewhat restless) slept from 6 to 8 hours, each night. " 27 Dec 27/92. Was to-day moved to Aᵗʰ. 1893

Jany 1 Jan 1/93. Was found to troublesome + so much inclined to be destructive, also so dirty in his habits " 3/16 that he was, to-day, sent back to Cᵗʰ — Jan 3/93. Wt 152 pounds. Pulse 62. Jan 16/93. Nightly, Continues " 23 restless + noisy, for from 3 to 5 hours, often out of bed, groping about room, + sleeping poorly. Jan 23/93 Fell down on the floor to-day + bruised his face. By day, for some time past + still is restless + uneasy; always poking aimlessly about; eye-sight has failed very much and patient has been growing more weak + feeble. Is noisy; loudly talkative and very troublesome; never goes out walking + has not, for some months. For some time, owing to his very dirty habits, he has been dressed in a canvas-suit. Appetite has continued quite good + bowels normal.

Feb 2/28 Feb 3/93. Wt 146 pounds. Pulse 64. Feb 28/93. Since last note on this subject, with the exception of a few

1893

Feb 28 (cont'd) nights, on which he was very restless, noisy + frequently out of bed, sleeping only from 2 to 3 or 4 hours, he has, on the whole, been more restful and has been sleeping 6 to 8 hours each night. Conduct + behavior, by day, continue about as above described. Is mischievous; going into rooms, if not carefully watched, and throwing the bedding about. Is also destructive + very dirty in habits.

Mar 2/11 Mar 2/93. Weight 140 pounds. Pulse 64. March 11/93. Last night was found at foot of his bed, standing up + pounding on transom of door; fell + bruised his face. March 17/93. Was struck by a " 17 fellow-patient to-day + received a black eye. March 19/93. Has thrown down upon the floor to-day by a " 19 fellow-patient + received a slight cut on head. March 30/93. During the early part of the past 4 " 30 weeks, rest and sleep at night have been much disturbed as patient has been frequently noisy + out of bed, at night, sleeping very poorly; of late has been improving in this respect + has been sleeping fairly well. There is no change in his conduct or behavior by day, except that he is becoming more + more troublesome. — Is also getting, if possible, more dirty in his habits. Eye-sight is failing very fast + perceptibly. —

Apl 4/26 April 4/93. Weight 132 pounds. Pulse 64. April 26/93. He cut his eye to-day, by striking it against " 30 the corner of a letter. April 30/93. Has appeared more restful and has, probably, slept quite well during the past 4 weeks; though still somewhat noisy at night but less so than formerly; and then, only for a short time. Continues very restless + troublesome by day, requiring constant watching.

May 3/20 May 3/93. Wt 125 pounds. Pulse 77. May 20/93. Sleep + rest at night have quite markedly improved and, though patient is still, nightly, more or less noisy and noisily talkative, for an hour or so, yet he has been sleeping 7 to 8 hours, each night, during the past 2 weeks or so. Continues restless + troublesome by day, noisily talkative to self - Is very deaf. Now has very great trouble in moving about, as eyesight is so nearly gone that he has to grope his way about: thus requiring to be constantly watched + cared for, to prevent him from injuring himself and from being mischievous + destructive. For some time, has been unable to attend to his own personal wants. Persists in his dirty habits, and is still clothed in a canvas-suit. Appetite has been exceedingly good for some months past, yet, without known cause, patient has been losing in flesh quite markedly for some time, and month by month. He is, now, very weak and feeble indeed - For months past, has had to be fed. Bowels have " 31 continued quite normal. May 31/93. Has been extremely noisy, restless + troublesome, also destructive, all the month. Talks along in a noisy way to himself. Is dirty in habits.

June 5 June 5/93. Wt 138½ lbs. Pulse 76. Has made a large increase in flesh, during the past 4 weeks " 30 June 30/93. Appetite good. Always has to be fed. Bowels regular. Is very noisy + stubborn; more or less restless nearly all of the time. Has great difficulty in moving about, being nearly blind. Habits are still very dirty. Talks noisily

July 3/21 July 3/93. Wt [illegible] pounds. Pulse 72. July 21/93. Wanders feebly about or sits feebly in chair. Is " 31 totally careless of appearance - Demented. Talk garrulous + not to be understood. July 31/93 Sleep + rest at night about as last described. Eats ravenously; still has to be fed. Bowels regular. Is somewhat stronger. Talks a good deal, noisily; unintelligibly; is always restless, wandering + groping his way about requiring to be constantly watched + cared for. Is a very feeble old man. Habits continue very dirty —

(carried to p 256.)

Personal and Medical History of Andrew Knutson

Whole No. 3118

Residence, Minneapolis

Date Admission, 2nd September 1892

Admitted by, Dr Kilbourne Hour, 7 P.M.

How Sent, J. R. Corrigan, Jof P. County of Hennepin

Sex, male

Age, 40 years

Civil Condition, single

Children, —

Age Youngest Child,

Occupation, Farm laborer

Degree Education,

Profession Religion, Not a church member

Habits, very intemperate

Nativity, Wisconsin (of norwegian descent)

Physicians Committing, J.M. Kistler & E. J. Gibson

Correspondents, Andrew K. Fadnes, Mona, Iowa (a half brother)

No. for Year, 30

Insane Relatives,

Cause Exciting, Intemperance

Cause Predisposing,

Form, Mania — Chronic

Accompanying Bodily Disorder,

Suicidal or Not, not

Date of this Attack, During the past month

Duration, seems continuous

No. of Attack, Not the first (10 yrs ago was in an Asylum)

No. of Admissions,

Age First Attack, 20 years

Time of Leaving, May 8" 93

Time in Hospital, 8 mos. 6 ds.

Result, Recovered

EXAMINATION ON ADMISSION.

Eddy Dr Baker 8th Sep/92 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, fairly active

MEMORY:

Past Events, seems fairly good

Recent Events, some uncertain, but seems fairly accurate.

Special Subjects,

PERCEPTIVITY: ordinary observation fair, but limited

Alert or Dull, Answers questions fairly promptly -

Correct or Illusive, Thinks himself perfectly well -

REASONING POWER: somewhat impaired

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent, somewhat

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: denies

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, talks quite freely when questioned

GENERAL DESCRIPTIVE REMARKS:

Is very intemperate - Admits having been in Hospital at Madison Wis - about 25 years ago - Says that after his leaving here last June, he staid 2 weeks with his brother in Iowa & has since travelled considerable - acknowledges having drunk rather heavily - at one time, claims that he "played insanity" or at least behaved badly on purpose to avoid the workhouse; and he committed here; again he says he did not know what they were going to do with him, until he found himself in the Probate Court when he tried to persuade the Dr + Judge that he was only a little weak, and that he should be sent to the City Hospital - Has Rather a staring, startled expression, + face is suggestive of blankness and lack of flexibility of the muscles of expression - claims that he has headache + dizziness only after heavily drinking -

Personal and Medical History of Andrew Knutson

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10 inches WEIGHT, 153 pounds. NUTRITION, Fairly good

WOUNDS OR ABNORMALITIES, Scar on left arm; abnormalities, probably none -

TONGUE, Tremors, some Coatings, slight Promptness Movement, prompt

PUPILS, Equality, Equal Size, about normal

Response Light, yes Accommodation, yes

SIGHT, Good

HEARING, Right ear seems good; left impaired -

COORDINATION, Arms, finger to nose, eyes shut, fairly good.

Legs, standing on foot, fairly good; standing, Eyes shut, fairly good; turning quickly, some hesitation

TREMORS, Hands, Tongue, some

Facial Muscles, tremor marked on intention General,

REFLEXES, Patellar, unequal; left some exaggerated; right diminished -

Other Reflexes,

ARTICULATION, Hesitating, prompt. Slurred, very slightly, if any; prompt

FACIAL EXPRESSION, Tendency to blankness -

SENSIBILITY,

HEART, Sounds seem normal

LUNGS, Chest 37 in; Expansion 2½ in - lungs seem good.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, yes	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Was here in May & June '91 ONSET GRADUAL OR SUDDEN, Slow probably -

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, mother living - thinks well -

Father or Pat. Relations, Father died of old age -

Brothers or Sisters, 3 halfbrothers living; 2 halfsisters dead; 2 halfbrothers dead - eldest died from results of injury - the other from sickness - cannot not make his water for a long time -

Personal and Medical History of Andrew Knudson

1893 This man was brought here by deputy Frank. A. Kellar, with the following history. Habits are very intemperate; cause of present attack is intemperance; form is acute; during the past month he has been confined in the city lock-up on account of delirium tremens on two occasions. This is not the first attack; 20 years ago he was in the Asylum near Madison, Wis. for 13 weeks; Insanity is now manifested by his inability to resist desire for alcoholic drinks; is weak-minded; has shown no disposition to injure others; is not suicidal; no filthy or destructive habits; has been confined as above; was under medical treatment at City Hospital; good effects; but as soon as he is discharged, he goes to drinking again.

Sep 3 Sep 3/93. Was slightly restless last night for an hour; slept 6 hours. Am. Pulse 80.
" 4 Sep 4/93. Rested quite well and slept 7 hours last night.
" 5 Sep 5/93. Rested well and slept 7 hours last night. Weight 155 pounds. Pulse 78.
" 7 Sep 7/93. Has rested well & slept well, the past 2 nights. Am. Pulse 88.
" 8 Sep 8/93. Passed a restful night, sleeping 7 hours last night. Am. Pulse 72.
" 10 Sep 10/93. Has rested well & slept 8 hours in each of past 2 nights. Am. Pulse 72.
" 14 Sep 14/93. Has been moved to B1. from A2. Calls for some pills to-day for constipation.
Oct 3 Oct 3/93. Continues quiet at night and to sleep well, apparently. Ever since admission, has been quiet, i.e. free from noisiness, clean, tidy, and well-behaved, on the whole. Talks very freely when the Officers go through. Claims, with the utmost confidence, that there is nothing the matter with him, and that he would be all right, if he had not drunk. He has asked to be permitted to go out to work, but has not, so far, been permitted to do so. He assumes this is because it is feared he would run away; but he asserts most positively that he does not think of such a thing, though he has been heard to say that he would run away. He became quite angry with his Attendant because he refused to let him go on to the dance recently. Has written a few letters. Does not read.
Oct 4 Oct 4/93. Wt 150 pds. Pulse 76.
Nov 2 Nov 2/93. Wt 155 pds. Pulse 72. Has gained 13 pounds since admission
" 4 Nov 4/93. Continues quiet, restful, and to sleep well at night. Is clean, tidy and well-behaved. Has been dissatisfied with his attendants, thinking they were "down" on him. Claims that he feigned insanity in order to avoid the Work-house and that there is nothing, and has been nothing, the matter with him. Laughs at the idea of having been out of his head. Has a manner strongly suggestive of mental enfeeblement. Plays games and is fairly active. Bodily health good. Nov 14/93. Had quite severe colicky pains yesterday. Is better today.
" 14
Dec 5 Dec 5/93. Wt 153½ pds. Pulse 76. Recently suffered from moderate cold, chiefly in his head. For some time past has been complaining that the Attendants on B1 were "down" on him, because he would not work & asked to be changed to another hall. One day refused to go out walking as a result of dissatisfaction. Was transferred to B3 for a short time. Upon promising to behave better was again sent back to B1. Dec 7/93. Has cold, sore throat & a cough. —
" 7
1893/4 Jan 3/94 Jan 3/93. Wt 150 pds. Pulse 69. Jan 4/93. Is quiet, resting & sleeping well at night. Plays games & lounges around. Thinks he is greatly misused upon by being kept here.

1893

NAME. Andrew Knudson

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	165	69	1½	....
Feby 3d	163½	71	....	1½
March 2d	158½	80	5	....
April 4th	168	78	....	½
May 3d	173½	65	5½	....

...re. Jan 31/93. Thinks he has the "Grippe" - given medicine ...ges around. Is inclined to be obstinate & lazy, declining to ...inks there is no reason for keeping him here & his answers to

...bed above. There is probably some permanent mental ...spell this morning, Crying & complaining & was transferred from

...w B3 since the transfer; the exact nature of the spell is not ...g of despair or a more distinct spell of insanity.
...behaved. Has not entered any protest about being kept on B3 ...d. May 8/93. Has continued about as usual. Lately, ...well willingly - Was today permitted to go to friends in Iowa.

Discharged May 3rd 93

1893 cont'd

Edward McCarthy

From 1st.

Aug 5 Is somewhat better than he has been. Is a little ugly, at times, but if left alone is all right. Talks
" 19 quite rationally. Works some in ward. Habits are clean. Aug 19/93. Struck a fellow-patient (W. Moses) today,
Sep 2/30 Causing his nose to bleed. Sep 2/93. Wt 147 pds. (an increase of 9 pds). Pulse 114. Sep 30/93. Appetite good; bowels normal. Quietly behaved. Has changed some, in that he now is incoherent & does not work any, at present, as he says he does not feel well. Habits still clean.
Oct 2 Oct 2/93. Weight 138 pds. (a loss of 9 pds). Pulse 104. —
" 2/30 Oct 30/93. Pulse 124. Tem. 99.6. Oct 23/93. Pulse 124 Tem. 99.4. Oct 31/93. Bowels regular. Appetite good.
Nov 1 Well-behaved. Talk incoherently still. Habits clean. Though his pulse is quite high, his temperature does not seem to rise, as it did, in the past. Nov 1/93. Wt 144 pds. (again of 6 pds). Pulse 126. —
" 27/30 Nov 27/93. Visited by brother, today. Nov 30/93. Appetite good; bowels regular. Behaves quiet. Talks quite rationally - appears somewhat imbecile - Does not work any. Habits are clean. —
Dec 31 Dec 4/93. Wt 141½ pds (a slight loss). Pulse 96. Dec 31/93. Keeps about the same. Complains, occasionally of pains in his stomach. —
1894 Jan 2/9 Jan 2/94. Wt 135 pds (a loss of 6½ pds, in the past month). Pulse 146. Jan 9/94. Appetite is poor. Behaves dull and stupid; sits in one place all day. Is apparently, failing in health. —
" 16 Jan 16/94. Was, today, transferred to 62 (the "sick ward"). — Put to bed, there. Coughs a great
" 18 deal & raises phlegm; also complains of pain in left lung. Jan 18/94. Ate but little breakfast.
" 23 Sleeps a great deal during the day. Complains of stomach bothering him. Jan 23/94. Visited by
" 26/31 mother, today. Jan 26/94 Visited by Father Riordan. Jan 31/94. During last half of this month, behas been sleeping, in the average, only about 5 hours, nightly. Appetite is fairly good; bowels are regular. Has some quite severe "coughing spells", at times. —
Feb 1 Feb 1/94. Wt (in underclothes) 110½ pds. (a loss of at most 17 pounds in flesh in the past month)
" 10 Feb 10/94. Still coughs a great deal & raises phlegm. Sleeps a good deal by day. Talks fairly rationally
" 15 at times - Feb 15/94 - Sleeps in the average only about 5 hours, nightly, but he sleeps a great
" 28 deal during the day; Continues to cough a good deal. Appetite very changeable. Talks fairly rationally, at times. Feb 28/94. During the latter part of this month, sleep and rest,

(carried to 240)

189[illegible] This man was brought here by deputy Frank A. Kellar, with
are very intemperate; cause of present attack is intemperance; for
month he has been confined in the city lock-up on account of delirium tremens on two occasions.
This is not the first attack; 20 years ago he was in the Asylum near Madison, Wis. for 13 weeks;
Insanity is now manifested by his inability to resist desire for alcoholic drinks; is weak-minded;
has shown no disposition to injure others; is not suicidal; no filthy or destructive habits; has been
confined as above; was under medical treatment at City Hospital; good effects; but as soon as he is
discharged, he goes to drinking again.

Sep 3 Sep 3/92. Was slightly restless last night for an hour; slept 6 hours. Am. Pulse 80.
" 4 Sep 4/92. Rested quite well and slept 7 hours last night.
" 5 Sep 5/92. Rested well and slept 7 hours last night. Weight 155 pounds. Pulse 78.
" 7 Sep 7/92. Has rested well & slept well, the past 2 nights. Am. Pulse 88.
" 8 Sep 8/92. Passed a restful night, sleeping 7 hours last night. Am. Pulse 72.
" 10 Sep 10/92. Has rested well & slept 8 hours in each of past 2 nights. Am. Pulse 72.
" 14 Sep 14/92. Has been moved to B[illegible] from A[illegible] Calls for some pills to-day for constipation.
Oct 3 Oct 3/92. Continues quiet at night and to sleep well, apparently. Ever since admission, has been quiet, i.e. free from noisiness, clean, tidy, and well-behaved, on the whole. Talks very freely when the Officers go through. Claims, with the utmost confidence, that there is nothing the matter with him, and that he would be all right, if he had not drunk. He has asked to be permitted to go out to work, but has not, so far, been permitted to do so. He assumes this is because it is feared he would run away; but he asserts most positively that he does not think of such a thing, though he has been heard to say that he would run away. He became quite angry with his attendant because he refused to let him go over to the dance recently. Has written a few letters. Does not read.
Oct 14 Oct 14/92. Wt 150 pds. Pulse 76.
Nov 2 Nov 2/92. Wt 155 pds. Pulse 72. Has gained 13 pounds since admission
" 4 Nov 4/92. Continues quiet, restful, and to sleep well at night. Is clean, tidy and well-behaved. Has been dissatisfied with his attendants, thinking they were "down" on him. Claims that he feigned insanity in order to avoid the Work-house and that there is nothing, and has been nothing, the matter with him. Laughs at the idea of having been out of his head. Has a manner strongly suggestive of mental enfeeblement. Plays games and is fairly active. Bodily health good. Nov 14/92. Had quite severe colicky
" 14 pains yesterday. Is better today.
Dec 5 Dec 5/92. Wt 153½ pds. Pulse 76. Recently suffered from moderate cold, chiefly in his head. For some time past has been complaining that the attendants on B[illegible] were "down" on him, because he would not work & asked to be changed to another hall. One day refused to go out walking as a result of dissatisfaction. Was transferred to B[illegible] for a short time. Upon promising to behave
" 7 better was again sent back to B[illegible]. Dec 7/92. Has cold, sore throat & a cough. —
1893 Jan 3/93. Wt 155 pds. Pulse 84. Jan 4/93. Is quiet, resting & sleeping well at night.
Jan 3/4 Plays games & lounges around. Thinks he is greatly imposed upon by being kept here.

Jan 24/93. Has caught a cold. Is hoarse. Jan 31/93. Thinks he has the "Grippe" - given medicine
Jan 31 Feby 4/93. Continues about the same. Lounges around. Is inclined to be obstinate & lazy, declining to
work. Plays cards & games. Still thinks there is no reason for keeping him here & is anxious to
go. Bodily health seems good.
Mar 16 Mar 16/93. Continues about as described above. There is probably some permanent mental
" 31 Enfeeblement. Mar 31/93. Had a peculiar spell this morning, crying & complaining & was transferred from
B[illegible] to B[illegible].
Apr 7 April 7/93. Has been quiet & well-behaved on B[illegible] since the transfer; the exact nature of the spell is not
quite apparent; whether giving way to feeling of despair or a more distinct spell of insanity.
May 3 May 3/93. Has continued quiet & well-behaved. Has not entered any protest about being kept on B[illegible]
" 8 To-day complained of a cold in his head. May 8/93. Has continued about as usual. Lately,
has been doing some work outside, quite well & willingly. Was today permitted to go to friends in Iowa.
Discharged May 3rd 93

Edward Mc Carthy

From 184.

1893 cont'd Is somewhat better than he has been. Is a little ugly, at times, but if left alone, is all right. Talks
Aug 15 quite rationally. Works some on ward. Habits are clean. Aug 19/93. Struck a fellow-patient (Wm. Moses) to-day,
" 19 causing his nose to bleed. Sep 2/93. Wt 147 pds. (an increase of 9 pds). Pulse 114. Sep 30/93. Appetite good;
Sep 2/30 bowels normal. Quietly behaved. Has changed some, in that he now is incoherent & does not work any, at present,
as he says he does not feel well. Habits still clean. Oct 2/93. Weight 138 pds. (a loss of 9 pds). Pulse 104. —
Oct 2 Oct 2/93. Pulse 124. Tem 99.6. Oct 23/93. Pulse 124 Tem 99.4. Oct 31/93. Bowels regular. Appetite good.
" 23/31 Well-behaved. Talks incoherently still. Habits cleanly. Though his pulse is quite high, his temperature
Nov 1 does not seem to rise, as it did, in the past. Nov 1/93. Wt 144 pds. (a gain of 6 pds). Pulse 126. —
" 27/30 Nov 27/93. Visited by brother, today. Nov 30/93. Appetite good; bowels regular. Behavior quiet. Talks
quite rationally - appears somewhat imbecile - Does not work any. Habits are clean. —
Dec 4/31 Dec 4/93. Wt 141½ pds (a slight loss). Pulse 96. Dec 31/93. Keeps about the same. Complains, occa-
1894 sionally of pains in his stomach. —
Jan 2/9 Jan 2/94. Wt 135 pds (a loss of 6½ pds, in the past month). Pulse 146. Jan 9/94. Appetite is
" 16 poor. Behavior dull and stupid; sits in one place all day. Is apparently failing in health. -
" 18 Jan 16/94. Was, today, transferred to C[illegible] ("the sick ward"). - Put to bed there. Coughs a great
" 23 deal & raises phlegm; also complains of pain in left lung. Jan 18/94. Ate but little breakfast.
" 26/31 Sleeps a great deal during the day. Complains of stomach bothering him. Jan 23/94. Visited by
mother, today. Jan 26/94. Visited by Father Riordan. Jan 31/94. During last half of this month,
he has been sleeping, in the average, only about 5 hours, nightly. Appetite is fairly good; bowels are
regular. Has some quite severe "coughing spells", at times. —
Feb 1 Feb 1/94. Wt (in underclothes) 110½ pds. (a loss of about 17 pounds in flesh in the past month)
" 10 Feb 10/94. Still coughs a great deal & raises phlegm. Sleeps a good deal by day. Talks fairly rationally,
" 15 at times. Feb 15/94. Sleeps in the average only about 5 hours, nightly, but he sleeps a great
" 28 deal during the day; Continues to cough a good deal. Appetite very changeable. Talks
fairly rationally, at times. Feb 28/94. During the latter part of this month, sleep and rest,

(carried to 240)

Whole No. 3119.

Residence, Wheeling, Rice County, Minn.

Date Admission, 5th September 1892.

Admitted by, Dr. Baker Hour, 7.10 P.M.

How Sent, R.A. Mott, Jof P, County of Rice

Sex, Male

Age, 21 years

Civil Condition, Single

Children, No

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Yes, Lutheran.

Habits, Drinks some

Nativity, In this County where he now lives

Physicians Committing, D.M. Cool & G.W. Wood

Correspondents, Henry Elderbusch, Faribault, Minn (Father)

No. for Year, 31.

Insane Relatives, None (Insanity not hereditary)

Cause Exciting, very sick about a year ago.

Cause Predisposing,

Form, Mania — Acute

Accompanying Bodily Disorder, not apparent on cursory exam.

Suicidal or Not, not that is known of.

Date of this Attack, about a week since

Duration, about a week

No. of Attack, Not the 1st (had attack abt 2 wks ago 1 year ago)

No. of Admissions,

Age First Attack, about 20 years

Time of Leaving, Nov. 6th 92.

Time in Hospital, 2 mo. 1 d.

Result, Recovered

EXAMINATION ON ADMISSION.

Exd by Dr. Baker, 8th Sep/92 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

~~Clear~~ or Confused, by delusions

Quick or Sluggish, quite active

MEMORY:

Past Events,

Recent Events, seems good

Special Subjects,

PERCEPTIVITY: ordinary observation fairly good.

Alert or Dull, answers questions fairly well; does

Correct or Illusive, not realize own condition.

REASONING POWER: Perverted

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes

Depressed,

DELUSIONS: various

Systematized or Not, not

Special Subjects,

Transitory or Not,

HALLUCINATIONS: probably none

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Incoherent at times; Coherent at others

Voluble or Reticent, Voluble

GENERAL DESCRIPTIVE REMARKS:

Drinks some; says he was sick last winter for 2 weeks; had rheumatism in legs, and headaches from heat; working too hard; 2 winter ago, had inflammation of bowels; says he has a great deal of property all; everything. Is going to stay here until next spring; he is going to buy up all the trains + everything; is going to have a market every day, here, in St Paul, + everywhere; will work when he wants to and play when he wants to - Go to Germany &c. Thinks one of the patients on 2nd has been dead 2 years; says he eats + goes back + forth

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 4 1/4 inches WEIGHT, 114 1/2 lbs NUTRITION, Poor; is anaemic

WOUNDS OR ABNORMALITIES, Slight scar on left knee. Abnormalities (?)

TONGUE, Tremors, Slight Coatings, Some Promptness Movement, prompt

PUPILS, Equality, Equal Size, dilated

Response Light, Some Accommodation, yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Finger to nose, eyes shut, good

Legs, Standing on foot, good; Standing, eye shut, good;

TREMORS, Hands, None of Tongue, Slight

Facial Muscles, no tremors General,

REFLEXES, Patellar, Equal (?) seem some diminished

Other Reflexes,

ARTICULATION, Hesitating, Slurred, fair

FACIAL EXPRESSION,

SENSIBILITY,

HEART, apex beat normal position plainly visible; impulse strong; Sounds clear.

LUNGS, Chest 32 1/4 in; Expansion 2 in (?); apex respiratory murmur harsh + highly pitched -

EXAM. URINE, Color pale + cloudy; Sp. gr 1022; albumen none; urea 1.6%

Sep/92 D.M.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, yes	Careless,
BOWELS, Normal, yes	Constipated,	Irregular,
APPETITE, Good, yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Sudden probably

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, mother living; claims in good health.

Father or Pat. Relations, Father living; good health;

Brothers or Sisters, 3 brothers living -

Personal and Medical History of Henry Elderbusch

1894 This man was brought here by Wm Geiger, Chief of Police. Tarrabaret, with the following history. He drinks some. Was very sick about 1 year ago. Form of attack is unknown; any bodily disease not apparent on cursory examination. First symptoms of this attack manifested about 1 week since; had an attack about 2 weeks over one year ago. Insanity is now manifested by his thinking that he owns a large amount of property; wants to buy without limit. Has shown a disposition to injure others. Attempt at suicide not known of. Not disposed to filthy or destructive habits. No peculiarities of temper or manifested before symptoms appeared. Not subject to any bodily disease &c. no restraint or confinement employed; only watched him constantly about 8 days. Was treated for inflammation of bowels & rheumatism.

Sep 6 Sep 6/92. Was quiet and slept 7 hours last night. Am. Pulse 96.

" 7 Sep 7/92. Was somewhat noisy and restless, sleeping but 4 hours last night; Am. Pulse 102. Pm. Pulse 62.

" 8 Sep 8/92. Was quite noisy and restless for 3 hours, sleeping 4 hours, last night. Am Pulse 88. Pm. Pulse 92.

" 9 Sep 9/92. Somewhat noisy and restless, sleeping 5 hours, last night. Am. Pulse 92. Pm. Pulse 88.

" 10 Sep 10/92. Was quiet and slept 7 hours last night. Am. Pulse 104. Pm. Pulse 76.

" 11 Sep 11/92. Was quiet and slept 7 hours last night. Am. Pulse 108. Pm. Pulse 110.

" 12 Sep 12/92. Rested well and slept 7 hours last night. Am. Pulse 100. Pm. Pulse 96.

" 13 Sep 13/92. Has continued quiet at night and has appeared to rest and sleep well since the last note. Pulse has been 98. 110. 96. 92. 100. 104 ½ pd at the past 6 and present mornings; and has been 98. 100. 85. 88. 80. 88 ½ pd in the past 6 afternoons.

Oct 4 Oct 4/92. Weight 130½ pounds. Pulse 80. Has gained 16 pounds since admission.

" 5 Oct 6/92. Has continued uniformly quiet and has seemed to rest and sleep well at nights since the note of the 13th ult.

On admission, was, by day, quite full of activity, mental and physical. Somewhat restlessly active physically, and soon took ahold of work. Had delusions that he had wealth and the power and had no need of work; talked very freely with his fellow-patients, attendants and physicians, without discriminating between them, offering them all situations in his employ at big salaries. Would increase the salary on the slightest suggestion. Freely talkative, but never noisily or loudly so. Happy and pleased with his pleasurable delusions. Smiling and good-natured; always contented; always feeling well; never dirty or destructive; was, at this time, in C4; he became more restful and quiet at night; less frequently mentioned his delusions by day; continued quite active, physically, working; took food regularly and well and gained in flesh; became more rational and continued well-behaved and has now been on P1 for some time. He works, plays games & goes walking. Seems now to realize where he is and feels well enough to go home.

Nov 2 Nov 2/92. Wt 141½ pd. Pulse 96. Has gained 11 pounds in the past month & 27 pd. since admission. Nov 4/92. Is quiet at night, and appears to rest and sleep well. Is quite active, playing games; working well and talking freely. Delusions seem to have disappeared or at least lessened their hold upon him, probably the former; speech being coherent & rational — Is cheerful, and seems contented, although he wants to go home. Nov 6/92. Was today visited by his brother & Lyman Tarrabaret from Cincinnati.

" 4

" 6

Dis'd May 3rd '93.

Personal and Medical History of Charles H. Haupt.

From page 120

1893 May 1 May 1/93. "Something told him he would go home today" — Was very much excited when he met with disappointment in this connection. May 2/93. Wt 148 pds. Pulse 60. May 22/93. Does not complain of ill-feeling of late. Claims in fact he is "perfectly well"; "never felt better"; "there never was any reason for sending him here". Still read and writes a great deal; tenor of letters about as usual. Evidently still holds to his delusions. Lately, & for some time past, has been in the habit of telling an account of himself, of his doings & travels, several times, to the same person, evidently forgetting he had previously told it.

" 31 Is very anxious to go. Is still in A3 "open ward". — May 31/93. Appetite good; bowels more regular for last 10 days. Reads considerably & writes quite frequent letters.

June 6/30 Wt 143½ pds. Pulse 82. June 30/93. Appetite good; bowels have been constipated of late & he has been given cathartics quite frequently. Quiet & well behaved. Seems very much disappointed that he is not allowed to go home, as he says he is "perfectly well"; is sane & there is not the slightest reason for keeping him here". "Is going to write to his lawyers to get him out". "Will prosecute somebody (his guardian) for incarcerating him in this hospital" &c.

July 1/31 July 1/93. Wt 142 pds. Pulse 84. July 31/93. Appetite good. Still requires cascara for bowels. Says he is now conscious that his mind & memory are failing & believes he will not live a year. Is quiet & well-behaved. Reads a great deal & writes a large portion of the time. Says "he is going to publish a couple of books. When he gets out". Has limited parole & takes his regular walks out. Has had varying delusions & hallucinations. Has believed that God talked to him; that he was to marry a rich woman (calls her his God-given wife) — &c He does not allow these things, however, to divert him from a quiet, peaceable life.

Aug 14 Aug 14/93. Was very anxious today to have an interview with the Medical Superintendent & at last succeeded. Told Dr. K. that he (patient) was going to bring action against him in the courts for damages for keeping him here. When there was nothing the matter with him & he was perfectly well able to do his business. Seemed quite agitated during the interview. Soon quieted down however.

" 5 Wt 141½ pds. Pulse 88. Aug 5/93. Says "he will be discharged today; that the Judge of Probate and his "intended" will come in and release him. Says, he knows it is so, for God told him". Aug 31/93. Appetite continues good. Bowels constipated; at times requires cathartics. Is quietly behaved. Still holds delusions. Talks of what God tells him. Mental condition about as usual.

Sep 4/30 Sep 4/93. Wt 140 pds. Pulse 92. Sep 30/93. Appetite good; behavior good. Bowels occasionally constipated. Has "presentiments & visions". Reads most of the time. Still deluded.

Oct 5/31 Oct 5/93. Wt 138½ pds. Is gradually losing in flesh. Pulse 92. Oct 31/93. Has limited parole & walks out a good deal. At times, roams aimlessly about the hall. Still shows delusions.

Nov 7 93 Wt 136½. Pulse. Nov 6 93 Appetite fair. Bowels constipated at times. Took forks from A3 dining room to quiet ward for P1. Nov 10 93 Talking worse every day, asking about his clothes every little while & walking around from place to another, always looking for something. Is quite nervous & forgetful. Nov 14 93 Noisy during night, said he was going to die. Nov 22 93 Struck knife out on side of face and back of head. 24th applying ointment & is somewhat healing. Dec 2 93 Wt 136½ Pulse 62. Dec 20 93 Failing very fast. Goes about the ward, talking to himself and never recognizing anybody. Does not want to get up, eat meals, nor touch himself. Appetite very poor. Dec 30 93 Failing fast unable to dress or undress. Is hard & sick headed, &c & talk. Appetite poor. Bowels very. Does not sleep. Appears dumpish. Jany 2 94 Wt 124 Pulse 98. 1/29 93 Appears to be gradually getting worse. Does not know any persons name or more. Hard for him to talk. Talks to himself a great deal. Quite hard of hearing. Does not take notice of what is going on. Will sit in a chair sometimes, sleeps all day

over to page 140.

Whole No. 3121
Residence, St. Paul, Minn
Date Admission, 7th September 1892
Admitted by, Dr. Kilbourne Hour, 7.15 P.M.
How Sent, Gen. M. Orr, Court Com. for County of Ramsey
Sex, male
Age, 30 years
Civil Condition, single
Children, —
Age Youngest Child,
Occupation, Gardner
Degree Education,
Profession Religion, Lutheran
Habits, very good
Nativity, Sweden
Physicians Committing, G. J. Hanley and Oscar A. Flesberg
Correspondents,

No. for Year, 33
Insane Relatives, None (insanity not hereditary)
Cause Exciting, unknown
Cause Predisposing,
Form, Melancholia Chronic
Accompanying Bodily Disorder, not to our knowledge
Suicidal or Not, Not
Date of this Attack, about 2 yrs ago; seems continuous
Duration, ten months (continuous?)
No. of Attack, Not the 1st
No. of Admissions,
Age First Attack, about 28 years
Time of Leaving, July 31. 1893
Time in Hospital, 10 mos & 23 days
Result, Transf'd to Fergus Falls

EXAMINATION ON ADMISSION.

Exd by Dr. Baker, 9th Sep'92 (for Gene Asstg. Interpreting &c)

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, somewhat sluggish

MEMORY:
Past Events,
Recent Events, he says is somewhat impaired
Special Subjects,

PERCEPTIVITY: ordinary observation fair; answers
Alert or Dull, questions fairly well, but hesitates some;
Correct or Illusive, he does realize own condition.

REASONING POWER: Can exercise but somewhat
Ordinary Subjects, impaired. —
Own Mental State,
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Somewhat

DELUSIONS: Possibly about religious subjects;
Systematized or Not,
Special Subjects, has idea sometimes persons are after his life
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Is coherent
Voluble or Reticent, Talks quite freely when questioned

GENERAL DESCRIPTIVE REMARKS:

Occasionally drinks a little to excess. Patient understands only Swede language. Questions & answers had to be interpreted. Says abt 7 or 8 years ago got a blow upon his head from a plank falling. Admits he was in Hospital for Insane in Sweden for abt 10 months. Has idea that he is one of the 2 witnesses the Bible speaks of that are to come. Feels as if a "power" was upon him. Wanders about without knowing what his aim is. Says he sees "snakes" once in a while & fights with them. Would like to do some work.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet 0 in. WEIGHT, 165 pounds NUTRITION, Rather Poor
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, marked, coarse Coatings, slight Promptness Movement, rather sluggish
PUPILS, Equality, Equal Size, about normal
Response Light, Yes Accommodation, Yes
SIGHT, Good
HEARING, Left ear considerably impaired; right, somewhat.
COORDINATION, Arms, Finger to nose, eyes shut, good.
Legs, Standing on foot, good. (fairly); Standing, eyes shut, slight swaying.
TREMORS, Hands, Tongue, Marked, coarse
Facial Muscles, General,
REFLEXES, Patellar, Equal; somewhat diminished; response sluggish.
Other Reflexes,
ARTICULATION, Hesitating, somewhat slow Slurred, Seems good
FACIAL EXPRESSION, rather sad
SENSIBILITY,
HEART, Seems normal
LUNGS, " "
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, tendency to be Clean, yes Careless,
BOWELS, Normal, Constipated, Irregular, yes
APPETITE, Good, yes Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Previous attack, one ONSET GRADUAL OR SUDDEN, ? Says had some sort of a fit in Stockholm.
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living.
Father or Pat. Relations, Father died of rheumatism of heart.
Brothers or Sisters, 2 brothers living; 2 sisters died of paralysis.

1892

This man was brought here by Deputy Coutcau, with the following history; Habits are very good. Cause of this attack is unknown; form is acute, depressed; accompanying bodily disorder not known of. First symptoms of disease were manifested about 5 years ago, in the same way as now, when he was confined in Sweden; this, then, is not 1st attack; that of 5 yrs ago, lasted about 10 months. Insanity is now manifested in many different ways. Has shown no disposition to injure others. Is not suicidal. There is now a tendency to filthy habits. Has shown peculiarities &c; perhaps of a religious origin. Has been under medical treatment as above, results not known; has masturbated some, when young.

Sep 7/8 On admission, put upon B3; quite restless for a couple of hours, and getting out of bed, sleeping about 6 hours last night. AM. Pulse 73. Is quiet. Says he is not feeling well.

" 9 Sep 9/92. Was quiet last night, resting and sleeping well, 9 hours.

" 10 Sep 10/92. Restless for 1 hour, sleeping 7 hours, last night.

Oct 4 Oct 4/92. Wt 178 pounds. Pulse 88. Has gained 13 pounds, since admission.

" 8 Oct 5/92. Has been uniformly quiet at night; resting and sleeping quite well. Has, ever since admission, been free from noisiness and excitement. Has been clean, although somewhat slouchy in dress. Attends to his own personal care and wants. At first, somewhat sluggish physically, has become somewhat more active. Was, at first, depressed, claiming that he did not feel well. Has gradually grown more cheerful, and now usually says that he feels quite well. Talks quite freely with those he comes in contact with. Has expressed a desire to go. Does not do much work and does not read or write much. Bodily health has improved. Nov 2/92 Wt 181½ pds. Pulse 65.

Nov " 8 Nov 8/92. Continues quiet, to rest and sleeps well at night. Quiet and well behaved by day - Personal habits quite good. Until recently, worked in the kitchen. Lately, has refused to continue to work there. Bodily health quite good. —

Dec 5 Dec 5/92. Wt. 185½ pds. Pulse 80. Has gained 20½ pds. since admission.

" 8 Dec 8/92. Is uniformly quiet, resting and sleeping well at night, apparently. Does almost no work. Asks to be permitted to go out to work, but, in a former attempt at work in the kitchen, did very poorly. Is somewhat restless and uneasy in action. Bodily health good.

Jan 3/93 Jan 3/93. Wt 179 pds. Pulse 86. Jan 9/93. Is quiet at night, apparently resting & sleeping well. Does not seem quite so bright mentally as he was at time of last note. Does no work.

Feb 9 Feb 9/93. Uniformly quiet, apparently resting well at night. By day, continues the somewhat uneasy restless, pacing the floor a good deal of the time. Is dull & inactive. In good bodily health.

Mar 18 Mar 18/93. Is growing somewhat worse & is rather more foolish. Wants to work but does not avail himself of opportunities to go out, on the ward.

Apl 17 Apl 17/93. Seems to rest pretty at night. Is restless, talks much to himself & behaves quite foolishly by day, being quite manifestly worse. Apl 26/93 Last night, was quite noisy for 4 hours, or so; talking loudly & keeping the other patients awake. April 29/93. Of late, has been very restless & much disturbed by day. Was, today, transferred to B3.

May 3/16 May 3/93. Has been losing quite steadily in weight, the past 3 months. May 16/93. Was today visited by a brother.

May 18 May 18/93. Since the date of the last mentioned transfer, patient has been, almost nightly, noisy restless & getting out of bed for from 2 to 4 hours; sleeping only from 2 to 5. 6. or 7 hours; more nights, however, sleeping none at all.

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31 2

DETAILED HISTORY OF SICKNESS OF MR. Chas. N. Haupt
DIAGNOSIS.

1894 Oct 25

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM
Oct 27	7	5	76	68				
" 28	7	5	76	76				
" 29	7	5	80	24				
" 30	7	5	76	72				

Night = noisy.
Appetite good. Bowels regular.

Feb 9 Feb 9/94 Has been uniformly quiet at night, resting & sleeping well. By day, continues the somewhat uneasy restless, pacing the floor a good deal of the time. Is dull & inactive. In good bodily health.

Mar 18 Mar 18/94 Is growing somewhat worse & is rather more foolish. Wants to work but does not avail himself of opportunities to go out, on the ward.

Apl 17 Apl 17/94 Seems to rest pretty at night. Is restless, talks much to himself & behaves quite foolishly by day, being quite manifestly worse. Apl 26/94 Last night, was quite noisy for 4 hours, or so; talking loudly & keeping the other patients awake. April 29/94. Of late, has been very restless & much disturbed by day. Was, today, transferred to B3.

May 3/16 May 3/94 Has been losing quite steadily in weight, the past 3 months. May 16/94. Was today visited by a brother.

May 18 May 18/94. Since the date of the last mentioned transfer, patient has been, almost nightly, noisy restless & getting out of bed for from 2 to 4 hours; sleeping only from 2 to 5. 6. or 7 hours; more nights, however, sleeping none at all.

May 9 May 9/94 Got out of bed & cut his head, during the day. Bowels are very loose. May 9/94. Put a bandage on eye which was hurt.

" 10 May 10/94 Fell out of bed while attendant was feeding him & bruised his nose slightly. — — —

(Carried to 404)

DETAILED HISTORY OF SICKNESS OF MR. Chas. N. Haupt
DIAGNOSIS.

1894 C.2.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
April									
2	7	5	76	74					Duty noisy part of the night. Flute talks. Continually vulgar when sleeping. Looks his best after. Appetite good. Bowels fairly regular. Weight 108 lbs. Unemployed.
3	7	5	84	76					
4	7	5	88	70					Was quite noisy for a portion of during night.
5	7	5	86	80					
6	7		80						
7	7	5	80	74					
8	7	5	76	76					Noisy almost all day. Appetite good. Bowels not very good. Constipation.
9	7	5	80	80					
10	7	5	80	84					Talking and noisy all day.
11	7	5	90	80					
12	7	5	96	84					Slept on an average nightly from April 2 to 12 inclusive 4 hours.
13	7	5	80	84					
14	7	5	88	76					
15	7	5	86	84					10 P.M. Passage.
16	7	5	86	90					
17	7	5	86	90					Very noisy at times, also filthy. Uses and soils himself.
18	7	5	86	84					
19	7	5	84	74					Gave bath.
20	7	5	88	82					
21	7	5	82	84					Very noisy this P.M.
22	7	5	84	88					Night - talked while awake. Day - Gave bath.
23	7	5	84	90					Talking pars during night.
24	7	5	88	82					Slept nightly on an average from April 13 to 23 inclusive 4 hours.
25	7	5	84	84					
26	7	5	80	74					

...ever since admission,
...touchy in dress. —
...ally, has become some-
...well. Has gradually grown
...quite freely with those he comes
... and does not read or write
...Rules 65.
...quiet and well-behaved by day - Personal
...ity, has refused to continue to work there.

Dec 5 Dec
" 8 Dec 8/94
no work. Ob
kitchen, did very
...ds. Since admission.
...oping well at night, apparently. Does almost
...rk, but, in a former attempt at work in the
...tless and uneasy in action. Bodily health good.
Jan 3/94 Jan 3/93. Wt 179 lbs
...quiet at night, apparently resting & sleeping well.
Does not seem quite
...ally as he was at time of last note. Does no work.
Feb 9 Feb 9/93. Uniformly quiet,
...ntly rests well at night. By day, Continues the somewhat
uneasy restless, pacing the floor a good deal of the time. Is dull & inactive. In good bodily health.
Mar 18 Mar 18/93. Is growing somewhat worse & is rather more foolish. Wants to work but does not avail
himself of opportunities to go out in the ward.
Apl 1 Apl 1/93. Sleeps fairly quietly at night. Scratches, restless, talks much to himself & behaves quite
" 26 foolishly by day, being quite manifestly worse. Apl 26/93 Last night, was quite noisy for 4 hours, order-
" 29 talking loudly & keeping the other patients awake. April 29/93. Of late, has been very restless & much disturbed
by day. Was, today, transferred to B3.
May 3/93 May 3/93. Has been losing quite steadily in weight, the past 3 months. May 6/93. Was today visited by a brother.
May 18 May 18/93. Since the date of the last-mentioned transfer, patient has been, almost nightly, noisy restless & getting
out of bed for from 2 to 4 hours; sleeping only from 2 to 5. 6. or 7 hours; on one night, however, sleeping none at all.
" 9 out of bed & cut his head, during the day. Bowels are very loose May 9/94. Put a bandage on Eye which was hurt.
" 10 May 10/94 Fell out of bed while attendant was getting him & bruised his nose slightly.

(Carried to 141)

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31 2

DETAILED HISTORY OF SICKNESS OF MR. Chas H. Haupt
DIAGNOSIS.

1894

DATE	HOUR	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
March 7	5	76	88					Extremely filthy. Gave him bath.
8	5	76	80					
9	5	84	84					Dirty in eating. Dress his food
10	5	80	88					Sore on back growing larger.
11	5	82	78					Patient very dirty
12	5	88	84					
13	5	80	74					
14	5	72	80					
15	5	96	80					
16	5	88	88					Out of bed several times wandering about in his cell.
17	5	88	92					
18	5	80	86					Scratched and bruised about forehead. Probably caused by falling out of bed.
19	5	80	80					Out of bed and down several times to day.
20	5	90	76					Sore on back doing nicely.
21	5		84					
22	5	92	84					
23	5		100					Seems to be growing weaker. Appetite good. Bowels regular.
24	5	96	80		18			
25	5	84	96					
26	5	80						Bowels moved. Talking continually all day.
27	5	84	74					Had 2 chills during night ~~and 2 at~~ 130 Early quiet to day. Slept a great deal.
28	5	80	80					
29	5	80	70					
30	5	80	88					
31	5	80	62					

" 9 out of bed & cut his head, during the day. Bowels are very loose. May 9/94. Put a bandage on eye which was hurt
" 10 May 10/94. Fell out of bed while attendant was feeding him & bruised his nose slightly. —

(carried to next)

s, Ever since admission,
clouchy in dress.
ically, has become some-
well. Has gradually grown
quite freely with those he comes
ork and does not read or write
s. Rules 65.

Quiet and well-behaved by day - Personal
Lately, has refused to continue to work there.

Dec 5 Dec
" 8 Dec 8/93
no work. On
Kitchen, did ver
Jan 1st 3/94 Jan 3/93. Wt 179 lbs
Does not seem quite
Feb 9 Feb 9/93. Uniformly quiet,
arently resting well at night. By day, continues the somewhat
uneasy restless pacing the floor a good deal of the time. Is dull & inactive. In good bodily health.
Mar 18 Mar 18/93. Is growing somewhat worse & is rather more foolish. Wants to work but does not avail
himself of opportunities to go out on the ward.
Apl 17 Apl 17/93. Seems to rest quietly at night. Is rather restless, talks much to himself & behaves quite
" 26 foolishly by day, being quite manifestly worse. Apl 26/93. Last night, was quite noisy for 4 hours, or so,
" 29 talking loudly & keeping the other patients awake. April 29/93. Of late, has been very restless & much disturbed
by day. Was, today, transferred to B3.
May 3/95 May 3/93. Has been doing quite steadily in weight, the past 3 months. May 6/93. Was today visited by a brother.
May 18 May 8/93. Since the date of the last mentioned transfer, patient has been, almost nightly, noisy restless & getting
out of bed for from 2 to 4 hours; sleeping only from 2 to 5 or 6 hours; at one night, however, sleeping more at all.

2 1/2 yrs. Since admission.
sleeping well at night, apparently. Does almost
work, but, as a former attempt at work in the
restless and uneasy in action. Bodily health good.
3. Is quiet at night, apparently resting & sleeping well.
mutually as he was at time of last note. Does no work.

DETAILED HISTORY OF SICKNESS OF MR. Chas. N. Haupt.
DIAGNOSIS.

1894 C.2.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Feb 9		5		74					Admitted from B.I. sick. Appears quite weak. Has sore on back. Appetite good. Bowels Costive. Ordered to bed.
10	7	5	80	76					Bowels Costive.
11	7	5	88	82		28 in.			Appetite good. Bowels moved very slightly. Micturition
12	7	5	76	76					"
13	7	5	76	76					Appetite good. Bowels Costive
14		5	1	60					"
15	7	5	70	68					Slept rightly on an average of 7 hrs from the 9th to 14th inst.
16	7	5	70	74					
17	7	5	70	76					
18	7	5	82	70					
19	7	5	78	80					
20	7	5	76	84					Appetite good. Bowels as a rule fairly regular.
21	7	5	76	72					
22	7	5	72	80					
23	7	5	84	76					
24	7	5	80	80					Gave enema. Bowels moved a little.
25		5		88					
26	7	5	80	80					
27		5		80					Slept rightly on an average of 5½ hrs from the 16th to 26th inst.
28	7	5	76	88					
Mar 1	7	5	80	72					
2		5		68					Weight 111 lbs.
3	7	5	84	88					
4	7	5	78	74					
5	7	5	76	76					
6	7	5	88	84					

Dec 5 Dec
" 8 Dec 8/94 no work. On Kitchen, did ver
Jan 3/94 Jan 3/93. Wt 179 lbs. Does not seem quite
Feb 9 Feb 9/93. Uniformly quiet, ...erently resting well at night. By day, Continues the somewhat uneasy restless, pacing the floor a good deal of the time. Is dull & inactive. In good bodily health.
Mar 18 Mar 18/93. Is growing somewhat worse & is rather more foolish. Wants to work but does not avail himself of opportunities to[qui]et, in the ward.
Apl 14 Apl 17/93. Sleeps fairly quietly at night. Is rather restless, talks much to himself & behaves quite foolishly by day, being quite manifestly worse. Apl 26/93. Last night, was quite noisy for 4 hours, ord... talking loudly & keeping the other patients awake. April 29/93. Of late, has been very restless & much disturbed by day. Was, today, transferred to B3.
May 3/93 May 3/93. Has been losing quite steadily in weight, the past 3 months. May 6/93. Was today visited by a brother.
May 18 May 18/93. Since the date of the last-mentioned transfer, patient has been, almost nightly, noisy restless & getting out of bed for from 2 to 4 hours; sleeping only from 2 to 5 or 6 hours; more nights, however, sleeping more or less ... ever since admission, ...tidily in dress. ...ically, has become some... well. Has gradually grown ... quite freely with those he comes ...ork and does not read or write ... Rules 65.
... Quiet and well-behaved by day - Personal ...ately, has refused to continue to work there.
... 6½ hrs. since admission.
... keeping well at night, apparently. Does almost ... work, but, in a former attempt at work in the ...restless and uneasy in action. Bodily health good.
... Is quiet at night, apparently resting & sleeping well. ...tally as he was at time of last note. Does no work.
... (carried to 1024)

Personal and Medical History of John A. Anderson

1892

This man was brought here by Deputy Couteau, with the following history; Habits are very good. Cause of this attack is unknown; form is acute, depressed; accompanying bodily disorder not known of. First symptoms of disease were manifested about 5 years ago, in the same way as now, when he was confined in Sweden; this, then, is not 1st attack; that of 5 yrs ago, lasted about 10 months. Insanity is now manifested in many different ways. Has shown no disposition to injure others. Is not suicidal. There is now a tendency to filthy habits. Has shown peculiarities &c; perhaps of a religious origin. Has been under medical treatment as above; results not known; has masturbated some, when young.

Sep 7/8 On admission, put upon B3; quite restless for a couple of hours, and getting out of bed; sleeping about 6 hours last night. AM. Pulse 73. Is quiet. Says he is not feeling well.

" 9 Sep 9/92. Was quiet last night, resting and sleeping well, 9 hours.

" 10 Sep 10/92. Restless for 1 hour, sleeping 7 hours, last night.

Oct 11 Oct 11/92. Wt 178 pounds. Pulse 88. Has gained 13 pounds, since admission.

" 8 Oct 8/92. Has been uniformly quiet at night, resting and sleeping quite well. Has, ever since admission, been free from noisiness and excitement. Has been clean, although somewhat slouchy in dress. Attends to his own personal care and wants. At first, somewhat sluggish physically, has become somewhat more active. Was, at first, depressed, claiming that he did not feel well. Has gradually grown more cheerful, and now usually says that he feels quite well. Talks quite freely with those he comes in contact with. Has expressed a desire to go. Does not do much work and does not read or write much. Bodily health has improved. Nov 2/92 - Wt 181½ lbs. Pulse 65.

Nov " 8 Nov 8/92. Continues quiet, to rest and sleep well at night. Quiet and well-behaved by day - Personal habits quite good. Until recently, worked in the Kitchen. Lately, has refused to continue to work there. Bodily health quite good. —

Dec 5 Dec 5/92. Wt. 185½ lbs. Pulse 80. Has gained 20½ lbs. since admission.

" 8 Dec 8/92. Is uniformly quiet, resting and sleeping well at night, apparently. Does almost no work. Asks to be permitted to go out to work, but, in a former attempt at work in the kitchen, did very poorly. Is somewhat restless and uneasy in action. Bodily health good.

Jan 3/93 Jan 3/93. Wt 179 lbs. Pulse 86. Jan 9/93. Is quiet at night, apparently resting & sleeping well. Does not seem quite so bright mentally as he was at time of last note. Does no work.

Feb 9 Feb 9/93. Uniformly quiet, apparently rests well at night. By day, Continues to be somewhat uneasy, restless, pacing the floor a good deal of the time. Is dull & inactive. In good bodily health.

Mar 18 Mar 18/93. Is growing somewhat worse & is rather more foolish. Wants to work but does not avail himself of opportunities to be quiet, in the ward.

Apl 17 Apl 17/93. Seems to rest quietly at night. Is rather restless, talks much to himself & behaves quite foolishly by day, being quite manifestly worse. " 26 Apl 26/93. Last night, was quite noisy for 4 hours, orders talking loudly & keeping the other patients awake. " 27 April 27/93. Of late, has been very restless & much disturbed by day. Was, today, transferred to B3.

May 3/18 May 3/93. Has been losing quite steadily in weight, the past 3 months. May 16/93. Was today visited by a brother. May 18 May 18/93. Since the date of the last mentioned transfer, patient has been, almost nightly, noisy restless & getting out of bed for from 2 to 4 hours; sleeping only from 2 to 5. or 6 hours; on one night, however, sleeping none at all.

Pe

NAME. John A Anderson

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	179	86	....	4½
Feby 3	179½	66	½	....
Mar 22d	174½	83	....	5
Apl 4th	172	66	....	2½
May 3d	169	96	....	3
June 3d	169	92	—	—
July 3d	162	76	—	7

Mar " 18 wandering about aimlessly.

" 19/20 Caused by falling out of bed). March 19/94. Out of re

" 23 doing nicely. March 23/94. Seems to be growing weaker, though appetite

" 26/27 March 26/94. Has been talking continually, all day. March 27/94. Had 2 passages, during the night. Is fairly

" 31 quiet today, slept a great deal. March 31/94. Is still kept to his bed. Habits very filthy. Bowels fairly regular.

Apl 2 April 2/94. Was quite noisy, part of the night. Of late, talks continually, only when sleeping. Soils his bed

" 4 quite often. Was vaccinated, today. Weight 165 pounds (still losing in flesh). April 4/94. Was quite noisy, for

" 8 some time, during the night. April 8/94. Has been noisy, mostly all day. Appetite good: bowels somewhat costive.

" 10/30 April 10/94. Talking & noisy, all day. April 30/94. During this month, has slept, on the average, about 14 hours,

nightly. Has at times, been noisy & talking in his sleep. Patient is still confined to bed, where he now

lies more quietly, probably owing to his very weak condition. Is also somewhat noisy, by day. Habits are very

filthy & he requires frequent baths. Appetite is good, & patient is gaining quite perceptibly. —

May 1/7 May 1/94. Wt 102½ lbs. (Is losing quite markedly in flesh). May 7/94. Habits continue very filthy. Fell

" 9 out of bed & cut his head, during the day. Bowels are very loose. May 9/94. Put a bandage on eye which was hurt.

" 10 May 10/94. Fell out of bed while attendant was feeding him & bruised his nose slightly. — — —

(Carried to 404)

and only once or twice, a full night. (Average has been 5 hours a night). By day, has been up + dressed and out on the hall. When not out walking, tramps up + down the hall most of the time, talking to himself; probably incoherent; does no work. May 19/93. Reported by night-nurse as being lightly noisy for about 5 hours, last night. Is also noisy to day; walks the hall a good deal, talking to himself; gesticulating + " 21/ May 21/93. Quite noisy for 6 hours last night + talking all the time. May 25/93. Noisy nearly all last night. " 25/ May 29/93. Reported as noisy for 5 or 6 hours at each of nights of 23d, 24th + 29th inst. May 31/93. Appetite good; bowels regular. Walks the hall continually, talking all the time, wisely to himself. Cannot be kept in a seat unless closely watched. Habits are clean.

June 5 June 5/93. Continues frequently restless + noisy for fm 5 to 6 hours at night. Conduct + behavior, " 30 by day, does not change. June 30/93. Restless + noisy, frequently talking fm 5 to 6 hours at night, as many of the nights this month; sometimes noisy all the night. There is no change to note in his conduct during the day.

July 7/ July 7/93. Was noisy fm 5 hours, last inst. July 31/93. During the first half of this month, patient appears the more restful + quiet at night; since the 16th has been restless + noisy on about 7 different nights, fm from 5 to 7 hours on each. Remarks about his conduct + behavior, by day, still hold good. —

Patient was, with several others, today transferred to Hospital at Fergus Falls. —

1894 From page 136 **Charles Haupt.**

Feb 8/ Has to be assisted in dressing + undressing. Bowels reg: Appetite fair. Febry 2 94 Wt 121½ P. 87. Feb 9/94. Has been failing, quite " 28 perceptibly of late; was today, moved to C, the "Sick ward" + put to bed. Appears quite weak. Has a sore on back. Appetite good, but bowels are constipated. Feb 28/94. During the early part of the month, patient slept about 7 hours, nightly. During the latter half of month, has been sleeping only about 5 hours, each night. Appetite has been good, bowels quite badly constipated, at times. Is still confined to his bed. Seems quite weak. Habits are becoming very dirty.

Mar 2/ March 2/94. Wt 111 pds (in underclothing). March 10/94. Habits very filthy, at times. Is dirty in eating. Sometimes, he " 16 will throw his food in the chamber. Sore on back is growing larger. March 16/94. Was out of bed several times, + " 18 wandering about aimlessly. March 18/94. Scratches + bruises noticed on face, today; also on forehead (probably " 19/ Caused by falling out of bed). March 19/94. Out of bed + naked, several times, today. March 20/94. Sore on back is " 23 doing nicely. March 23/94. Seems to be growing weaker, though appetite is good and bowels are regular. — " 26/ March 26/94. Has been talking continually all day. March 27/94. Had 2 passages, during the night. Is fairly " 31 quiet today; slept a great deal. March 31/94. Is still kept to his bed. Habits very filthy. Bowels fairly regular.

Apl 2 April 2/94. Was quite noisy, part of the night. Of late, talks continually, only when sleeping. Sits his bed, " 4 quite often. Was vaccinated, today. Weight 105 pounds (still losing in flesh). April 4/94. Was quite noisy, for " 8 some time, during the night. April 8/94. Has been noisy, mostly all day. Appetite good: bowels somewhat costive " 29/ April 29/94. Talking + noisy, all day. April 30/94. During this month, has slept, on the average, about 4 hours, " 30 nightly. Has at times, been noisy + talking in his sleep. Patient is still confined to bed, where he now lies more quietly, probably owing to his very weak condition. Is also somewhat noisy, by day. Habits are very filthy + he requires frequent baths. Appetite is good, + patient is failing quite perceptibly. —

May 1/ May 1/94. Wt 102½ pds. (Is losing quite markedly in flesh). May 7/94. Habits continue very filthy. Fell " 9 out of bed + cut his head, during the day. Bowels are very loose. May 9/94. Put a bandage on eye which was hurt " 10 May 10/94. Fell out of bed while attendant was fetching him + bruised his nose slightly. — — —

(Carried to 142)

Personal and Medical History of Charles Hanson



Whole No. 3122.

Residence, 507 Knox A. N.

Date Admission, 7th September 1897

Admitted by, Dr Kilbourne Hour, 7.15 P.M.

How Sent, J. R. Corrigan, Jof P, County of Hennepin

Sex, male

Age, 27 years.

Civil Condition, married

Children, yes, 3

Age Youngest Child,

Occupation, Laborer

Degree Education,

Profession Religion, Is a church member; Lutheran

Habits, Supposed to be good

Nativity, Sweden

Physicians Committing, S S Kilvington & W. J. Byrnes

Correspondents, Peter Johnson, 507. Knox. A. N. Minneapolis, Minn

No. for Year, 34.

Insane Relatives, Insanity not hereditary

Cause Exciting, Dont know

Cause Predisposing,

Form, Manic - Acute

Accompanying Bodily Disorder, No; except an irritable condition of right eye existing for one year; (injury) -

Suicidal or Not, Yes; by trying to cut throat with Knife.

Date of this Attack, two weeks ago

Duration, two weeks -

No. of Attack, 1st

No. of Admissions,

Age First Attack, 27 years.

Time of Leaving, July 1st 1897

Time in Hospital, 4 yr. 10 mo 7 d.

Result, Died - Obstruction of Bowels

EXAMINATION ON ADMISSION.

Exd by Dr Giere - 10th Sep'97

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, not good

Recent Events,

Special Subjects,

PERCEPTIVITY: ordinary observation, claims is free

Alert or Dull, Answers questions pretty well; he does

Correct or Illusive, realize own conditions

REASONING POWER: Fair

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not,

Special Subjects, Is afraid they are going to throw him into

Transitory or Not, a machine. They have machines up here that they kill with; says "is afraid to die -

HALLUCINATIONS: sometimes has "of hearing" -

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Talks in answer to questions

GENERAL DESCRIPTIVE REMARKS:

Was moderate drinker in Sweden. Has not drunk any here in America. Right Eye injured by splinter from chopping wood; is somewhat congested. Says he can see with it. Asks, (on test finger to nose), "if he will be allowed to live"? Says, when he came to America, he took name of "Lundberg" and he is afraid he will be punished for it. Claims this made him "sick" - When he was in Sweden he was sick with fever, and claims his head was made "strange" thereby. Was not sick before that.

Personal and Medical History of Charles Hanson

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5½ inches WEIGHT, 149 pounds NUTRITION, not very good

WOUNDS OR ABNORMALITIES, Scar on right Eye. Abnormalities, None.

TONGUE, Tremors, ~~None~~ Coatings, clean Promptness Movement, Steady

PUPILS, Equality, unequal Size, right pupil contracted; left normal.

Response Light, left responds; right, not. Accommodation, left responds; right does not.

SIGHT, far sight very good; near, also good.

HEARING, Seems good

COORDINATION, Arms, finger to nose. Eyes shut, fairly good.

Legs, standing in foot good; standing, eyes shut, good.

TREMORS, Hands, none of Tongue, None

Facial Muscles, General,

REFLEXES, Patellar, Equal & considerably exaggerated (8-9) Dr Ps scale.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, Seems fair

FACIAL EXPRESSION, Anxious, Sad

SENSIBILITY,

HEART, Good

LUNGS, Good

Sep 8/97 P.M. EXAM. URINE, Color light yellow; reaction acid; Sp gr. 1026; albumen none; urea 4%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, yes	Careless,
BOWELS, Normal,	Constipated,	Irregular, yes
APPETITE, Good,	Medium,	Poor, yes
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Was sick with fever in Sweden ONSET GRADUAL OR SUDDEN, Has had vertigo and headaches -

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations, Grandfather dead; had paralysis; Father living.

Brothers or Sisters,

1892 This man was brought here by Deputy Crowe, with the following history. Habits are supposed to be good. Cause of attack not known; form is acute, depressed; there is an irritable condition of right eye, an injury, existing for a year. First symptoms of this disease were manifested about two weeks ago; thinks some one is going to injure him. This is the first attack. Insanity is manifested now in the fear of being injured. There is no disposition to injure others. Has attempted suicide by trying to cut throat with knife. No disposition to filthy or destructive habits. Has not been restrained or confined. Has not been under medical treatment.

Sep 8/92 Sep 8/92. Passed a comparatively restful night, sleeping 6 hours. Am. Pulse 76. Sep 9/92. Quite restless, wanting
" 10 to get out of bed, sleeping but 2 hours, last night. Sep 10/92. Restless, getting out of bed, last night, sleeping but 3 hrs
" 11 Am. Pulse 78. Sep 11/92. Was very restless, out of bed often, dressing himself, resisting strenuously being undressed.
Extremely noisy for a time, sleeping none at all, last night. Asks to be killed and made active efforts to get hold of
" 12 a knife. Is quite thin and pale. Sep 12/92. Was restless, out of bed, crying, sleeping but 1 hour last night.
" 13 Am. Pulse 72. Sep 13/92. Quite noisy for a short time, talking to himself, restless and out of bed, sleeping
" 14 but 2 hours, last night. Am. Pulse 72. Sep 14/92. Again passed a restless night, was somewhat noisy and slept
" 15 none at all, last night. Am. Pulse 80. Sep 15/92. Dressed and resisted undressing, cried, was restless,
" 16 slept 3 hours, last night. Am. Pulse 76. Sep 16/92. Somewhat restless, but better behaved than usual,
" 17 sleeping 5 hours, last night. Am. Pulse 76. Sep 17/92. Somewhat restless last night, sleeping 5 hours.
" 18 Am. Pulse 68. Sep 18/92. Was restless, getting up + wanting to dress, sleeping but 3 hours last night.
" 19 Am. Pulse 78. Sep 19/92. Out of bed, restless and noisy, sleeping but 4 hours, last night. Am. Pulse 80.
" 20 Sep 20/92. Again passed a restless night, sleeping but 4 hours. Am. Pulse 60. Sep 21/92. Restless,
" 21 and out of bed, sleeping but 4 hours, last night. Am. Pulse 92.

Oct 11 Oct 11/92. Has been, nightly, more or less restless, getting out of bed several times, and at times, noisy
Sleeping from 3 to 6 hours each night, since the last note. Weight 149 pounds. Pulse 56.

" 11 Oct 11/92. Was somewhat less restless and disturbed, sleeping from 4 to 6 hours each night,
since the last note. By day, since admission, has been clean and tidy in habits and dress. Has not
been at all noisy; has been well-behaved. Talks very little, even when spoken to; Shaking hands and
answering greetings. Sitting idly, evidently absorbed in his own meditations. For a long time,
when asked how he was, replied "that he was not well". At times, cried. Has, lately, been more
cheerful. Has, at times, done good work. Has eaten quite well. Has taken medicine. Bodily
health has been below par, but seems gaining some now.

Nov 2/92 Nov 2/92. Wt 159½ lbs. Pulse 70. Nov 9/92. Since the 11th ult. has scarcely passed a night without
being more or less restless; at times, much so, getting out of bed; quite often slightly noisy, crying;
and has slept from 2 to 7 hours; lately, somewhat better than formerly. Has continued quiet + well-behaved
by day + of good personal habits. Sits unoccupied or walks the floor. Is quite markedly depressed, more so than
" 23 at one time described above. Bodily health quite good. Nov. 24/92. For a time, since the last
note, was restless at night, but has become more restful + is sleeping quite well, at present.

Dec 5 Dec 5/92. Wt 155½ lbs. Pulse 76. Has gained 7½ lbs in past 4 weeks.

" 9 Dec 9/92. Now uniformly quiet and rests + sleeps well at night. Is more cheerful, +
" 10 little more active + communicative. Bodily health good. Dec 10/92. Has visited today
by brother.

NAME. Charles Hanson

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	168	72	1½	
Feby 3d	167	76		1.
Mar. 3d	165	82		2
Apl. 4th	165	70		
May 3d	156	82		9.
June 5th	152½	100		3½
July 1st	141½	84		11½

10/93. Uniformly quiet at night, rests and
is good. Very quiet reserved, speaking only when addressed.
at night apparently. Conduct+behavior by day remains

dial; rarely speaks unless addressed. Replies good rationally
ess.
nothing. Does not injuring.
month. May 9/93. Struck a fellow-patient today, also the
May 18/93. In the past 2 weeks has only been reported as
apparently resting + sleeping well. During the day, is silent;
of late, worked outside occasionally. Is usually quiet, but
used to button up his shirt yesterday, when requested). Answers quite
Good. May 31/93. Appetite good. Bowels are regular.
round the ward. Talks quite sensibly. Habits clean.
complains of feeling ill.
, part of the time, lately. Health seems good. —
timate of late. Better-behaved, on the whole. —
ght during last month. Probably due to outside work, as
ill-feeling. July 31/93. Appetite continues good;
dly ever speaks, unless first addressed. Works outside some.
g the floor. Habits clean.
l when, to Amer, today. =
ved. Works outside daily. Health seems good.
ents' condition.

Sept 30 Sept 30/93. Above notes hold good, still. Always quiet + well behaved.
Oct 5 Oct 5/93. Has not been reported as ugly or obstinate for some time. Still works outside.
" 31 Oct 31/93. Seems quite contented here. Physical health good. Works out daily. —
Nov 22.93 Harmless. Rather noisy of late. Works on farm. Health apparently good Dec 20.93 Has quite well of late, behaved himself.
Dec 20
Jany 31/94 Works on farm. No change. Feb 28/94. No material change. Is a quiet + inoffensive patient. Works on
Feb 28
March 31 the farm, every day. Health apparently good. March 31/94. Does not seem to change any. Still works out-
Apl 30 April 30/94. No noticeable change, for some months. Was successfully vaccinated Apl 16th. Continues to work on farm.
May 31 During this period, there is no special change to report. He is generally quiet + well behaved;
June 30 sings a good deal, when in mood + somewhat noisy in this way. Works outside, quite
July 30 regularly on the farm. Habits are clean; health apparently good. Mental condition does not change.
Aug 31 Is quiet + well-behaved, generally, but stubborn +, at times, troublesome. Has been working on farm
Sep 30 most of the time up to Aug 27. (At present is isolated on account of Sore Eyes). Health apparently good.
Oct 31 Habits clean Dress tidy. During September Eyes somewhat improved in condition. About the middle
of October patient resumed his work outside. Eyes are now quite well. ——

Transferred to A. Page 141

1892

This man was brought here by Deputy Cr
supposed to be good. Cause of attack not known
- dition of right eye, an injury, existing for a
about two weeks ago; thinks some one is go
is manifested now in the fear of being injur
suicide by trying to cut throat with K
not been restrained or confined. Has not

Sep 8/ Sep 8/92. Passed a comparatively restful nigh
" 10 to get out of bed, sleeping but 2 hours, last
" 11 Am. Pulse 78. Sep 11/92. Was very restless,
Etremely noisy for a time, sleeping now
" 12 a knife. Is quite thin and pale.
" 13 Am. Pulse 72. Sep 13/92. Quite re
" 14 but 2 hours, last night. Am. Pu
" 15 none at all, last night. Am
" 16 Slept 3 hours, last night.
" 17 Sleeping 5 hours, last night. Am.
" 18 Am. Pulse 68. Sep 18/92. Was restless, q
" 19 Am. Pulse 78. Sep 19/92. Out of bed, restless
" 20 Sep 20/92. Again passed a restless night, sleeping
" 21 and out of bed, sleeping but 4 hours, last night. Am. Pu

Oct 4 Oct 4/92. Has been, nightly, more or less restless, getting out, several times, and at times, noisy
Sleeping from 3 to 6 hours each night, since the last note. Weight 149 pounds. Pulse 56.
" 11 Oct 11/92. Has somewhat less restless and disturbed, sleeping from 4 to 6 hours each night,
since the last note. By day, since admission, has been clean and tidy in habits and dress. Has not
been at all noisy; has been well-behaved. Talks very little, even when spoken to; shaking hands, and
answering greetings. Sitting idly, evidently absorbed in his own meditations. For a long time,
when asked how he was, replied "that he was not well". At times, cried. Has, lately, been more
cheerful. Has, at times, done some work. Has eaten quite well. Has taken medicine. Bodily
health has been below par, but seems gaining some now.

Nov 2/ Nov 2/92. Wt 159½ pds. Pulse 70. Nov 9/92. Since the 11th ult. Has scarcely passed a night without
being more or less restless; at times, much so, getting out of bed; quite often slightly noisy, Crying;
and has slept from 2 to 7 hours; lately, somewhat better than formerly. Has continued quiet & well-behaved
by day & of good personal habits. Sits unoccupied or walks the floor. Is quite markedly depressed, more so than
" 23 at one time described above. Bodily health quite good. Nov. 24/92. For a time, since the last
note, was restless at night, but has become more restful & is sleeping quite well, at present.
Dec 5 Dec 5/92. Wt 158½ pds. Pulse 76. Has gained 7½ pds in past 11 weeks.
" 9 Dec 9/92. Is now uniformly quiet and rests & sleeps well at night. Is more cheerful, &
" 10 little more active & communicative. Bodily health good. Dec 10/92. Has visited today
by brother. ——

1893

Jan 3/ Jan 3/93. Wt 168 pds. Pulse 72. Jan 10/93. Is uniformly quiet at night, resting and
10 sleeping well. Takes food well. Habits good. Very quiet & reserved, speaking only when addressed.
Feb 10 Feb 10/93. Uniformly quiet, resting well at night, apparently. Conduct & behavior by day remains
unchanged. Bodily health good.
Mar 30 March 30/93. Walks the hall a good deal; rarely speaks unless addressed. Replies good rationally
but rather sillily. Is slouchy in dress.
Apl 17 April 1/93. Walks the floor restlessly, saying nothing. Is not improving.
May 3/ May 3/93. Has lost 9 pounds in the past month. May 9/93. Struck a fellow-patient today, also the
18 attendant who interfered. Was moved to B3. May 18/93. In the past 2 weeks has only been reported as
restless for an hour or so on but 2 nights, apparently resting & sleeping well. During the day, is silent;
walks up & down the hall a good deal. Has, of late, looked outside occasionally. Is usually quiet, but
inclined to be ugly at times & obstinate (refused to button up his shirt yesterday, when requested). Answers quite
" 31 promptly when spoken to. Health and appetite good. May 31/93. Appetite good. Bowels are regular.
Is stubborn & cranky at times. Works some on the ward. Talks quite sensibly. Habits clean.
Has lost some in flesh, but does not complain of feeling ill.
June 5 June 5/93. Has been working outside, part of the time, lately. Health seems good. —
" 30 June 30/93. Has been less stubborn & obstinate of late. Better-behaved, on the whole. —
July 1 July 1/93. Has lost 11½ pounds in weight during last month. Probably due to outside work, as
" 31 he does not seem to complain of any ill-feeling. July 31/93. Appetite continues good;
bowels regular. Is quietly-behaved. Hardly ever speaks, unless first addressed. Works outside some.
When not so doing, is restless, walking the floor. Habits clean.
— Was transferred, with several others, to Annex, today. =
Aug 5 Aug 15/93. Has been quiet & well-behaved. Works outside daily. Health seems good.
" 31 Aug 31/93. No material change in patient's condition.
Sep 15 Sept 15/93. Quiet. Works outside on farm, nearly all the time. Health apparently good.
" 30 Sept 30/93. Above note holds good, still. Always quiet & well behaved.
Oct 5 Oct 5/93. Has not been reported as ugly or obstinate for some time. Still works outside.
" 31 Oct 31/93. Seems quite contented here. Physical health good. Works out daily. —
Nov 22 93 Harmless. Rather noisy plate. Works on farm. Health apparently good Dec 20 93 Is quiet and Polite, but at present
Dec 30 Jany 31/94 Works on farm No change. Feb 28/94. No material change. Is a quiet & inoffensive patient. Works on
Feb 28 the farm, every day. Health apparently good. March 31/94. Does not seem to change any. Still works out
March 31 April 30/94. No noticeable change for some months. Was successfully vaccinated Apl 16th. Continues to work on farm
Apl 30 During this period, there is no special change to report. He is generally quiet & well behaved;
May 31 June 30 July 30 likes a good deal, when inward & is somewhat noisy in this way. Works outside, quite
regularly on the farm. Habits are clean; health apparently good. Mental condition does not change.
Aug 31 Sept 30 Oct 31 Is quiet & well-behaved, generally, but stubborn & at times, troublesome. Has been working on farm
most of the time up to Aug 27. (At present is isolated on account of Sore eyes). Health apparently good.
Habits clean & dress tidy. During September Eyes somewhat improved in condition. About the middle
of October patient resumed his work outside. Eyes are now quite well. —— ——

Transferred to A. page 141

Whole No. 3123.

No. for Year, 35.

Residence, 590 John St. St Paul.

Date Admission, 7th September 1896

Admitted by, Dr Kilbourne Hour, 7.15

How Sent, Sher. Mc Orr, Court Com

Insane Relatives, none known

Sex, male

Age, 38 years

Civil Condition, single

Children, none

Age Youngest Child,

Occupation, Lathing in Saw-m

Degree Education,

Profession Religion, not a church m

Habits, Temperate

Nativity, Maine

Physicians Committing, C. E. Riggs & A. W. Dunning

Correspondents, Mr C. D. Felton; 590 John Street

15/9/96 Mrs C. D. Felton - 532 Niagara St. Eaullaire Wis. St Paul

Re Bradford. A. Cummings

Verified petition of Mrs Nettie. A. Felton, Sister of patient, to be appointed Guardian of Estate of said B. A. Cummings, to be heard at the regular term of the County Court, in the City of Eaublaire, Wisconsin, on Tuesday, 3rd April 1894 at 9. a.m.

Dated March 31/94 (notice) & noted as received here March 5/94.

Hospital, 4 yrs. 7 mos. 1 da

Discharged May 5-97. Improved.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr Baker 10th Sep'gr.

MENTAL ACTIVITY: rather deliberate

Clear or Confused, Clear

Quick or Sluggish,

MEMORY:

Past Events, he says is fairly good

Recent Events, seems good

Special Subjects,

PERCEPTIVITY: ordinary observation good; answers

Alert or Dull, questions well; does realize own

Correct or Illusive, condition.

REASONING POWER: Good

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS: none definite detected

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: probably none

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, fairly free when questioned.

GENERAL DESCRIPTIVE REMARKS:

Has been temperate. Narcotics, none used. Has "aurora senilis". Involuntary movement of facial muscles. Seems rather awkward & stiff. Says some of his aunts died of consumption. Has "spells" when things seem to whirl or swim about before his eyes; feels sick; does not fall; they last sometimes an hour or so; head feels dull at these times. Worked until about 3 months ago; lost money; had bad luck; got discouraged; head and brain feel as if there was a weight upon it. Has a "deadly feeling" - Does not sleep well: is troubled with Insomnia.

FOUND DEAD IN BED

B. A. CUMMINGS KILLED BY AN OVERDOSE OF MORPHINE.

Deputy Coroner Nelson Is Unable to State Whether the Drug Was Taken With Suicidal Intent.

Apl-26/97

The dead body of B. A. Cummings was found in his room in the Empire hotel, 10[illegible] Washington avenue south, last evening. Appearances indicated that the man had died from an overdose of morphine. A post mortem examination will be held this morning.

Cummings, who was about 45 years of age, came to the hotel Saturday night and engaged a room. Nothing peculiar was noticed in his actions, and the last seen of him alive was by the proprietor who took a pitcher of water to him Saturday night. He did not rise yesterday morning. Thinking he was tired, he was allowed to sleep, but last evening, no response being made to frequent calls, the door was broken in. The lifeless body was found in bed. Deputy Coroner Henry S. Nelson had the remains removed to the morgue.

From letters found on his person, it appears that Cummings has just been released from the Rochester asylum. One letter dated April 20 was signed "Mother" and had been sent from Eau Claire, Wis., to Cummings at Rochester. In it his mother told of her expectation of his arrival home and said she would send money if needed. Reference was also made to money sent previously.

In the room were found a pill box of morphine and an empty morphine bottle. Deputy Coroner Nelson does not think the man committed suicide. The evidences show that he had evidently been treated for the morphine habit at the asylum. Upon being released and not fully cured, he overdosed himself with the drug, and this caused his death. Word was sent to the Rochester authorities, and the Eau Claire chief of police, who was asked to notify his mother.

ATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

IGHT, 169 pounds NUTRITION, Fairly good

bly none

Coatings, slight Promptness Movement, somewhat irregular. moderate promptness

Size, about normal

to dilate fully Accommodation, yes

s, tongue to nose, eyes shut, some inaccuracy at times.

, standing erect, fairly good; standing, eyes shut, steady; turning quickly, gets dizzy. some hesitation

Tongue, quite tremulous, fine & coarse

es, Coarse irregular movements of, in intention General,

Equal; somewhat exaggerated; (6-1) D. Pt scale

xes,

ARTICULATION, Hesitating, somewhat measured Slurred, seems fair

FACIAL EXPRESSION, rather sad & gloomy; also somewhat stolid.

SENSIBILITY,

HEART, Seems good

LUNGS, Seem good. Chest 37½" Expansion 2½"

EXAM. URINE, Color yellow; reaction acid; Sp. gr. 1030; albumen none; urea 1.3%.

Sp 9/9/96 Dr M.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, about, now.	Constipated, but tendency to be.	Irregular,
APPETITE, Good, not very.	Medium,	rather Poor,
SLEEP, Good,	Poor, Does not sleep well is	Irregular, troubled with Insomnia.
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, has had two previous attacks ONSET GRADUAL OR SUDDEN, Sudden, he says. has had (convulsions) & vertigo.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, mother living; claims fair health. Paternal grandmother was subject to nervous disease

Father or Pat. Relations, Father died of fever; comparatively young.

Brothers or Sisters, no brother living; claims good health. 3 Sisters, all living; one's health not very good; has trouble with stomach.

Personal and Medical History of Bradford, A. Cummings

Whole No. 3123.

Residence, 590 John St. St Paul.

Date Admission, 7th September 1897

Admitted by, Dr Kilbourne Hour, 7.15

How Sent, Grier. M. Orr, Court Com

Sex, male

Age, 38 years

Civil Condition, single

Children, none

Age Youngest Child,

Occupation, Lathing in Saw-m

Degree Education,

Profession Religion, not a church m

Habits, Temperate

Nativity, Maine

Physicians Committing, C. E. Riggs & A. W. Dunning

Correspondents, Mr C. A. Felton; 590 John Street

9/9/97 Mr C. A. Felton - 532 Niagara St. Eau Claire Wis. St Paul

No. for Year, 35.

Insane Relatives, none known

Exciting, none discoverable

Predisposing,

Melancholia - Acute

Annoying Bodily Disorder, No

Whether Not, Attempted, by hanging.

This Attack, about 6 weeks ago

about 6 weeks

Attack, not the first (2 previous ones)

Admissions,

Attack, Went 2-6

Leaving, Apr. 24. 1897

Hospital, 4 yrs. 7 mos. 7 days,

Discharged May 5-97. Improved.



EXAMINATION ON ADMISSION.

Exd by Dr Baker 10th Sep'97.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY: rather deliberate

Clear or Confused, Clear

Quick or Sluggish,

MEMORY:

Past Events, he says is fairly good

Recent Events, Seems good

Special Subjects,

PERCEPTIVITY: ordinary observation good; answers

Alert or Dull, questions well; does realize own

Correct or Illusive, condition.

REASONING POWER: Good

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS: None definite detected

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Probably none

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, fairly free when questioned.

GENERAL DESCRIPTIVE REMARKS:

Has been temperate. Narcotics, none used. Has aurea tenuis". Involuntary movement of facial muscles seems rather awkward & stiff. Says some of his aunts died of consumption. Has "spells" when things seem to whirl or swim about before his eyes; feels sick; does not fall; they last sometimes an hour or so; head feels dull at these times. Worked until about 2 months ago, lost money; had bad luck; got discouraged; head and brain feel as if there was a weight upon it. Has a "deadly feeling" - Does not sleep well: is troubled with Insomnia.

FOUND DEAD IN BED

B. A. CUMMINGS KILLED BY AN OVERDOSE OF MORPHINE.

Deputy Coroner Nelson Is Unable to State Whether the Drug Was Taken With Suicidal Intent.

Mrs Swenson April-26/97

The dead body of B. A. Cummings was found in his room in the [illegible]

[illegible] deceased and not fully cured, he overdosed himself with the drug, and this caused his death. Word was sent to the Rochester authorities, and the Eau Claire chief of police, who was asked to notify his mother.

ATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

[illegible] pounds NUTRITION, Fairly good

[illegible]

Slight Promptness Movement, somewhat irregular. moderate promptness

Size, about normal

[illegible]fully Accommodation, Yes

some inaccuracy at times.

Standing, Eyes shut, steady; turning quickly, yet dizzy, some hesitation

Tongue, Quite tremulous, fine & coarse

[illegible] General,

[illegible] Equal; somewhat exaggerated; (6-7) D. P. Scale

[illegible]xes,

ARTICULATION, Hesitating, somewhat measured Slurred, Seems fair

FACIAL EXPRESSION, rather sad + gloomy; also somewhat stolid.

SENSIBILITY,

HEART, Seems good

LUNGS, Seem good. Chest 37½in Expansion 2½in

Sep 9/97 Dr M. EXAM. URINE, Color yellow; reaction acid; Sp. gr. 1030; albumen none; urea 1.3%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, about, now.	Constipated, but tendency to be.	Irregular,
APPETITE, Good, not very.	Medium,	rather Poor,
SLEEP, Good,	Poor, Does not sleep well is	Irregular, troubled with Insomnia.
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, has had two previous attacks ONSET GRADUAL OR SUDDEN, Sudden, he says. has had (convulsions) & vertigo.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, mother living; claims fair health. Paternal grandmother was subject to nervous disease

Father or Pat. Relations, Father died of fever; comparatively young.

Brothers or Sisters, mother living; claims good health. 3 Sisters, all living; one's health not very good; has trouble with stomach.

Whole No. 3123.

Residence, 590 John St. St Paul.

Date Admission, 7th September 1

Admitted by, Dr Kilbourne Hour, 7.15

How Sent, Gner. M. Orr, Court Com

Sex, male

Age, 38 years

Civil Condition, single

Children, none

Age Youngest Child,

Occupation, Lathing in Saw-m

Degree Education,

Profession Religion, not a church m

Habits, Temperate

Nativity, Maine

Physicians Committing, C. E. Riggs & A. W. Dunning

Correspondents, Mr C. A. Felton; 590 John Street St Paul

1/19/94 Wm C. A. Felton - 532 Niagara St. Eau Claire Wis

No. for Year, 35.

Insane Relatives, none known

Re Bradford A. Cummings

Verified petition of Wm Nettie A. Felton, Sister of patient, to be appointed Guardian of Estate of said B. A. Cummings, to be heard at the regular term of the County Court, in the City of Eau Claire, Wisconsin, on Tuesday, 3rd April 1894. at 9 a.m.

Dated March 3/94 (notice) & noted as received here March 5/94.

Hospital, 4 yrs. 7 mo. 1 da.

Discharged May 5-97. Improved.

EXAMINATION ON ADMISSION.

Evid by Dr Baker 10th Sep'gr.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY: rather deliberate

Clear or Confused, Clear

Quick or Sluggish,

MEMORY:

Past Events, he says is fairly good

Recent Events, Seems good

Special Subjects,

PERCEPTIVITY: ordinary observation good; Answers

Alert or Dull, questions well; does realize own

Correct or Illusive, condition.

REASONING POWER: Good

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS: None definite detected

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: probably none

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, fairly free when questioned.

GENERAL DESCRIPTIVE REMARKS:

Has been temperate. Narcotics, none used. Has "arcus senilis". Voluntary movement of facial muscles seems rather awkward & stiff. Says some of his Aunts died of consumption. Has "spells" when things seem to whirl or swim about before his eyes; feels sick; does not fall; they last sometimes an hour or so; head feels dull at these times. Worked until about 2 months ago, lost money; had bad luck; got discouraged; head and brain feel as if there was a weight upon it. Has a "deadly feeling" - Does not sleep well; is troubled with Insomnia.

Correspondent
B. A. Cummings
Mrs Nettie Felton
540. Niagara St
Eau Claire
Wis.
4/6/97

ATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

IGHT, 169 pounds NUTRITION, Fairly good

Coatings, slight Promptness Movement, somewhat irregular moderate promptness

Size, about normal

Accommodation, yes

COORDINATION, Arms, finger to nose, eyes shut, some inaccuracy at times

Legs, Standing on foot, fairly good; Standing eyes shut, steady; turning quickly, gets dizzy — some hesitation

TREMORS, Hands, some of Tongue, Quite tremulous, fine & coarse

Facial Muscles, Coarse irregular movements of, in intention General,

REFLEXES, Patellar, Equal; somewhat exaggerated; (6-7) D. Ps scale

Other Reflexes,

ARTICULATION, Hesitating, somewhat measured Slurred, seems fair

FACIAL EXPRESSION, rather sad & gloomy; also somewhat stolid.

SENSIBILITY,

HEART, Seems good

LUNGS, Seem good. Chest 37½ in Expansion 2½ in

Sep 9/94 Dr M. EXAM. URINE, Color yellow; reaction acid; Sp gr 1030; albumen none; urea 1·3 %.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes,	Careless,
BOWELS, Normal, about now.	Constipated, bit tendency to be.	Irregular,
APPETITE, Good, not very.	Medium,	Rather Poor,
SLEEP, Good,	Poor, Does not sleep well is	Irregular, troubled with Insomnia.
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Has had two previous attacks ONSET GRADUAL OR SUDDEN, Sudden, he says. has had (Convulsions) or vertigo.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, mother living; claims fair health. Paternal grandmother was subject to nervous disease

Father or Pat. Relations, Father died of fever; comparatively young.

Brothers or Sisters, no brother living; claims good health. 3 Sisters, all living; one's health not very good; has trouble with stomach.

Whole No. 3123.

Residence, 590 John St. St Paul.

Date Admission, 7th September 1896

Admitted by, Dr Kilbourne Hour, 7.15

How Sent, Grier M Orr, Court Com

Sex, male

Age, 38 years

Civil Condition, single

Children, none

Age Youngest Child,

Occupation, Lathing in Saw-m

Degree Education,

Profession Religion, not a church m

Habits, Temperate

Nativity, Maine

Physicians Committing, C. E. Riggs & A. W. Dunning

Correspondents, Mr C. A. Felton; 590 John Street

1/19/04 Mr C. A. Felton - 552 Niagara St - Faulkaire Wis St Paul

No. for Year, 35.

Insane Relatives, none k

Re Bradford A. Cumm.

Verified petition of Mrs Nettie ... of patient, to be appointed Guard... of said B. A. Cummings, to be heard at the ... term of the County Court, in the City of Eau Cla... Wisconsin, on Tuesday, 3rd April 1894 at 9 a.m.

Dated March 31/94 (notice) & noted as received here March 5/94.

...lospital, 4 yrs. 7 mo. 1 da...

Discharged May 5-97. Improved.

EXAMINATION ON ADMISSION.

Exd by Dr Baker 10th Sep'gr.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY: rather deliberate

Clear or Confused, Clear

Quick or Sluggish,

MEMORY:

Past Events, he says is fairly good

Recent Events, seems good

Special Subjects,

PERCEPTIVITY: ordinary observation good; answers

Alert or Dull, questions well; does realize own

Correct or Illusive, condition.

REASONING POWER: Good

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS: None definite detected

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: probably none

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, fairly free when questioned.

GENERAL DESCRIPTIVE REMARKS:

Has been temperate. Narcotics, none used. Has arcus senilis. Voluntary movement of facial muscles seems rather awkward & stiff. Says some of his aunts died of consumption. Has ill spells "when things seem to whirl or swim about before his eyes; feels sick; does not fall; they last sometimes an hour or so; head feels dull at these times. Worked until about 2 months ago, lost money; had bad luck; got discouraged; tried and brain feels as if there was a night upon it. Has a "deadly feeling" - Does not sleep well: is troubled with Insomnia.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 inches WEIGHT, 169 pounds NUTRITION, Fairly good

WOUNDS OR ABNORMALITIES, probably none

TONGUE, Tremors, quite tremulous fine & coarse Coatings, slight Promptness Movement, somewhat irregular moderate promptness

PUPILS, Equality, Equal Size, about normal

Response Light, Yes; do not seem to dilate fully in the dark Accommodation, Yes

SIGHT, somewhat short sighted.

HEARING, Good

COORDINATION, Arms, fingers to nose, eyes shut, some inaccuracy at times.

Legs, standing on foot, fairly good; standing, eyes shut, steady; turning quickly, gets dizzy

TREMORS, Hands, some of Tongue, Quite tremulous fine & coarse some hesitation

Facial Muscles, Coarse irregular movements of, in intention General,

REFLEXES, Patellar, Equal; somewhat exaggerated; (6-1) D. B. Scale

Other Reflexes,

ARTICULATION, Hesitating, somewhat measured Slurred, seems fair

FACIAL EXPRESSION, rather sad & gloomy; also somewhat stolid.

SENSIBILITY,

HEART, Seems good

LUNGS, Seem good. Chest 37½ in Expansion 2½ in

Sep 9/97 Dr M. EXAM. URINE, Color yellow; reaction acid; Sp gr. 1030; albumen none; urea 1.3%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, about now. Constipated, but tendency to be. Irregular,

APPETITE, Good, not very. Medium, rather Poor,

SLEEP, Good, Poor, Does not sleep well is Irregular, troubled with Insomnia.

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, has had two previous attacks ONSET GRADUAL OR SUDDEN, Sudden, he says. has had (convulsions) & vertigo.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, mother living; claims fair health. Paternal grandmother was subject to nervous disease

Father or Pat. Relations, Father died of fever; comparatively young.

Brothers or Sisters, no brothers living; claims good health. 3 sisters, all living; one's health not very good; has trouble with stomach.

1892

This man was brought by Deputy Couteau, with the following history. Is of temperate habits; no discoverable cause of this attack; form is acute; no accompanying bodily disease. First symptoms of disease manifested about 6 weeks ago; was despondent and sleepless; this is not the first attack; 12 years ago was in Hospital for Insane at Madison, Wis; and 8 years ago went to Oshkosh, for 3 months. Insanity is now manifested by extreme melancholia. Has shown no disposition to injure others. Has attempted suicide by hanging. Has no disposition to filthy or destructive habits. No peculiarities &c shown; Has been confined at hospitals, as above;

Sep 8 Sep 8/92. Was restless and slept none at all last night. Coughed considerable during the night. Am. P 84.
" 9/0 Tongue is Coated. Sep 9/92. Was restless for 3 hours, sleeping 4 hours, last night. Sep 10/92. Rested
" 11 somewhat better, sleeping 5 hours, last night. Am. Pulse 76. Sep 11/92. Was somewhat restless, sleeping
" 12 but 4 hours, last night. Complains that he cannot sleep. Sep 12/92. Was restless for a couple of hours
" 13 sleeping 5 hours last night. Am. Pulse 68. Sep 13/92. Somewhat restless, sleeping but 3 hours last night.
" 14 Am. Pulse 70. Sep 14/92. Restless for a couple of hours, sleeping 5 hours, last night. 5:30 am. Pulse 112 -
" 15 9:30 am. Pulse 92. Had some chill, and has headache, at present. Sep 15/92. Slept 6 hours last night.
" 16 Am. Is constipated. Pulse 84. R 21. T(1) 99.4. Pm. Pulse 80. R 23. T(1) 99.2. Sep 16/92. Quite restless last night, coughed some, and slept but 2 hours. Am. Pulse 86. R 20. T(1) 98.4. Says "he feels sick all over; in no particular place". Has been in bed for the past 2 days, lying there very quietly and
" 17 willingly. Pm. Pulse 86. R 22. T(1) 99. - Sep 17/92. Somewhat restless & coughed some, sleeping 3 hours
" 18 last night. Am. Pulse 78. R 24. T(1) 98.6. Pm. Pulse 82. R 22. T(1) 98.8. Sep 18/92. Was very restless by spells last night, sleeping but 2 hours. Am. Pulse 88. R 21. T(1) 98.8. Says he feels worse today but cannot locate any particular pain. Tongue is coated & breath very offensive; given Cathartic. Pm. P 102. R 24. T(1) 99.8.
" 19 Sep 19/92. Restless for 4 hours, sleeping 3 hours, last night. Am. Pulse 82. R 23. T(1) 98.6. Pm. P 108. R 22. T(1) 99.4
" 20 Sep 20/92. Was quite restless last night, sleeping but 2 hours. Am. Pulse 90. R 22. T(1) 99. - Says he feels a little
" 21 better, but complains of his head. Pm. Pulse 90. R 22. T(1) 99.6. Sep 21/92. Quite restless for 5 hours, sleeping
" 22 2 hours, last night. Am. Pulse 96. R 21. T(1) 99. Pm. Pulse 88. R 20. T(1) 98.8. Sep 22/92. Restless, sleeping
" 23 3 hours last night. Am. Pulse 88. R 20. T(1) 99.2. Pm. Pulse 94. R 20. T(1) 98.8. Sep 23/92. Restless, sleeping
" 24 but 4 hours last night. Am Pulse 90. R 21. T(1) 99.6. Pm. Pulse 84. R 20. T(1) 99. - Sep 24/92. Am. P 90. R 21. T(1) 98.6.
" 25 looks a little brighter. 7 Pm. Pulse 62. R 22. T(1) 99. - Sep 25/92. Am. Pulse 89. R 19. T(1) 98.6. 7 Pm. P 68. R 20. T(1) 99.4
" 26 Sep 26/92. Am. Pulse 68. R 18. T(1) 98.2. Complains of his head and bowels. Pm. Pulse 84. R 19. T(1) 98.8. —
" 27/28 Sep 27/92. Am " 86 " 18 " 98.4 Pm. Pulse 84. R 18. T(1) 99. Sep 28/92. Am. " 82 " 19 " 98.4 looks brighter
" 29 Pm. Pulse 80. R 19. T(1) 99.2). Sep 29/92. Am " 84 " 22 " 99.2. Pm. Has kept his bed since the 15th inst.
Has been requested to get up several times, but is reluctant to do so, not feeling that he was able to get up.
" 30 Was finally got up & dressed to day. Sep 30/92. Is up today on the hall. Since the 23d inst. has been more or less restless each night, at times coughing some and sleeping from 3 to 5 hours. The above record of pulse, respiration and temperature, shows almost no disturbance of temperature, very slight of respiration; in a time considerable acceleration of pulse, later followed by slowness; there was considerable coating of the tongue, it being large & tooth-marked, and often breath offensive; bowels sluggish; appetite was irregular and at no time very good; cough present, chiefly at night. There were no local physical symptoms, but a general mal-aise. Patient complaining, in a general way, of feeling badly; was dull and depressed.

Oct 4/92 Oct 4/92. Wt. 171 lbs. Pulse 80. Oct 1/92. Since the 30th ult., has gradually grown less restless

1892

NAME. B. A. Cummings

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jan 3d	186	96		2½
Feb 3d	187	78	1	
Mar 2d	184	76		3
April 1st	190	86	6	
May 3d	186	67		4
June 1st	188	64	2	
July 14th	183½	92		4½
Aug 2d	183	78		½
Sept 1st	164½	72	1½	
Oct 3d	186½	76	2	

hours a night. After getting up on the 29th ult. to, for several
quite frequently lying down during the day. Has grown
long, been clean, tidy & well behaved. Has been disinclined to talk,
act deliberate, speech slow, look gloomy, depressed in spirits.

gained 11 pounds, the past month.
, quite often, at night, having, on the whole, slept better,
does not talk freely, and mingle with his fellows freely,
depressed. Bodily health good.
nues to gain in weight.
well at night. Taciturn and reserved, seeming to
that he feels fairly well, when this is questioned. Bodily

12/93. Quiet at night, sleeping well, apparently. —
sidesly & stealthily about the ward. Has avoided
y, that he does not feel well.
t night. Still very quiet by day. Conduct and be-
lth seems quite good.
ght. Sits apart from others with eyes covered by hand,
ond when addressed or questioned. Still depressed.
to B¹. —

panions & conversation, but has seemed a little more

pressed look, though, on the whole, seems somewhat brighter
pproachable to his addresses, but is still inclined to keep
good bodily health - Sleeps, probably good. —

31 May 31/93. Appetite poor. Always keeps by himself. Talks but little. Seems to try to avoid others.
Is quite depressed. Works a little inward. Reads considerably. —
June 5/30 June 5/93. Maintains his weight quite well. June 30/93. Probably eats & sleeps well, at night.
appetite very poor; bowels regular. Quiet & well behaved. Never talks except when spoken to.
Does no work now. Appears depressed, still.
July 1st July 1/93. Has lost some in flesh the past 4 weeks. Opt. does not complain of any ill-feeling. —
" 30 July 30/93 Sleeps well at night. Appetite very poor. Bowels normal. Does not take part
in any games or; always keeps by himself. Works some on ward. Keeps about the same, all the time.
Is somewhat inclined to be untidy in dress. Is in apparently good physical condition. —
Aug 1st Aug 1/93. Weight fluctuates somewhat, yet general health seems quite good. Aug 14/93. Is not
inclined to talk much. Reads a good deal. Does not take part in games. Appears very much depressed.
31 Appetite is poor. Aug 31/93. Is about the same, all the time. Inclined to shun the Company of his fellow patients.
Sept 1/8 Sept. 1/93. Maintains his weight quite well. Sep 26/93. Very depressed at times & it being feared he might
show suicidal tendencies (as he was heard to express himself much) he was to day moved to B³. —

(carried to p. 48)

1892 This man was brought by Deputy
habits; no discoverable cause of the
first symptoms of disease manif
first attack; 12 years ago
Oshkosh, for 3 months
- position to in
destructive habits.

Sep 8 Sep 8/92. Was restless a... Am. P 84.
" 9/10 Tongue is coated. Sep 9/92. ...10/92. Rested
" 11 somewhat better, sleeping ...at restless, sleeping
" 12 but 4 hours, last night. Co... restless for a couple of hours
" 13 sleeping 5 hours last night. Am ..., sleeping but 3 hours last night.
" 14 Am. Pulse 70. Sep 14/92. Restless ..., last night. 830 Am. Pulse 112 -
" 15 9 30 Am. Pulse 92. Had some chill, and Sep 15/92. Slept 6 hours last night.
" 16 Am. Is constipated. Pulse 84. R 21. ... 60. R 23. T 99.2. Sep 16/92. Quite
restless last night, coughed some, and ... hours. Am. Pulse 86. R 20. T 98.4. Says "he feels
sick all over; in no particular place". Has bee... bed for the past 2 days, lying there very quietly and
" 17 willingly. Pm. Pulse 86. R 22. T 99. - Sep 17/92. Somewhat restless & coughed some, sleeping 3 hours
" 18 last night. Am. Pulse 78. R 22. T 98.6. Pm. Pulse 82. R 22. T 98.8. Sep 18/92. Was very restless by spells
last night, sleeping but 2 hours. Am. Pulse 88. R 21. T 98.8. Says he feels worse today, but cannot locate
any particular pain. Tongue is coated & breath very offensive; given laxative. Pm. P 102. R 24. T 99.8.
" 19 Sep 19/92. Restless for 4 hours, sleeping 3 hours, last night. Am. Pulse 82. R 23. T 98.6. Pm. P 108. R 22. T 99.4
" 20 Sep 20/92. Was quite restless last night, sleeping but 2 hours. Am. Pulse 92. R 22. T 99. - Says he feels a little
" 21 better, but complains of his head. Pm. Pulse 90. R 22. T 99.6. Sep 21/92. Quite restless for 5 hours, sleeping
" 22 2 hours, last night. Am. Pulse 96. R 21. T 99. Pm. Pulse 88. R 20. T 98.8. Sep 22/92. Restless, sleeping
" 23 3 hours last night. Am. Pulse 88. R 20. T 99.2. Pm. Pulse 94. R 20. T 98.8. Sep 23/92. Restless, sleeping
" 24 but 4 hours last night. Am Pulse 96. R 21. T 99.6. Pm. Pulse 84. R 20. T 99. - Sep 24/92. Am. P 70. R 21. T 98.6.
" 25 looks a little brighter. 7 Pm. Pulse 62. R 22. T 99. - Sep 25/92. Am. Pulse 89. R 19. T 98.6. 7 Pm. P 68. R 20. T 99.4
" 26 Sep 26/92. Am. Pulse 68. R 18. T 98.2. Complains of his head and bowels. Pm. Pulse 84. R 19. T 98.8. —
" 27/28 Sep 27/92. Am " 86 " 18 " 98.4 Pm. Pulse 84. R 18. T 99. Sep 28/92. Am " 82 " 19 " 98.4 — looks brighter
" 29 Pm. Pulse 80. R 19. T 99(2). Sep 29/92. Am " 84 " 22 " 99.2. Pm. Has kept his bed since the 15th inst.
Has been requested to get up several times, but is reluctant to do so, not feeling that he was able to get up.
" 30 Was finally got up & dressed to day. Sep 30/92. Is up today on the hall. Since the 23d inst. has been more or
less restless each night, at times coughing some and sleeping from 3 to 5 hours. The above record of pulse,
respiration and temperature, shows almost no disturbance of temperature, very slight of respiration; in a
time considerable acceleration of pulse, later followed by slowness; there was considerable coating of the tongue,
it being large & tooth-marked, and often breath offensive; bowels sluggish; appetite was irregular and at no
time very good; cough present, chiefly at night. There were no local physical symptoms, but a general
mal-aise. Patient complaining, in a general way, of feeling badly; was dull and depressed.

Oct 4 Oct 4/92. Wt. 171 lbs. Pulse 80. Oct 1/92. Since the 30th ult., has gradually grown less restless

at night, sleeping better, from 5 to 8 hours a night. After getting up on the 29th ult., for several days seemed weak and claimed he was, quite frequently lying down during the day. Has grown through and is now up all day. Has, all along, been clean, tidy & well behaved. Has been disinclined to talk, speaking only when addressed; bodily movements deliberate, speech slow, look gloomy, depressed in spirits. Is, at present, a trifle more cheerful.

Nov 2 Nov 2/92. Wt 182 lbs. Pulse 70. Has gained 11 pounds, the past month.
" 12 Nov 12/92. Has been somewhat restless, quite often, at night, having, on the whole, slept better, Usually 6 to 7 hours, per noc'nd. Still does not talk freely, and mingle with his fellows freely, but seems a little more active and less depressed. Bodily health good.
Dec 5 Dec 5/92. Wt 188½ lbs. Pulse 76. Continues to gain in weight.
" 14 Dec 12/92. Quiet, resting and sleeping well at night. Taciturn and reserved, seeming to try to escape meeting the Dr., but saying that he feels fairly well, when he is questioned. Bodily health good.

1893
Jan 3/93 Jan 3/93. Wt 186 lbs. Pulse 96. Jan 12/93. Quiet at night, sleeping well, apparently. — very quiet by day, moving rather noiselessly & stealthily about the ward. Has avoided meeting the Physician. Said recently, that he does not feel well.
Feb 14 Feb 13/93. Apparently quiet & restful at night. Still very quiet by day. Conduct and behavior about as usual. Bodily health seems quite good.
Mar 23 March 28/93. Uniformly quiet at night. Sits apart from others with eyes covered by hand, saying nothing, doing nothing. Responds when addressed or questioned. Still depressed.
" 29 Mar 29/93. Today transferred from B2 to B1. —
Apl 13 Apl 13/93. Still inclined to avoid companions & conversation, but has seemed a little more bright & cheerful. —
May 18 May 18/93. Still wears a somewhat depressed look, though, on the whole, seems somewhat brighter and more cheerful. Is a little more approachable to his addresser, but is still inclined to keep apart from his fellow-patients. Has good bodily health. Sleeps, probably good. —
" 31 May 31/93. Appetite poor. Always keeps by himself. Talks but little. Seems to try to avoid others. Is quite depressed. Looks a little inward. Reads considerably. —
June 5/30 June 5/93. Maintains his weight quite well. June 30/93. Probably eats & sleeps well at night. appetite very poor; bowels regular. Quiet & well behaved. Never talks except when spoken to. Does no work now. Appears depressed, still.
July 1 July 1/93. Has lost some in flesh the past 4 weeks. Yet, does not complain of any ill-feeling. —
" 30 July 30/93 Sleeps well at night. Appetite very poor. Bowels normal. Does not take part in any games or; always keeps by himself. Looks some on ward. Keeps about the same, all the time. Is somewhat inclined to be untidy in dress. Is in apparently good physical condition. —
Aug 1 Aug 1/93. Weight fluctuates somewhat, yet general health seems quite good. Aug 14/93. Is not inclined to talk much. Reads a good deal. Does not take part in games. Appears very much depressed.
" 31 Appetite is poor. Aug 31/93. Is about the same, all the time. Inclined to shun the company of his fellow-patients.
Sept 1/8 Sept 1/93. Maintains his weight quite well. Sep 7/93. Very depressed at times & at being feared he might show suicidal tendencies (as he was heard to express so much) he was to day moved to B2. —

(Carried to p. 48)

Personal and Medical History of Charles Neihardt

Whole No. 3127

Residence, Wabasha, Minn

Date Admission, 13th (14th) September 1892

Admitted by, Dr Phelps Hour, 1 P.M.

How Sent, Malcolm Kennedy, Jof P, Wa

Sex, male

Age, 21 years

Civil Condition, single

Children, —

Age Youngest Child,

Occupation, has no occupation

Degree Education,

Profession Religion, not a church member

Habits, has just been released from Reform School

Nativity, Reeds Landing, Minn

Physicians Committing, J. B. Cole and Geo. C. Wellmer

Correspondents,



No. for Year, 39.

Relatives, none (Insanity believed not hereditary)

Exciting, Masturbation

Predisposing,

Mania – Chronic

Any Bodily Disorder, none known

Or Not, not

This Attack, not stated;

not given.

Attack, not the first

Remissions,

Attack, not stated

Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

Exd by Dr Baker Sept 28/92

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, fairly quick

MEMORY:

Past Events,

Recent Events, seems quite poor

Special Subjects,

PERCEPTIVITY: Answers questions after some hesitation

Alert or Dull, ordinary observation fair, but errs.

Correct or Illusive, Does not seem to realize his condition.

REASONING POWER:

Ordinary Subjects,

Own Mental State, Seems to be defective.

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent, probably

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None detected

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None detected

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free.

GENERAL DESCRIPTIVE REMARKS:

Claims injury (to head) from accident, by falling in ditch; also claims some cough & night sweats, in warm weather. Admits he was at Reform School, Redwing, for 6 years, but does not know the month or year he was sent there; says he has been only 3 or 4 days. Came here "the doctors" – Claims Doctors at Reform School could not do anything for him – was sick; "had nosebleed". Worked hard all day and this (nosebleed) came on at night.

Personal and Medical History of Charles Neihardt

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11 inches WEIGHT, 136 pounds NUTRITION, not good

WOUNDS OR ABNORMALITIES, Scar on right shin; Scar on scalp; abnormalities, probably none.

TONGUE, Tremors, Abnat none Coatings, slight Promptness Movement, somewhat sluggish; irreg

PUPILS, Equality, Equal Size, about normal

Response Light, Imperfect Accommodation, good

SIGHT, Fairly good

HEARING, right ear slightly impaired. Left, good.

COORDINATION, Arms, Finger to nose, eyes shut, does somewhat awkwardly.

Legs, Standing on foot, Sways. Standing, eyes shut, sways a little. Turning quickly, fairly good.

TREMORS, Hands, Tongue,

Facial Muscles, marked, on inception General,

REFLEXES, Patellar, Left seems a little more responsive; both somewhat diminished.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, somewhat indistinct

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Sounds loud & clear.

LUNGS, Chest 32½ in; Expn 2½ in. Respiratory murmur somewhat high pitched at apices

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, yes	Constipated,	Irregular,
APPETITE, Good, yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother has poor health; Catarrh –

Father or Pat. Relations, Father living; poor health; drinks heavily

Brothers or Sisters, Never had any brothers; 1 sister dead; Spinal fever; 3 sisters living; Claims in good health.

Personal and Medical History of Charles Neihardt

1892 This man was brought here by ____ with this accompanying history. He has just been released from a term of 6 years in the Reform School at Redwing, Minn; supposed cause of this attack is Masturbation; form is chronic; no accompanying bodily disorder known; Mother alleges symptoms of mental derangement as a result of spinal meningetis. This is not the first attack. Insanity is now manifested by nothing in particular; is not suicidal; Is not disposed to injure others nor to filthy or destructive habits. No peculiarities to know before the symptoms of insanity appeared. Has not been under medical treatment. (Oct 17th. Seems probable that an Error was made at day of receipt, & that Patient was admitted on 14th instead of 13th as Committment & papers read.) ——

Sep 15 Sep 15/92. Rested quite well last night, was quiet, and slept 7 hours. Am. Pulse 56.

" 16/17 Sep 16/92. Was quiet, restful, and slept 8 hours last night. Am. Pulse 64. Sep 17/92. Am. Pulse 64.

" 21 Sep 21/92. Pulse has been 68. 54. 68. & 68 in the past 3 and present mornings.

Oct 1/7 Oct 1/92. Wt. 140 lbs. Pulse 64. Oct 7/92. Has been quiet at night, resting and sleeping well, ever since admission. Has been clean, quiet, and tidy by day; well-behaved. Has talked freely & coherently as far as conversation has been carried; has written a few letters. Works some. Has complained of some slight bodily ailments, but physical health has been fair. Patient shows a feebleminded-ness in his looks and talk and manner. Has been seen in peculiarly affectionate attitudes, or in position suggestive of such, with some rather foolish fellows, on his hall. ——

" 21 Oct 21/92. Was sick last night, having marked nausea and vomiting repeatedly; Also cough. Pulse at 4. Am. 84. Is feeling fairly well, today.

Nov 1/15 Nov 2/92. Wt 142 lbs. Pulse 72. Nov 16/92. Is quiet and restful at night, sleeping well. Continues about the same in conduct and condition. Is inclined to "boss" his fellow patients around. Bodily health better.

Dec 5/15 1893 Dec 5/93. Wt 150 lbs. Pulse 76. Dec 16/92. Seems a little more sensible. Works quite well. Clean and tidy. —— . ——

Jan 3/17 Jan 3/93. Wt 148½ lbs. Pulse 76. Jan 17/93. Now working daily in the kitchen. Does quite well.

Feb 3 Feb 3/93. Wt 146 lbs. Pulse 80. (a slight loss in weight in each of past 3 months without apparent cause). Feb 17/93. Uniformly quiet, apparently resting and sleeping well at night. Still works well & willingly in the kitchen. Otherwise not much, if any, change.

" 17 Mar 16/93. Complains of some pain in region of scrotum - no perceptible disease.

Mar 16 Mar 18/93. Eats very heartily. Still manifests a certain degree of mental enfeeblement. Conduct is fairly good. —— Apl 18/93. Continues well-behaved & of good habits. Is in a hall where he might escape if he so desired, but has made no attempt.

" 18 May 1/93. Feels poorly this morning; bowels are constipated; was given laxative. May 18/93. No change to note.

Apl 18 May 1/93. Appetite is very good; bowels regular; does considerable work on his ward; somewhat anxious to go home; health good.

May 1/18 May 31/93. Appetite continues very good. Bowels regular. Sleeps well. Swears a good deal, at times, on ward, and is quite noisy. —

" 31 June 2/93. Sent out on trial to Hastings, his mother agreeing to give him trial. Has been quite quiet of late. Talks to other patients in a rather careless & perverse ways at times, but, otherwise, has been about the same as ever. —

June 2 (over)

Personal and Medical History of Charles Neihardt

NAME. Chas Neihardt

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	148½	76	....	1½
Feb 3d	146	80	....	2½
Mar 2d	144	66	....	2
Apl 4th	147	56	3	....
May 3d	148	60	1	....
Oct 4th	139½	75	....	8½ (While away)

at home, he was returned here this Evening. Put out B1 East. him. Jovial in manner; much inclined to use profane lexicon among other patients.

nt barn & stables. Oct 8/93. Was today taken back & shut le Employ's. Oct 20/93. Continues about the same. Does s, Checkers &c. Goes walking regularly with the rest-mes very profane & abusive. Troublesome, at times. od. Appetite also is good. Clean tidy & of good personal habits. About the same, all the while. Acts very silly. Easily & vulgar language. Quite mischievous, at times. Health good. e all the while. Has no spells. Inclined to be mischievous. Talk vulgar & on ward. Nov 3/93. About the same all the while. Has spells, while using them Nov 30/93. Is silly at times & quite forgetful. Is mischievous & troublesome at Wt 143. P.o. Jany 1st 94. Has felon on finger, is applying poultice. t step. Jany 30 94. Same as per Nov 2/93. Feb 2 94. Wt 143 P. 63. ught. Appetite good; bowels regular. Is a noisy patient and hard & boisterous in his talk. Very nervous & excitable & inclined to be some-abits are neat and clean. He is in good physical condition. — 9/94. Patient, today, commenced to work with the painters. obably they could not get along with him). March 29/94. Has Works some on the hall. In all respects is about as noted above. el 30/94. During this month, he has been more quiet, than rofane & vulgar talking. Works well & willingly on the ward. " as he is somewhat anxious to be allowed to go home. rts are cleanly. — " —— . ——

May 3/13 May 3/94. Wt 143½ lbs. Pulse 71. May 13/94. Has continued quite fairly well-behaved, tho' at times, given still to his vulgar & profane talking. Occasionally troublesome. Acts very silly, at times, laughing to himself. Seems somewhat impatient to go home. — . ——

" 14 May 14/94. Was allowed to go home, today. ——

June 6 June 6/94. Got into some trouble, at home; became refractory & unmanageable, and was

" 30 returned here, this Evening. Was put on B1 — June 30/94. Has been quiet & well behaved; since his return, but is still silly in his ways & vulgar in his language. Has had no "distinct spells."

July 4/94 July 4/94. Wrestled & got into trouble with a fellow-patient (Wallerius) today - but nothing serious.

" 13 Wt. today 140 lbs. Pulse 74. July 13/94. Commenced to work with laundry man, at collecting

" 31 and delivering the clothes to the various wards; is a good & willing worker. July 31/94. Still working with laundryman - Continues quiet & well-behaved; easily excited when he uses very profane and vulgar language. Appetite good; bowels regular. Physical condition is very good. —

Aug 1/31 Aug 1/94. Wt 135 lbs. P 68. Aug 31/94. Keeps about the same all the while. Works, at present, with laundry man.

Sep 1/30 Sep 3/94. Wt 137½ " St. Sep 30/94. Likes to work his work. Has occasionally been working with painter; also at barn.

Oct 1/31 Oct 1/94. Wt 140 " St. Oct 31/94. As a rule, quite well behaved. Easily excited & nervous at times. Was a very dictatorial & "bossy" way about him; foolish in action. If annoyed becomes vulgar & profane. No delusions noticed. Works daily at the Laundry, delivering clothes &c. Physical health good — to A 143

1892 This man was brought here by
has just been releasd from a term of 6 years in
cause of this attack is Masturbation; form
Mother alleges symptoms of mental der
not the first attack. Insanity is now
Is not depressed tongue shows no to
symptoms of insanity appeard. Sta
that an Error was made at day of rel
paper reads.) ——

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1893
Jan 3/4 Jan 3/93. Wt 148½ pds. Pulse 76. Jan 17/93. Now working daily in the Kitchen. Does quite well.
Feb 3 Feb 3/93. Wt 146 pds. Pulse 80. (a slight loss in weight in each of past 2 months without appa-
" 17 -rent cause). Feb 17/93. Uniformly quiet, apparently resting and sleeping well at night.
Still works well & willingly in the kitchen. Otherwise not much, if any, change.
Mar 16 Mar 16/93. Complains of some pain in region of scrotum - no perceptible disease -
" 25 Mar 25/93. Eats very heartily. Still manifests a certain degree of mental enfeeblement. Conduct
Apl 18 is fairly good. —— Apl 18/93. Continues well-behaved & of good habits. Is on a hall where he might
escape if he so desired, but has made no attempt.
May 1/18 May 1/93. Feels poorly this morning; bowels are constipated; was given laxative. May 18/93. No change to note.
" 31 Appetite is very good; bowels regular; does considerable work on his ward; somewhat anxious to go home; health good.
May 31/93. Appetite continues very good. Bowels regular. Sleeps well. Swears a good deal, at times, on ward.
and is quite noisy. —
June 2 June 2/93. Sent out on trial to Hastings, his mother agreeing to give him trial. Has been quite quiet of
late. Talks to other patients in a rather careless & perverse ways at times, but, otherwise, has been
about the same as ever. —

(over)

Sept 12/93. Having become incorrigible at home, he was returned here this Evening. Put on B' East.
Sep 22/93. Has very silly ways about him. Is child in manner; much inclined to use profane
1893 language. Is harmless. At times, troublesome among other patients.
Oct 6/8 Oct 6/93. Has commenced to work about barn & stables. Oct 8/93 Was today taken back & shut
" 20 up on the ward for insulting a female Employé. Oct 20/93. Continues about the same. Does
some work on the ward. Plays billiards, Checkers &c. Goes walking regularly with the rest.
Is easily made angry, when he becomes very profane & abusive. Troublesome, at times.
Rest & sleep at night apparently good. Appetite also is good. Clean & tidy & of good personal habits.
" 31 Oct 31/93. Is still kept in at the ward. About the same, all the while. Acts very silly. Easily
excited & gets mad & then uses profane & vulgar language. Quite mischievous, at times. Health good.
Nov 2 93 Wt 144 P 68. Nov 20 93 Is about the same all the while. Has no spells. Is inclined to be mischievous. Talk vulgar & uses
" 30 profane language at times. Does some work on ward. Nov 30 93 About the same all the while. Has no spells, while using them
Dec 31 is very nervous. Dec 2 93 Wt 144½ P 80. Dec 31 93 Is silly at times & is quite forgetful. Is mischievous & troublesome at
times. Appetite good. Bowels reg. Jany 2 94 Wt 143. P 70. Jany 14 94 Has a felon on a finger, is applying poultice.
Jany 15 94. Says he has so much pain, that he can not sleep. Jany 30 94 Same as per Nov. 2. 93 Febr 2 94 Wt 143½ P 63.
Feb 28 Feb 28/94. Apparently rests and sleeps well, at night. Appetite good; bowels regular. Is a noisy patient and hard
to manage, at times. Quite reckless in his ways & boisterous in his talk. Very nervous & excitable & inclined to be dom-
-what troublesome among the other patients. Habits are neat and clean. He is in good physical condition. —
Mar 3/9 March 3/94. Wt 143 pds. Pulse 72. March 9/94. Patient, today, commenced to work with the painters.
" 12/19 March 12/94. Quit working with painters, (probably they could not get along with him). March 29/94. Has
not worked at the painting since 12th Inst. Works some on the hall. In all respects is about as noted above.
Apl 2/30 April 2/94. Wt 143 pds. Pulse 74. April 30/94. During this month, he has been more quiet, than
usual; not so often given to "spells" of profane & vulgar talking. Works well & willingly at the ward.
Has been, apparently, on "his best behavior" as he is somewhat anxious to be allowed to go home.
He is in good physical condition. Habits are cleanly. —— " —— . ——
May 3/13 May 3/94. Wt 143½ pds. Pulse 71. May 13/94. Has continued quite fairly well-behaved, tho'
at times, given still to his vulgar & profane talking. Occasionally, troublesome. Acts very silly,
at times, laughing to himself. Seems somewhat impatient to go home. — . ——
" 14 May 14/94. Was allowed to go home, today. ——
June 6 June 6/94. Got into some trouble, at home; became refractory & unmanageable, and was
" 30 returned here, this Evening. Was put on B'. June 30/94. Has been quiet & well behaved;
since his return, but is still silly in his ways & vulgar in his language. Has had no "spells".
July Augt July 4/94. Provoked & got into trouble with a fellow-patient (Wallerius) today - but nothing serious
" 13 Wt. today 140 pds. Pulse 74. July 13/94. Commenced to work with laundry man, at collecting
" 31 and delivering the clothes to the various ward; is a good & willing worker. July 31/94. Still working
with laundryman - Continues quiet & well-behaved; easily excited when he uses very profane
and vulgar language. Appetite good; bowels regular. Physical condition is very good. —
Aug 1/31 Augt 94. Wt 135 pds. P 68. Aug 31/94. Keeps about the same all the while. Works, at present, with laundry man.
Sept 3/30 Sept 3/94. Wt 137½ " St. Sept 30/94. Likes to vary his work. Has occasionally been working with painters; also about barn.
Oct 1/31 Oct 1/94. Wt 140 " St. Oct 31/94. As a rule, quite well-behaved. Easily confused & nervous at times. Was
a very dictatorial & "bossy" way about him; foolish in action. If annoyed becomes vulgar & profane. No
Delusions noticed. Work daily at the Laundry, delivery clothes &c. Physical health good — Jo A 143

Personal and Medical History of William Davidson "Davis"

Whole No. 3130

Residence, St Paul

Date Admission, 19th September 1892.

Admitted by, Dr. Phelps Hour, 7.15 Pm.

How Sent, John. B. Olivier, Jof P. Ramsey Co.

Sex, male

Age, 19

Civil Condition, single

Children, —

Age Youngest Child,

Occupation, Farm-hand

Degree Education,

Profession Religion, Catholic

Habits, Probably good

Nativity, Oregon

Physicians Committing, H. J. O'Brien & A. B. Ancker

Correspondents, Mrs Anna Davis (mother) Lafayette, Oregon (given by himself)

No. for Year, 42

Insane Relatives, Says not. his aunty not hereditary

Cause Exciting, has suffered considerable privation

Cause Predisposing,

Form, Mania – Chronic

Accompanying Bodily Disorder, Evidently not

Suicidal or Not, do not know

Date of this Attack, not stated in history

Duration, not stated

No. of Attack, unable to say

No. of Admissions,

Age First Attack,

Time of Leaving, July 31st 93.

Time in Hospital,

Result,

Sent to Fergus Falls. OK/pm

EXAMINATION ON ADMISSION.

Exd by Dr. Baker Dec 29/92 –

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Probably Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, } Inaccurate but

Recent Events, } approximates

Special Subjects,

PERCEPTIVITY: ordinary observation not very good

Alert or Dull, answers questions after hesitation

Correct or Illusive, does not realize own condition

REASONING POWER:

Ordinary Subjects, } Poor

Own Mental State, }

Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

Says never had fits; Says has been in Hospital of this sort in State of California. Says his heart is in lower part of stomach"; "is not in right place" —

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Yes

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, That heart is down in Pelvis

Transitory or Not,

HALLUCINATIONS: Probably none

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, Coherent as far as it goes

Voluble or Reticent, won't talk, only when questioned – Answers in very few words.

Personal and Medical History of William Davidson "Davis"

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 inches WEIGHT, 124½ pds NUTRITION, Fair

WOUNDS OR ABNORMALITIES, Probably none

TONGUE, Tremors, Slight Coatings, almost none Promptness Movement, somewhat slow; irregular

PUPILS, Equality, left a little larger; (trifle) Size, somewhat dilated

Response Light, imperfect Accommodation, imperfect; right more than left.

SIGHT, Seems fair; left eye may be impaired.

HEARING, Probably fair

COORDINATION, Arms, Finger to nose, Eyes shut fairly good.

Legs, Standing on foot, good. Standing, Eyes shut, fairly steady.

TREMORS, Hands, Slight or none Tongue, Slight

Facial Muscles, " " General,

REFLEXES, Patellar, unequal; left only on reinforcement. Right but slightly diminished.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, ?

FACIAL EXPRESSION, Stolid

SENSIBILITY,

HEART,

LUNGS,

9/93 Dm EXAM. URINE, Color, yellow; reaction —; Sp gr 1014; albumen none; urea · 5%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, yes	Careless,
BOWELS, Normal, probably	Constipated,	Irregular,
APPETITE, Good, yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; claims in good health –

Father or Pat. Relations, Father died in Oregon – "sick in lungs" –

Brothers or Sisters, 2 brothers living; good health — sisters (4) – all living & well —

189[2] This man was brought here by Deputy Sheriff Courteau with the following history; Habits are probably good. Unable to give cause of attack. The man is of a low order of intelligence Has, no doubt, suffered considerable privation. Form is acute, depressed. There does not seem to be any accompanying bodily disorder. He would sit for hours in one position, with eyes closed, but not asleep. He declares that his heart is located where his bladder should be. As to first attack, Cannot say. Says now he is stupid, has bad blood, and a heart which should be lifted. Has shown no disposition to injure others. Not known if suicidal; not disposed to filthy or destructive habits. As to restraint or confinement, not known. Because of examining Physicians' brief acquaintance with patient his low order of intellect & his insanity the history they were able to obtain is obscure.

On examination (on admission) Patient tells story of leaving Oregon 2 years ago; of working in New York and of now being on his way back. Said had been in St Paul 2 days & a night. Deputy says, was arrested several months ago as vagrant.

Sepr 20/92. Has been quiet, resting well and sleeping 9 hours, last night. Am. Pulse 64. Pm. Pulse 98.

" 30 Sep 30/92. Has been uniformly and perfectly quiet, resting well, and sleeping 8 hours nightly, since the last note. Pulse has been 80. 72. 88. 80. 84. 86. 76. 92. 74. and 72 on the past 9 and present mornings, and has been 82. 84. 65. 99. 74. 90. 80. 90. 82 and 72 on the past 9 and present afternoons.

Oct 4/92. Wt 132 pounds. Pulse 74. Has gained 7½ pounds, since admission.

" 18 Oct 18/92. Has been uniformly quiet, resting and sleeping well, since the last note on this subject. Has been clean and tidy, well-behaved and quiet, since admission. Takes food regularly. Bodily health good. Says nothing, unless addressed, and, at times, nothing, or very little then. When on the ward, sits silent, inactive, with eyes fixed upon the floor. Has a dull, expressionless look. Is quite manifestly a case of dementia.

Nov 2/92. Wt 141 pds. Pulse 72; has gained 9 pounds during the past month.

" 17 Nov 17/92. Continues quiet and to sleep well at night. Idle, taking no interest in his surroundings and comparatively inactive. Bodily health good.

Dec 5/92. Wt 151 pds. Pulse 84. Dec 17/92. Uniformly quiet, resting and sleeping well. Lies around lazily, working but little & reluctantly, having nothing to say. Bodily health good.

" 29 Dec 29/92. Became quite ugly today and had to be put in seclusion.

1893 Jan 3/18 Jan 3/93. Wt 144 pds. Pulse 114. Jan 18/93. Is quiet at night. Lies stretched on the benches, idle, saying nothing. Will make answer, at times, if questioned. Recently asked what he was doing for a living, and replied "he was living in the interest of his money." — Bodily health good.

Feb 3 Feb 3/93. Wt 133 pounds. Pulse 73. Bodily health seems good, though he has lost 11 pounds in wt. in past 4 weeks.

" 18 Feb 18/93. Rests & sleeps well apparently at night. Is quiet. By day sits around, silent & idle. Very little, if any change in him.

" 25 Feb 25/93. Was somewhat noisy last night.

March March 15/93. Is quiet at night, as a rule. Has taken on some changes of conduct; one, a changed respiration, consisting of increased rapidity, forced inspiration & a noisy, spurting, expiration, face looking red & congested. This was kept up for hours at a time, & accompanied by muscular activity & swaying movements. Another new action consisted in spasmodic jerkings of the body & head, which the attendants observed patient had taken on after being brought & kept in an alcove, where a case of Chronic chorea spent his time. Falls almost none.

Apl 19 Apl
Wron

May 3/18 Mar
and

June 5/93 Jan
July 31 Ju
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1893 Nov 16/93 this
table
" 26 three
also
" 29 Nov
" 30 No
Apl
had
Ha

Dec 11 D
" 16 Ku
for

NAME Wm Davidson

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3	144	114	....	7
July 3	133	73	....	11
Mar 2	137	79	4	....
Apl 4th (3)	122½	76	....	15½
May 3d	125½	60	3	....

sual. Loss of weight is without apparent cause,

y 18/93. Does not appear to change any. Is quiet
ygnat need answering questions.
June 30/93. No material change.
me time. Is always more or less silly in
hing to himself. Occasionally going through
several others, sent to Fergus Falls Hospital.

Konter

Nov 23/93. Today, knocked a patient off the
t the ward, talking at the top of his voice and
o patient (Carbuckle) in the mouth; it bled.
brush at the head, cutting same slightly.
a fellow patient, causing it to bleed some.
room, refusing to eat there. Is fed in hall, now
well, now. He is weak & staggers about the
lost mental power & is, at times, very noisy.

patient (Fred Johnson 2d) this evening and Johnson
eye, cutting the skin. Dec 16/93. Patient has
w day to day. He is now so shaky that he is
scarcely able to walk & cannot dress or undress himself. He sometimes eats a fair
" 19 meal; at other times, nothing at all. Dec 19/93. Still continues in a state of stupor.
He was so weak that he had to be put to bed this afternoon. Was unable to swallow any
" 20 supper and is in a semi-unconscious state. Dec 20/93. Patient is still unconscious and
has fever. Pulse 140. Failed rapidly during the day and died at 4 40 Pm.

Relatives were kept duly advised of his critical condition. Remains were removed by them. —

— Died —

189? This man was brought here by Deputy Sheri
Habits are probably good. Unable to give cause of a
Has, no doubt, suffered considerable privation. For
be any accompanying bodily disorder. He would
not asleep. He declares that his heart is located wr
- not say. Says now he is stupid, has bad blood, an
disposition to injure others. Not known if suicidal
restraint or confinement, not known. Because of
his low order of intellect & his insanity the history they w
On examination (on admission) Patient tells story of
New York and of now being on his way back. S
Deputy says, was arrested several months ago as
Sepr 20 Sep 20/92. Has quiet, resting well and sleeping q
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Nov Nov 2/92. Wt 141 pds. Pulse 72; has gained 9 pou
" 17 Nov 17/92. Continues quiet and to sleep well at n
and comparatively inactive. Bodily health good.
Dec 5/92 Dec 5/92. Wt 151 pds. Pulse 84. Dec 17/92. Uniformly quiet, resting and sleeping well. Lies
around lazily, working but little & reluctantly, having nothing to say. Bodily health good.
" 29 Dec 29/92. Became quite ugly today and had to be put in seclusion.
1893
Jan 3/18 Jan 3/93. Wt 144 pds. Pulse 116. Jan 18/93. Is quiet at night. Lies stretched on two benches, ida,
saying nothing. Will make answer, at times, if questioned. Recently asked what he was doing for
a living, and replied "he was living on the interest of his money." — Bodily health good.
Feb 3 Feb 3/93. Wt 133 pounds. Pulse 73. Bodily health seems good, though he has lost 11 pounds in wt.
" 18 in past 4 weeks. Feb 18/93. Rests & sleeps well apparently at night. Is quiet. By day sits
" 25 around, silent & idle. Very little, if any change in him. Feb 25/93. Was somewhat noisy last night.
March March 11/93. Is quiet at night, as a rule. Has taken on some changes of conduct; one, a changed
respiration, consisting of increased rapidity, forced inspiration & a noisy, spurting Expiration, face
looking red & congested. This may keep up for hours at a time, & accompanied by muscular
activity & swaying movements. Another new action consisted in Spasmodic Jerkings of the body &
head, which the attendants observed patient had taken on after being brought & left in an alcove,
where a case of Chronic chorea spent his time. Talks almost none.

Apr 19 Apl 19/93. Conduct and general condition about as usual. Loss of weight is without apparent cause,
& complaint of ill feeling. —
May 3/18 May 3/93. Has made a slight gain in weight. May 18/93. Does not appear to change any. Is quiet
and seems to rest well at night. — Seldom speaks beyond mere answering of questions.
June 5/30 June 5/93. Keeps in about his usual health. June 30/93. No material change.
July 31 July 31/93. Has been quiet & well-behaved for some time. Is always more or less silly in
his manner & foolish acting. Talking & laughing to himself. Occasionally going through
strange movements of body &c. Was to-day, with several others, sent to Fergus Falls Hospital.

From 117.

Nicholas Konter

1893 Nov 16/23 this morning, with a Contusion over the right eye. Nov 23/93. To-day, knocked a patient off the
table onto the floor. He has also been walking about the ward, talking at the top of his voice and
" 26 threatening every one. Nov 26/93. Struck a fellow patient (Carbuckle) in the mouth; it bled.
also struck this same patient with a scrub-brush on the head, cutting same slightly.
" 29 Nov 29/93. Was struck a day in the mouth by a fellow patient, causing it to bleed some.
" 30 Nov 30/93. Patient made trouble in the dining-room, refusing to eat there. Led on to hall, now.
Appetite, at times, poor, but he is eating fairly well, now. He is weak & staggers about the
hall, in a very paretic way. Seems to have lost mental power & is, at times, very noisy.
Has no cough. Bowels are regular.
Dec 11 Dec 11/93. Patient quarrelled with another patient (Fred Johnson by) this evening and Johnson
" 16 knocked Konter down & hit him on the right eye, cutting the skin. Dec 16/93. Patient has,
for the past 10 days, been getting weaker from day to day. He is now so shaky that he is
scarcely able to walk & cannot dress or undress himself. He sometimes eats a fair
" 19 meal; at other times, nothing at all. Dec 19/93. Still continues in a state of stupor.
He was so weak that he had to be put to bed this afternoon. Was unable to swallow any
" 20 supper and is in a semi-unconscious state. Dec 20/93. Patient is still unconscious and
has fever. Pulse 140. Failed rapidly during the day and died at 4 40 Pm.

Relatives were kept duly advised of his critical condition. Remains
were removed by them. —

— Died —

Personal and Medical History of H. B. Sedgewick

Whole No. 3131

Residence, Winona, Minn

Date Admission, 19th September 1892.

Admitted by, Dr Phelps Hour, 7.15 PM

How Sent, H. L. Buck, Jeff. Winona County

Sex, Male

Age, 58

Civil Condition, married

Children, None

Age Youngest Child,

Occupation, Book-keeper

Degree Education,

Profession Religion, Not a church member

Habits, Moral but intemperate

Nativity, Vermont

Physicians Committing, E. D. Keyes and Franklin Staples

Correspondents, Mrs H. B. Sedgewick
259 — E. Wabasha, Winona, Minn

No. for Year, 43

Insane Relatives, Brother & grandfather (Insanity hereditary)

Cause Exciting, Hereditary influence together with intemperance

Cause Predisposing,

Form, Mania - a - potu

Accompanying Bodily Disorder, General results of intemperance

Suicidal or Not, has talked a great deal about it

Date of this Attack, March 1892.

Duration, about 6 months.

No. of Attack, 1st

No. of Admissions,

Age First Attack, about 58

Time of Leaving, Nov. 22nd '92.

Time in Hospital, 2 mo 3d.

Result, Improved

EXAMINATION ON ADMISSION.

Exd by Dr Baker Sep 29/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Quite clear at present

Quick or Sluggish, fairly active

MEMORY:

Past Events, Seems to be poor

Recent Events, appreciates events

Special Subjects, has no memory of events about coming here
Seems poor as to points & dates —

PERCEPTIVITY:

Alert or Dull, ordinary observation good; Answers questions

Correct or Illusive, well; Seems to realize own condition.

REASONING POWER:

Ordinary Subjects, } Seems fair
Own Mental State, }
Special Subjects, }

GENERAL DESCRIPTIVE REMARKS: On adm. no convulsions
Has not eaten for a week. very weak; feel, while trying to stand, in the office. Middle of April, first very noticeable. Bruises from falls. Wife admits trouble in walking & talking of late.

EMOTIONAL STATE:

Normal, Calm, } Worries about business matters; feel
Indifferent, } Cheerful & hopeful about health;
Exalted, } Seems to feel well —
Depressed, }

DELUSIONS:

Systematized or Not,

Special Subjects, Has some; Seems to have more now.

Transitory or Not,

HALLUCINATIONS: Has had "of sight" —

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

Patient warmed in bed, as he is on "sick ward" where he has been almost ever since coming in; says drink was not the cause of his coming here. Attributes it to the run away accident about 8 years ago; has been nervous & sleepless, more or less, ever since — medicine (Chloralamide) was given him by Dr and this he has taken, off & on, for the above period — about 2 years ago drank a little. The following year (in early part) a little more, and last half pretty heavily — had not drunk for 10 days before coming here — just before coming here drank about 4 bottles of Dunnbier at one time — This, he says, a cause of attack (present).

Personal and Medical History of H. B. Sedgewick

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, has been equally 180 pds. has run down to 134 pds. NUTRITION, Poor

WOUNDS OR ABNORMALITIES, Numerous bruises; scar on shin; right knee injured by a runaway accident 5 left inguinal hernia —

TONGUE, Tremors, Some irregular Coatings, Some - moist. Promptness Movement, fairly prompt

PUPILS, Equality, Equal Size, about normal.

Response Light, Yes Accommodation, Yes

SIGHT, impaired considerably - wears glasses.

HEARING, Impaired

COORDINATION, Arms, fingers move, Eyes shut, fairly good.

Legs, Standing, one foot, with difficulty, especially left; Standing, eyes shut, sways a good deal.

TREMORS, Hands, yes Tongue, Some irregular

Facial Muscles, Yes General, a kind of general tremulousness

REFLEXES, Patellar, Seem to be both absent; scrotal reflex also absent.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, fairly good.

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Sounds strong & clear

LUNGS, Chest 33½" Expansion 2¾"

9/23/92 EXAM. URINE, Color, reddish yellow; reaction acid; Sp gr 1028; albumen none; urea 1.9

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated,	Irregular, Somewhat
APPETITE, Good, Yes	Medium,	Has been Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 76	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother dead, can't tell age —

Father or Pat. Relations, Grandfather in some way suicided. Father dead — can't tell age —

Brothers or Sisters, Brother book-keeper - kept in Insane Asylum - manifested same symptoms, about same age.

1892 This patient was brought by Deputy A.W. Fuhrman and patient's wife with the following history. Insanity is hereditary. Supposed cause of this attack is hereditary influence, together with intemperance; form is acute at present, with a chronic mild form. General results of intemperance are shown. First symptoms manifested in March 1892; confused state of mind & incapacity for continuous thought & unusual notions of things since that time. This seems first attack. Insanity is now manifested by delusions; is weak minded, has belief that some one is after him; struggles with "imaginary" — has not shown disposition to injure others, except when control is attempted. Has not attempted suicide, but he has talked a great deal about suicide. Is not disposed to filthy or destructive habits. Not subject to any bodily disease. (see general descriptive remarks). Has not been restrained or confined, except at his home a few times, only during attack. Has not been under medical treatment except for general physical condition.

Sep 20 Sep 20/92. Was very restless, frequently out of bed and slept but an hour and a half, last night; had 3 passages of the bowels during the night. AM Pulse 96. R 26. T 99. Ate considerable breakfast. Is tremulous.

" 21 Says he has been here 2 days. PM. Pulse 82. R 24. T 99.6. Sep 21/92. Was very restless, refusing to stay in bed, quite noisy for a time, sleeping none at all, last night. AM. Pulse 90. R 22. T 99.2. Refused his breakfast. Is very restless & nervous & tremulous, talking almost constantly. Has quite marked hallucinations of sight; closely borders on delirium tremens. PM. P. 96. R 22. T 100.2

" 22 Takes some food. Put under special watch, with instruction to keep in bed. Sep 22/92. Was somewhat noisy, very restless, resisting being kept in bed, and slept none at all, last night. Was given milk every 2 or 3 hours, during the night. Had 3 passages from the bowels, containing some blood. AM. P. 106. R 28. T 99.8. Is very restless. Will not remain in bed unless restrained there; full of tremors, illusions and hallucinations. Condition was so unfavorable that his wife was written to. PM. P. 86. R seems a little fuller. R. 26.

" 23 T 100.2. Heart sounds seem somewhat weaker. Is very incoherent. Sep 23/92. Is somewhat noisy, and out of bed considerable, sleeping 11½ hours, last night. Wet and soiled his bed. AM. P 72. R 24. T 98.2. This morning, is more quiet, remaining in bed most of the time; is less delirious and talkative. Is given milk and eggs, at frequent intervals, day & night.

" 24 PM. P 68. R 21. T 98.8. Sep 24/92. Somewhat restless and out of bed a few times, sleeping 6 hours, last night. AM. P 72. R 20. T 98.6. PM. P 78. R 20. T 99.2. Remains in bed comparatively quietly; converses more rationally and has less tremor. Drinks considerable milk and eats a little at each meal. Sep 25/92. Somewhat restless, sleeping but 2 hours last night. AM. P 68. R 22. T 98.2. Continues to rest easily and quietly in bed. PM. P 70

" 26 R 20. T 99. Sep 26/92. Somewhat restless, sleeping 5 hours, last night. AM. P 88. R 22 —

" 27 PM. P 82. R 20. Sep 27/92. More restful, sleeping 5 hours last night. AM. P 58. R 20. —

" 28 PM. P 66. R 21. Has internal hemorrhoids. Sep 28/92. Slept 5 hours last night. AM. Pulse 88

" 29 R 20. Eats well. Worried some last night. PM. P 70. R 20. Visited yesterday by Sheriff of Shawnee County.

" " Sep 29/92. Slightly restless, sleeping 6 hours, last night. AM. Pulse 86. R 20. Converses quite

" 30 well, but is frightful. Given permission to get up and got up this afternoon. Sep 30/92. Slightly restless, sleeping 6 hours, last night. Remains up in the hall, and feels fairly strong.

Oct 1 Oct 1/92. Quite restful last night, sleeping 6 hours. Is constipated today. Oct 2/92. Rested well,

1892 sleeping 7 hours, last night. Complains that he has caught cold, and is troubled with quite

Oct 4 severe neuralgic pain in his leg. Oct 4/92. Wt 132 pds. Pulse 82. Has slept 6 and 7 hours the past two

" 6 nights, respectively. Oct 6/92. Sleeps 6 to 7 hours on each of past 2 nights. Visited today by friends.

" 13 Oct 13/92. Visited today by his wife. Has been resting and sleeping well since the last note. Has been trying, for some time, to get permission to go home, and today tried to get his wife to take him.

" 17 Oct 17/92. Was today transferred to A² from C² —

" 22 Oct 22/92. Has lately passed more restful nights, sleeping better, and usually well. Complains, however, at times, that he is kept awake by worrying about business. During his period of greatest disturbance, soon after coming here, was, at times, dirty; had no knowledge where he was; was very wandering & incoherent. Since making the improvement, however, noted in above notes, has been clean, neat and tidy in habits and dress, quiet and well behaved, free, coherent and pleasant in conversation, courteous and gentlemanly in his manner; has passed his time between reading and talking; goes out walking; claims that he is feeling much better than he has been, for several years.

Nov 1 Nov 1/92. Has dyspeptic symptoms, which, he thinks, are due to over-eating, as his appetite

" 2 is very good. Nov 2/92. Wt 135½ pds. Pulse 72.

" 21 Nov 21/92. Is troubled some with insomnia; in part due, he claims, to worry over his business affairs; and, in part, to disturbance by restlessness of room-mate. Has had quite frequent hypnotic dose. Has a very good appetite & is feeling well. Does not feel nervous and is not bothered much with tremor nor with spasmodic twitchings. Has made decided mental improvement. Calm and pleasant; free, coherent & rational in conversation;

" 22 reads much. Plays some games. Nov 22/92. Recently (today), visited by his wife; she desired to take her husband home, & was permitted to do so. Wt 138 pds.

Dec 21 Dec 21/92. W. S. — wrote a card, a week or two after reaching home, "Wt 141 pds. P 72." —

1893 "Have taken no hypnotic nor stimulants" —

Jan 7 Jan 7/93. Under this date, W. S. drops a card saying "Wt 142 pds. Pulse 72. Have not taken one drop of stimulants. Have position as cashier with a Dry goods house" —

— Discharged —

Personal and Medical History of George B. Tatge

Whole No. 3133

Residence, Minneapolis, Minn

Date Admission, 20th September 1892.

Admitted by, Dr Baker Hour, 7 PM

How Sent, J. L. Corrigan, Jof D, Hennepin County

Sex, male

Age, 36 years, last birth-day

Civil Condition, single

Children, x

Age Youngest Child,

Occupation, Jeweller

Degree Education,

Profession Religion, not a church member

Habits, Have been intemperate

Nativity, Chicago, Ill.

Physicians Committing, James H. Dunn, H. H. Kimball & George Christ

Correspondents, Mrs Sarah Tatge x H. a. Tuttle
324 N. Chicago ave. Chicago Ill. 8 Wash. Av. So. Minn

No. for Year, 45

Insane Relatives, none; insanity not hereditary.

Cause Exciting, intemperance & nervousness & syphilis

Cause Predisposing,

Form, General Paresis

Accompanying Bodily Disorder, No

Suicidal or Not, Not

Date of this Attack, Six months ago

Durati

No. of

No. of

Age Fi

Time c

Time i

Result,

Henry Norman & Co.
Rice & Wabasha Sts
St. Paul. Minn

Write or write in Case of danger,
in G. B. Tatge's case.

EXAMINATION ON ADMISSION.

Exd by Dr Bates Sep 29 92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Fairly quick

MEMORY:

Past Events,

Recent Events, approximates the truth as subject of "how
Special Subjects, tonight is here" —

PERCEPTIVITY:

Alert or Dull, Ordinary Observation fair, somewhat mixed

Correct or Illusive, Answers questions well. Realizes own condition

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has not drunk for 2 years or so. Has had acute rheumatism - claims has had "shooting pains" in his legs, & has had prickling sensation over his body. Claims he is troubled with sleeplessness & night sweats. Sleeps poorly.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Tendency to be emotional & depressed.

DELUSIONS:

Systematized or Not, None definite detected

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free

Personal and Medical History of George B. Tatge

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9¼ in WEIGHT, 145 pds (usual wt 165 pds) NUTRITION, Fairly Good

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Marked fine & coarse Coatings, Slight Promptness Movement, Prompt

PUPILS, Equality, Slightly unequal Size, Somewhat contracted

Response Light, almost none Accommodation, Some

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Fingers to nose, eyes shut, fairly good; some hesitation on approaching nose.

Legs, Standing, one foot is unsteady; Standing, Eyes shut, sways very markedly; Turning quickly, some hesitation

TREMORS, Hands, None Tongue, Marked fine & coarse

Facial Muscles, Ataxia, on intention. General,

REFLEXES, Patellar, Seem to be absent, even on reinforcement.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, quite distinctly & hesitating markedly.

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Murmurs?

LUNGS, Chest 33 in Expn 3½ in

9/23 EXAM. URINE, Color, light yellow; reaction acid; Sp. gr. 1012; albumen none; urea - 8%

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Yes	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor, Yes	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow - Has had dizzy spells & headaches

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Both 66 years old; claims not sick a day

Father or Pat. Relations, Father died at 61 of pneumonia.

Brothers or Sisters, 1 brother died by accident of spinal injury: 1 brother living; sisters 2 living, healthy. one sister died in Childbirth —

Personal and Medical History of George B. Tatge

Whole No. 3133

Residence, Minneapolis, Minn

Date Admission, 20th September 1892.

Admitted by, Dr. Baker Hour, 7 PM

How Sent, J. L. Corrigan, Jof P, Hennepin County

Sex, male

Age, 36 years, last birth-day

Civil Condition, Single

Children, x

Age Youngest Child,

Occupation, Jeweller

Degree Education,

Profession Religion, not a Church member

Habits, Have been intemperate

Nativity, Chicago, Ill.

Physicians Committing, James H. Dunn, H. H. Kimball, & George Chute

Correspondents, Mrs Sarah Tatge x H. A. Tuttle
394 W. Chicago Ave. Chicago Ill. N.A. Ledyard Ticket Agt. 8 Wash. Av. So.

No. for Year, 45

Insane Relatives, none; insanity not hereditary.

Cause Exciting, Intemperance & nervousness & syphilis

Cause Predisposing,

Form, General Paresis

Accompanying Bodily Disorder, No

Suicidal or Not, Not

Date of this Attack, Six months ago

Duration, about 6 months

No. of Attack, 1st

No. of Admissions,

Age First Attack, about 36

Time of Leaving, May 18 '93

Time in Hospital, 6 m. 28 ds.

Result, Died

Exhaustion in General Paresis

EXAMINATION ON ADMISSION.

Exd by Dr. Bates Sept 20/92

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Fairly quick

MEMORY:

Past Events,

Recent Events, appropriates the truth as subject of "how long he is here"—

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Ordinary observation fair, somewhat mixed

Correct or Illusive, Answers questions well. Realizes own condition

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has not drunk for 2 years or so. He had acute rheumatism. Claims he had "shooting pains" in his legs, & has had prickling sensation over his body. Claims he is troubled with sleeplessness & night sweats. Sleeps poorly.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Tendency to be emotional & depressed.

DELUSIONS:

Systematized or Not, None definite detected

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free

Personal and Medical History of George B. Tatge

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 1/4 in WEIGHT, 145 pds (usual Wt 165 pds) NUTRITION, Fairly Good

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Marked fine & coarse Coatings, Slight Promptness Movement, prompt

PUPILS, Equality, slightly unequal Size, somewhat contracted

Response Light, almost none Accommodation, None

SIGHT, Good

...wed, eyes shut. fairly good; could hesitation on approaching none. hesitates

...foot, is unsteady; Standing, eyes shut, sways very markedly; turning quickly, stands

Tongue, Marked fine & coarse

...institution. General,

...lsent, even on recognizement.

Slurred, quite distinctly & hesitating markedly.

...SSION,

SENSIBILITY,

HEART, Murmurs?

LUNGS, Chest 33 in Expn 3 1/2 in

9/93 EXAM. URINE, Color, light yellow; reaction acid; Sp. gr. 1012; albumen none; urea - 8%

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, yes	Constipated,	Irregular,
APPETITE, Good, yes	Medium,	Poor,
SLEEP, Good,	Poor, Yes	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow — Has had dizzy spells & headaches

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother 66 years old; claims not sick a day

Father or Pat. Relations, Father died at 61 of pneumonia.

Brothers or Sisters, 1 brother died by accident of spinal injury: 1 brother living; sisters 2 living, healthy. one sister died in Childbirth —

Personal and Medical History of George B. Tatge

1892

This man was brought here by J. E. Mullaney, deputy. The following history accompanies him. Has been intemperate; cause of this attack is intemperance and nervousness + syphilis; form, chronic; no accompanying bodily disorder; first symptoms manifested 6 months ago. This is first attack; Insanity is now manifested by delusions, general; has shown no disposition to injure others; is not suicidal; not filthy or destructive; has not been restrained or confined; has been under medical treatment.

On admission, pulse was 88. R 23. Comparatively quiet. Wash. to C[t].

Sep 21. Sep 21/92. Was somewhat restless, out of bed a couple of times, sleeping 5 hours, last night. Am Complains of having nervous headache and of being constipated. Pulse 88. R 20. T. 98·8. Is very communicative, speaking much of self, and particularly exacting. Pm. Pulse 86. R 19. T. 99·4.

" 22 Sep 22/92. Somewhat restless out of bed a few times, sleeping but 4 hours, last night. Am. Pulse 108. R 23. T. 99.4. Says he feels worse. Says he wants medicine. Pm. Pulse 102. R 22. T. 99.8.

" 23 Sep 23/92. Was restless last night, sleeping but 1 hour. Am. Pulse 94. R 22. T. 99·2.

Oct 2 Oct 2/92. More or less restless, almost nightly, sleeping usually from 3 to 5 hours each night, occasionally 6 or 7 hours. Complains of various bodily complaints, as constipation and

" 14/16 rheumatism. Oct 14/92. Wt 114½ lbs. Pulse 76. Oct 20/92. Is in the habit of complaining, more or less, of various bodily ailments; this afternoon, made more general complaint.

" 21 Oct 21/92. Vomited yesterday afternoon and last night; remains in bed today, Complaining,

" 22 more or less. Oct 22nd/92. Am. Pulse 69. Regular. Is better. No vomiting. Feels more Cheerful.

" 23 Complains of pain in stomach. Pm. Pulse 66, R 20. Oct 23/92. Am. Pulse 62. R 20. Eats

" 24 well. Is somewhat nervous. Still in bed. Pm. Pulse 72. R 21. Oct 24/92. Am. Pulse 64. R 20. Eats well. Bowels move. Got up this morning.

Summary. Has passed but a few nights restfully, and sleeping well. Usually, more or less restless and sleeps from 4 to 5 hours; occasionally less, and, one night, none at all. With the exception of the past 3 days, has been up + around the hall daily. Clean in habits, tidily dressed, moving about more or less freely, quite fond of talking, reading some. Has been quite full of complaints of bodily ailments, hypochondriacal in nature, evidently; complaining, more especially, of insomnia and night sweats and nervousness, with nervous headaches; has an emotional air in conversation although, at times, giving way to tears. Has marked difficulty in speech and ataxic gait. Clearly a case of General Paresis.

Nov Nov 2/92. Wt (in underclothes alone) 129 lbs. Pulse 76; has lost considerable in weight. Is in bed today;

" 4/5 Nov 4/92. Is still in bed. Nov 5/92. Still in bed; is emotional; complains that he suffers from pain

" 8/10 in his stomach. Nov 6/92. Is up. Is pale. Says his bowels do not move. Nov 10/92. In bed.

" 22 Nov 22/92. Is nightly, more or less restless, and sleeps, at times, very little; usually 4 or 5 hours. Has been in bed, by day, occasionally during the past 4 weeks, lying down whenever he chooses. Has some complaint whenever seen and questioned; either from constipation, of rheumatism in his arms, of pain in his stomach, of headache, or of nervousness + insomnia. Is rather pale and is losing flesh. Personal habits, so far, remain good. Head is done and writes

Dec 5/14 letters. Dec 5/92. Wt 141¼ lbs. Pulse 82. Dec 19/92. Wt 147½ lbs.

" 22 Dec 22/92. Somewhat less restless + sleeps at night. Still complains somewhat of various pains and

NAME. George B. Tatge (In underclothes +)

	DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.	
*	Jany 3d	137	96	....	(7 lost)	
*	" 10	121½	—	....	10½	
*	" 17	117	—	....	4½	
*	" 24	119	—	2	....	
*	Feby 1	115	—	—	4	
*	" 9	113	—	....	2	
*	" 16	114	—	1	....	
*	" 24	113½	—	....	½	
*	Mar 2d	—	96	....	....	
*	" 11th	108½	....	....	5	
*	" 25th	104	....	....	4½	
*	Apl 4th	99	104	....	5	
*	" 11th	100	—	1	....	
*	" 18th	96½	—	....	3½	
*	" 26th	93	—	—	3½	
*	May 3d	90	78	—	3	
*	" 8th	89	—	....	1	

NAME OF MR. George B Tatge

DIAGNOSIS.

[illegible] Evening Temp

[illegible] Evening Temp

[illegible] 1[st] P.M. Bowels moved

[illegible] 3 Destructive. Put on sheet. R.

[illegible] 8 Restless and noisy. 9 Bowels moved freely. gave bath.

[illegible] Coughing. Considerable

[illegible] 6 Bowels moved.

[illegible] Coughs some.

[illegible] Bowels moved a little

[illegible] 2[30] " " freely. Takes Nourishment fairly well.

[illegible] Rest a good deal of the time. Nurses

[illegible] 7 Bowels moved freely — Bath.

[illegible] Weight 89 lbs. Bowels moved.

[illegible] Coughs some. Restless the greater part of the day.

[illegible] Pulse very poor all day. Died 4[15] A.M. Weybird

[illegible] Died 4[15] A.M. — Heart appeared not to

[illegible] up to P.M. days of its death. Failed

[illegible] rapidly at the last.

[illegible] Exhaustion in General Paresis.

not been found necessary. Appetite has continued poor and patient is very weak having lost steadily in weight, for months. Bowels have been much constipated — Urine has also been done cough; at times, considerable. He has been very destructive at times. Lately

(carried to page 230)

1892 This man was brought here by J. E. Mu
Has been intemperate; cause of this attack
no accompanying bodily disorder; first a
Insanity is now manifested by delusion
not suicidal; not filthy or destructive
Medical treatment.

On admission, pulse was 88. R 23. Comparatively quiet. Wash[illegible]

Sep 21. Sep 21/92. Was somewhat restless, out of bed a couple of times, sleeping 5 hours, last night. Urin
Complains of having nervous headache and of being constipated. Pulse 88. R 20. T 98.8. Is very
communicative, speaking much of self, and particularly exacting. PM. Pulse 86. R 19. T 99.4.
" 22 Sep 22/92. Somewhat restless out of bed a few times, sleeping but 4 hours, last night. AM. Pulse 108.
R 23. T 99.4. Says he feels worse. Says he wants medicine. PM. Pulse 102. R 22. T 99.8.
" 23 Sep 23/92. Was restless last night, sleeping but 1 hour. AM. Pulse 94. R 22. T 99.2.
Oct 2 Oct 2/92. More or less restless, almost nightly, sleeping usually from 3 to 5 hours each night,
occasionally 6 or 7 hours. Complains of various bodily complaints, as constipation and
" 14 rheumatism. Oct 14/92. Wt 144 lbs. Pulse 76. Oct 20/92. Is in the habit of complaining,
more or less, of various bodily ailments; this afternoon, made more general complaint.
" 21 Oct 21/92. Vomited yesterday afternoon and last night; remains in bed today, complaining,
" 22 more or less. Oct 22nd/92. AM. Pulse 69. Regular. Is better. No vomiting. Feels more cheerful.
" 23 Complains of pain in stomach. PM. Pulse 66, R 20. Oct 23/92. AM. Pulse 62. R 20. Eats
" 24 well. Is somewhat nervous. Still in bed. PM. Pulse 72. R 21. Oct 24/92. AM. Pulse 64. R 20.
Eats well. Bowels move. Got up this morning.

Summary. Has passed but a few nights restfully, and sleeping well. Usually, more or less
restless and sleeps from 4 to 5 hours; occasionally less, and, one night, none at all. With
the exception of the past 3 days, has been up & around the hall daily. Clean in habits, tidily
dressed. Moving about more or less freely, quite fond of talking, reading some. Has been
quite full of complaints of bodily ailments, hypochondriacal in nature, evidently; com-
plaining more especially, of insomnia and night sweats and nervousness with nervous
headaches; has an emotional air in conversation although, at times, giving way to tears.
Has marked difficulty in speech and ataxic gait. Clearly a case of General Paresis.

Nov Nov 2/92. Wt (in underclothes alone) 129 lbs. Pulse 76; has lost considerable in weight. Is in bed today;
" 4/5 Nov 4/92. Is still in bed. Nov 5/92. Still in bed; is emotional; complains that he suffers from pain
" 6/10 in his stomach. Nov 6/92. Is up. Is pale. Says his bowels do not move. Nov 10/92. In bed.
" 22 Nov 22/92. Is nightly, more or less restless, and sleeps, at times, very little; usually 4 or 5
hours. Has been in bed, by day, occasionally during the past 4 weeks, lying down whenever
he chooses. Has some complaint whenever seen and questioned; either from constipation,
of rheumatism in his arms, of pain in his stomach, of headache, or of nervousness & insomnia
Is rather pale and is losing flesh. Personal habits, so far, remain good. Reads some and writes
Dec 5 letters. ——— Dec 5/92. Wt 141¼ lbs. Pulse 82. Dec 19/92. Wt 147½ lbs. —
" 22 Dec 22/92. Somewhat less restless & sleepless at night. Still complains somewhat of various pains &c,

DETAILED HISTORY OF SICKNESS OF MR. George B Tatge
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
1893 April	7	5	76	76					
	7	5	80	84					Coughing some
	7	5	84	74					3 P.M. Bowels moved
	7	5	82	74					
May 1	7	5	86	88					
	7	5	82	78					(3) Destructive. Put on sheet. R.
	7	5	78	82					(4) Restless and noisy (7) Bowels moved freely. Gave bath.
	7	5	74	72					Coughing. Conductor adv.
	7	5	88	116					
	7	5	84	72					
	7	5	72	82					
	7	5	88	88					(6) Bowels moved.
	7	5	84	88					Coughs some.
	7	5	78	82					
	7	5	74	82					Bowels moved a little
	7	5	80	78					2:30 " " freely. Takes nourishment fairly well
									Reads a great deal and converses answers more than he used to do
									(7) Bowels moved freely = Bath.
	7	5	76	90					
	7	5	74	90					Weight 89 lbs. Bowels moved.
	7	5	65	78					Eats some. Restless the greater part of the day. Sleeps
	7	5	66	80					Eats some. Restless the greater part of the day. Sleeps
	7	5	68	78					9 P.M. Appeared very pulse [illegible]
	7	5	78	78					Died 11:15 A.M. Had appeared not much
	7	5							changed up to 2 days of his death. Failed
	7	8							quite rapidly at the last
									Died. Exhaustion in General Paresis.

(carried to page 220)

been some cough; at times, considerable. He had been very destructive at times. Lately

1892

not succe-
Medical treatment.

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Dec 5 letters. Dec 5/92. Wt 141¼ lbs. Pulse 82. Dec 19/92. Wt 147½ lbs.

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Has gained some in weight

MEDICAL NOTS IN THE CASE OF Geo. B. Talge

	DA.	HR.	PULS	TEMP	RESP.	NOTES BY NURSE	NOTES BY PHYSICIAN.
	27	7.30	82			6 A.M. Bowels Costive.	
		5.00	84			2 P.M. Dose of Cil. (3.30) Bowels Moved freely.	
	28	7.00	90			8 P.M. Vomiting. Restless all Morning.	
		5.00	72			Bath.	
	29	7.30	96				
	1	5.00	82			Restless all day	
	30	7.30	80				
		5.00	76			9 P.M. Continually getting out of bed.	
	31	7.30	82				
		5.00	75				
April	1	7.30	77				
		5.00	92				
	2	9.00	86				
		6.00	90				
	3	7.30	90			Bath.	
		6.30	94				
	4	7.30	96			Continually getting out of bed.	
		5.00	90			Out of bed.	
	5	7.30	104				
		5.00	80				
	6	2.00	88				
		5.00	89				
	7	7.00	96			Restless all day	
		5.00	100			7 AM. Vomiting. Bowels Costive	
	8	7.00	90			Growing weak 12 P.M. Enema of Soap Suds. bowels moved	
		5.00	96				
	9	7.00	82			2 P.M. Put Sheet on him.	
		5.00	88			Refused Medicine and took, but very little	
	10	7.00	86			Nourishment	
		5.00	88				
	11	7.00	98				
		5.00	80			Bath. 1 P.M. took jacket off.	
	12	7.00	84				
		5.00	76				
	13	7.00	80				
		5.00	84				
March 28	14	7.00	84			Continually getting out of bed.	
		5.00	100				
	15	7.00	84				
		5.00	90				
	16	7.00	88				
		5.00	86				
	17	7.00	100			Bowels Costive. (4.) Enema of Soap Suds	
		5.00	88				
" 29	18	7.00	94			8 P.M. Bath.	
Apr 8/92		5.00	92				
	19	7.00	102				
		5.00	100				
	20	7.00	86				
		5.00	92				
	21	7.00	86			Restless all day	
		5.00	108			7.30 Bath. 5 P.M. Bowels moved.	
	22	7.00	80				
		5.00	100				
	23	7.00	88				
		5.00	111			4 P.M. Destructive.	
May 18	24	7.00	100				
		5.00	89			7.30 P.M. Bowels Moved.	
	25	7.00	98			7 A.M. Bath. (7.30) Destructive. 8.30 Put restraint	
		5.00	88			Sheet on.	
	26	7.00	96				
		5.00	98				

(carried to page 220)

...ep. Has gained some in wt. ll lbs.

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...3. 7th
...required
120 —
...clothing)
...been
...at
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...tions.
...nuts
...sauce
...6 hours
...dairy
...ting.
...spring
...all,
...any
...and.

...pneumonia. Acting. Tk. Pulse 86. Rsp. Tk, 99.4.

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DIAGNOSIS. Mar-1-92.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
Mar 1	7.30		90						Restless all day
2	7.30	5	90	74					appetite fairly good.
3	7.30	5	92	96					
4	7.30	5	96	94					Has been unusually quiet to day.
5	7.30	5	94	96					
6	7.30	5	96	95					10.30 9 AM, Out of bed, dressed, and in hall.
7	7.30	5	100	98					Ate nothing for breakfast but drank a little milk
8	7.30	5	96	104					On Ward.
9	7.30	5	88	100					Inside. Bowels moved.
10	7.30	5	98	86					9 AM Gave bath
11	7.30	5	82	82					3. PM. Unmanageable, put in restraint jacket
			92	64					9 AM. Dressing. Destructive tearing sheets.
12	7.30	5	94	94					1.30 PM Had passage. Has been very restless all day.
13	7.30	5	90	104					Worked all day had to force him to take Nourishment
14	7.30	5	96	96					Unusually quiet
15	7.30	5	88	88					9 A. M. Destructive: Cheek has been swollen for some days past.
16	7.30	5	102	88					
17	7.30	5	88	76					11 AM. Destructive
18	7.30	5	82	80					Restless all day.
19	7.30	5	84	92					
20	7.30	5	88	80					
21	9.30	6	84	100					1.30 took Pocket of Water gave Enema of soap Suds. Bowels moved
22	7.30	5	104	82					
23	7.30	5	88	82					Continually getting out of bed and destructive at times
24	7.30	5	82	70					Back appears as though bed sore was coming on. Has been quiet all A. M.
25	7.30	5	92	72					
26	7.30	5	88	78					

(carried to page 220)

...ep. Has gained some in weight. Re...

...sleeping not 4 hours, last night. Am. Pulse 108. R 23. Te 99.4. Says he feels worse. Says he wants medicine. Pm. Pulse 102. R 22. Te 99.8.

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DIAGNOSIS.
Feb 1 1893.

DATE	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	OTHER DATA.
1	130	78					Has been quite destructive, tearing sheets
2	120	74					
3	130	77					
4	130	140					
5	130	180					
6	130	86					Vomits at times after eating.
7	130	78					7.30 AM Vomiting 4.30 PM Moderate excursions. Average
8	130	118					7.30 Vomiting is very restless and continually
9	130	88					getting out of bed.
10	130	90			98.4	98.4	Is very destructive at times.
11	130	92					
12	130	88					State continues screaming
13	130	90					
14	130	94					Appears very happy singing the greater
15	130	94					part of the forenoon
16	130	98					Destructive at times
17	130	92					
18	130	88					Bowels moved.
19	130	102					Appetite fairly good.
20	130	110					Bowels move regular
21	130	102					Bowels moved freely
22	130	92					Continues getting out of bed and destructive
23	130	96					
24	130	86					P.M. Bowels moved.
25	130	104					
26	130	90					Appetite fair. Refuses meat but eats some and
27	130	94					He has milk when pressed.
28	130	92					8 am. Bowels moved
		96					8.20 am. Put Jacket on him

...structive at times. Latch
(carried to page 220)

...Comfortably quiet. Washington C.

Sept 21. Sept 21/92. Was somewhat restless, out of bed a couple of times, sleeping 5 hours, last night. Am Complains of having nervous headache and of being constipated. Pulse 88. R 20. Temp 98.8. Is very communicative, speaking much of self, and particularly exacting. Pm. Pulse 86. R 19. Temp 99.4.
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DIAGNOSIS. January 1st 1893.

DATE	HOUR	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	OTHER DATA
1	7.30	5	110					11.30 Urine drawn. 7 P.M. Urine drawn
2	7.30	5	110		12			2 A.M. Urine drawn — 3 P.M. Urine drawn
3	7.30	5	102					
4	7.30	5	116		16			4 Urine drawn
5	7.30	5	87					11 A.M. Urine drawn
6	7.30	5	84		86			7.30 Urine drawn
7	7.30	5	86		90			7.30 PM Ate no breakfast — Urine drawn 12.
8	7.30	5	86		86			8.30 PM Restless — 3.30 Urine drawn.
9	7.30	5	94		88			7.30 PM Restless — Bath — Post Urine drawn
10	7.30	5	86		14			8th But little supper
11	7.30	5	83					11 AM Urine Drawn
12	7.30	5	90					Ate a very little supper.
13	7.30	5	87					4.30 PM Bowels moved freely. Ate no supper
14	7.30	5	106					Ate no breakfast. Passed water. Ate no supper
15	7.30	5	107					11 PM. Put in restraint. Very wild 5 Hrs. Ate no supper
16	7.30	5	114					Ate no breakfast. Passed water. Ate no supper
17	7.30	5	100					1 PM. Put in restraint. Very wild 5 Hrs. Ate no supper
18	7.30	5	103		105			1.30 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola
19	7.30	5	90					Ate no breakfast 2 P.M. 1 Pint of Milk 3 Coca Cola
20	7.30	5	92					3 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola
21	7.30	5	88					1.30 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola
22	7.30	5	86					1.30 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola
23	7.30	5	86					1.30 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola
24	7.30	5	86					1.30 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola
25	7.30	5	86					1.30 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola
26	7.30	5	86					1.30 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola
27	7.30	5	90					1.30 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola
28	7.30	5	86					1.30 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola
29	7.30	5	92					1.30 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola
30	7.30	5	86		90			1.30 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola
31	7.30	5	78		82			1.30 P.M. Vomiting 2 P.M. 1 Pint of Milk 3 Coca Cola

Very restless continually going out of bed
Urine drawn
Ate fairly good dinner 1 P.M. Vomiting
Ate very little breakfast
Ate no breakfast.
Bowels Costive & Vomiting gave injection
6.30 P.M. Bowels moved freely
Bowels moved freely
5 P.M. Put in restraint Sheet
Is very wild & disturbative at times

Masturbating yesterday — Otherwise dull & restless — Has quality & is bed-wetter
Frequently 1/31/93 Bowels moved as also
ing destructive at times. Lately
(carried to page 220)

189?

Sep 21.

" 20

" 23

Oct 2

" 4/5

" 21

" 22

" 23

" 24

Nov

" 4/5

" 6/7

" 22

Dec 5/6 letters. ——— Dec 5/92. Wt 141¼ pds. Pulse 82. Dec 14/92. Wt 147½ pds. ———

" 22 Dec 22/92. Somewhat less restless & sleepless at night. Still complains somewhat of various pains and,

appeals piteously for help. Has gained some in weight. Dec 26/92. Wt 148 pds.

Jan 2/93 Went to bed. Does not complain. Found to have large retention of urine. Drawn by fractional method. 730 Am. P 110. Re 100. Jan 3/93. Wt (in underclothing) 132 pds. Pulse 95. Jan 4/93. Wt

" 5/6 Pulse 82. Small. Refuses occasional meals. Jan 6/93. Wt (in underclothing) 131½ pds. Jan 12/93. Required

" 15 catheterization until today, when he passed his water naturally. Jan 15/93. Has a high pulse, 120—

" 16/17 Eats poorly. Jan 16/93 vomited last night; bowels moved freely, later. Jan 17/93. Wt (in underclothing)

" 23 117 pds. Again has retention of urine. Jan 23/93. During past 11 weeks, has quite often been very restless at night, for nights in succession, sleeping none at all. Is sleeping a little better, at present. Has been also restless by day. At times pugnacious, attacking his room-mate. Has kept his bed: part of the time restrained in bed. Talks very little, scarcely answering questions.

" 24 Has failed markedly, physically and mentally. Jan 24/93. Am Ds constipated. Given laxatives—

" 28 Jan 28/93. Was caught in the act of masturbating today. Lies in his bed, dull & restless. Vomits

Feb 13/14 frequently. Feb 13/93. Turned his mattress today (last now torn up 7 or 8). Feb 14/93. Since last note with this subject, patient has been restless in about ⅓ of the nights, sleeping only from 3 to 6 hours each night; for remainder of nights has rested & slept fairly well, 7 to 8 hours. Has become dirty in his habits. Last night was restless all night & slept none. Vomits quite often, after eating.

" 16 Feb 16/93. Restless, out of bed often, and destructive the greater part of past 2 nights, sleeping

" 23 only 2 to 3 hours, each night. Also very dirty. Feb 23/93. Was visited today by a friend.

" 26 Feb 26/93. Am. Was blistered today. For past 10 nights, has been frequently out of bed & restless each night, sleeping but from 2 to 6 hours: occasionally, however, 7 hours. Is becoming more & more dirty in his habits, at night. Pulse, when taken during the night, has shown a tendency to accelleration. Still keeps confined to his bed. By day, is frequently restless & destructive, and often requiring to be restrained. Appetite has been fairly good, yet he has been steadily failing in flesh. and is continuing to do so. (See Records attached).

Mar 28 March 28/93. Has been kept in bed for a period, since last note, until comparatively recently, was restrained in bed, as, when not so restrained, he was very restless. Is about nightly more or less restless, getting up several times & lying awake. Is rarely noisy. Is then rather feeble. Pulse is small, but only moderately accelerated. Patient is still depressed in spirits, although not mentioning any

" 29 ill-feeling except when questioned. Says very little, at most. March 29/93. Was visited today by friends.

Apr 8/22 Apr 8/93. Pulse is growing feeble. Apr 22/93. Patient is nightly, and otherwise restless, slightly noisy, and up out of bed, when not restrained, part of the time, sleeping from 0 to 6 or 7 hours. Has been kept in bed by day, although patient persists in getting up some, unless restrained. Appetite is rather poor. There is emaciation & weakness & tendency to Constipation. Patient is failing quite steadily & apparently cannot last long. Is recently, become cheerful & happy, singing a good deal. Is rather remarkably active mentally, for one so far progressed in the disease.

May 18 May 18/93. Rest, sleep & behavior, at night, have continued about as described in note of 22nd ult°. Has Continued to keep his bed daily, also; has been quite restless at times, but, lately, restraint has not been found necessary. Appetite has continued poor and patient is very weak, having lost steadily in weight, for months. Bowels have been much constipated — There has also been some cough; at times, considerable. He had been very destructive at times. Lately,

(carried to page 220)

Whole No. 3139.

No. for Year, 51.

Residence, Poor House, Winona Co.

Date Admission, 27th September 1892.

Admitted by, Dr. Kilbourne Hour, 7 P.M.

How Sent, H. L. Buck, J. of P., Winona

Sex, Male

Age, 68

Civil Condition, widower

Children, Two

Age Youngest Child,

Occupation, Laborer

Degree Education,

Profession Religion, Don't know

Habits, Good

Nativity, Switzerland

Physicians Committing, J. S. Tracy & Donald B. Pritchard

Correspondents, John Young, Overseer Poor Farm
Winona, Minnesota



Insane Relatives, Don't know as to this or as to heredity

...iting, Senility

...isposing,

Senile Dementia —

...ying Bodily Disorder, Now but rheumatism

... Not, Not

...s Attack, two years ago

2 years or so

...ack, 1st so far as known

...issions,

... Attack, 68

...eaving, August 28 — 1901.

Hospital, 8 Yrs 11 mos 1 dy

Result, Died: Chronic Nephritis

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr Baker Oct 6/92.

MENTAL ACTIVITY:

Clear or Confused, somewhat confused

Quick or Sluggish, somewhat sluggish

MEMORY:

Past Events, Evidently impaired; does not recognize days; thinks this (Thursday) is Sunday —

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Ordinary observation probably limited

Correct or Illusive, Answers questions poorly —

REASONING POWER:

Ordinary Subjects,

Own Mental State, Impaired

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Claims he has chronic diarrhoea; does not know what institution this is. Thinks this place a poor house; does not know where he is.

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Yes

Exalted,

Depressed,

DELUSIONS: None detected

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None detected

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Won't talk, only on questioning and rather slow.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 3/4 in. WEIGHT, 127 1/2 pounds NUTRITION, not good.

WOUNDS OR ABNORMALITIES, Wounds (2); Contracture of fingers Rt. hand; double inguinal hernia.

TONGUE, Tremors, Slight Coatings, Slight Promptness Movement, Slow

PUPILS, Equality, unequal; right large. Size, —

Response Light, limited Accommodation, Yes

SIGHT, Is far sighted

HEARING, left Ear fairly good; right impaired.

COORDINATION, Arms, finger to nose, Eyes shut, fair.

Legs, Standing on foot, somewhat unsteady; Standing, Eyes Shut, somewhat unsteady.

TREMORS, Hands, Tongue, Slight

Facial Muscles, Slight tremor General,

REFLEXES, Patellar, unequal; right sluggish; left more responsive.

Other Reflexes,

ARTICULATION, Hesitating, Fairly good Slurred, Foreign accent

FACIAL EXPRESSION, Quite good —

SENSIBILITY,

HEART, No heart murmurs detected

LUNGS, Seem good

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Probably	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1892

This man was brought here by Sheriff Braley, with the following history of his case. His habits are stated as good. Supposed cause of this attack is senility; from chronic; no accompanying bodily disorder but rheumatism; also troubled with chronic diarrhoea; first symptoms manifested about two years ago; this is first attack to far as known; insanity is now manifested by his being very quiet, but wanders away into the woods and prefers to sleep out doors rather than in the Poor House. Has shown no disposition to injure others; not suicidal; no filthy or destructive habits. Has not been restrained or confined; has not been under Medical treatment.

Oct 24 Oct 24/92. Wt 129 lbs. Pulse 68. —

" 26 Oct 26/92. On admission, was quiet, having very little to say, seeming not to know where he had come, and seeming not to care much or any. Was put upon A[4]. Has not been noisy at night and has apparently rested and slept well. Has been clean, tidy in dress, and well-behaved. While in the ward moves about a little, but usually sits, quietly, talking with no one, paying very little heed to what is going on around him. When addressed, looks up smilingly & good natured-ly, answering greetings. Seems happy & contented here. Has taken food regularly & in fair quantities, always says he feels well, and appears to be in fairly good bodily health.

Nov 2 Nov 2/92. Wt 135 pds. Pulse 80. Has gained 6 pounds in past 4 weeks.

" 25 Nov 25/92. Quiet and contented. Bodily health fairly good.

Dec 5/92 Dec 5/92. Wt 136 pds. Pulse 62. Dec 29/92. Continues to be quiet and restful at night; quiet and well behaved by day; fairly Contented & happy.

1893

Jan 3/93 Jan 3/93. Wt 139 pds. Pulse 80. Jan 24/93. Continues quiet & well-behaved. Of good personal habits.

Feb 3 Feb 3/93. Wt 140 pounds. Pulse 72.

" 28 Feb 28/93. Continues about as usual. Seems contented here.

Mar 28/93 March 2/93. Wt 138 pds. Pulse 80. March 29/93. Lives along quietly & apparently contentedly. Never speaks unless addressed, saying very little then.

April 26 April 4/93. Wt 135 pds. Pulse 72. April 26/93. Seems fairly well. Condition about as usual.

May 3/93 May 3/93. Wt 134 - Pulse 72. May 22/93. There is no perceptible change. Lives along quietly & seemingly contentedly here. May 31/93. Appetite good. Bowels regular. Now, talks a good deal, apparently sensibly. Quiet & well-behaved. Clean in habits.

June 6/93 June 6/93. Wt 134 pounds. Health fairly good. — June 30/93. No change to note.

July 6/93 July 6/93. Wt 128 pounds (some loss); pulse 68. July 31/93. Keeps about the same from month to month. Seems quite contented here.

Aug 1 Aug 1/93. Appetite good; bowels regular; very quiet & clean, in every way. As this "A" West wing is about to undergo reconstruction, patient was, with several others, today moved to 13th East. Aug 5/93. Wt 131 pds.

" 31 Pulse 73. Aug 31/93. Appetite continues good; bowels normal; no cough or any other bodily ailment noticed. Well-behaved. Talks freely & quite sensibly. Clean in personal habits.

Sep 11 Sep 11/93. Wt 135½ pds. (Has regained a portion of his last weight). Pulse 80. Sep 11/93. Nothing new to note.

" 27 Sep 27/93. Patient still continues in the same good bodily health & his mental condition is not changed. Appears to be quite contented here.

Oct 31 Oct 3/93. Wt 136 pds. Pulse 74. Oct 31/93. Appetite fair. Bowels regular. No cough noticed. Is in good bodily health. Quiet & well-behaved. Works in Dining room. Talks readily & sensibly. Clean in habits.

1893

Nov 2/93. Wt 133[5]. P 86. Nov 30/93. Appetite good. Bowels reg: No cough. In good bodily health. Well behaved. Quiet & inoffensive.

Dec 7/30 No complaint. Talks readily and sensibly. Habit clean. Dec 28/93. Wt 135[5] P 72. Dec 30/93. No change. Jany 1/94 Wt 138 86

Jany 31/94 No change; Continues well-behaved. Talks sensibly & readily. Is in good physical condition.

Feb 1/28 Feby 1/94. Wt 140 pds. pulse 86. Feb 28/94. No material change: is slightly childish in Manner. Works in the dining-room. Is very cleanly in his habits. In good bodily health. Was vaccinated on 26th inst.

Mar 1/31 Mar 1/94. Wt 138½ pds. Pulse 84. March 31/94. No change, in patient's condition, calling for remark.

Apl 1/30 Apl 1/94. Wt 143½ " " 80. April 30/94. No change to note. Lives along quietly & contentedly, here.

May 31 } During this period, patient has continued in about the same condition, mentally & physically. He keeps in

June 30 } quite good flesh (Wt May 1st 143 pds.; Wt June 1st 144 pds. Wt. July 2nd - 145 pds) Pulse has been about same

July 31 } & quiet & harmless; makes no complaints. Talks easily & freely in a sensible manner. Works some. Cleanly in habits.

Augt 1/31 Augt 1/94. Wt 145 pds. Pulse 72. Aug 31/94. No change calling for remark. Works in dining-room. Health fairly good.

Sept 1/10 Sept 1/94. Wt 144 " " 84. Sept 10/94. On afternoon of alteration in this hall, patient was today, transferred to annex.

Oct 31 Oct 31/94. No noticeable change. Quiet, well-behaved & seems quite contented. Habit clean. Health fair.

Nov 30 } During these 3 months, there has been no change noticeable in either his mental or physical condition.

Dec 31 } He is quiet & well-behaved. Works in dining-room. Talks quite rationally. Health is quite fair.

Jan 31 1894

Febr 28 } During this Quarter no change especially noticeable. He continues quiet and well-behaved

March } works some in Dining room: seldom speaks: Habits clean. Health is apparently good.

April 30

May 1 } During these 3 months, patient has continued about the same, in every way: has been quiet:

June } seldom speaking: rather sullen, at times. Habits clean. Works in dining-room: health good.

July 31

Aug 1 } During this period, no change noticeable in any way: quiet & well-behaved: talks

Sept 30 } quite rationally: works on ward: habits clean. Health is apparently good. —

Oct 31

Nov 1 } Nov 1/94. Wt 140 pds. Pulse 76. Nov Dec & to Jany 31/95 No change noticeable, during the quarter

Dec } Quiet & well-behaved: seldom speaking: habits clean: health seems good: works in dining-room.

Jan 31 1895

Feb 8 Feb 8/95. Remained in bed this morning: Complains of aching head & limbs: Pulse & Temperature: appetite

" 17/16 fair: bowels regular. Feb 17/95. Lies steadily in bed: no improvement in condition. Appetite fair. Feb 16/95. Was

Transferred to "Infirmary Ward", at 8[30] am. Was weak & run-down: Even back & put to bed. On

" 22 regular & extra Diet. Feb 22/95. Lies very quietly: appetite seems some better. Otherwise no change to note.

" 29 Feb 29/95. Apparently rests & sleeps well. Eats well: bowels fairly regular. Otherwise condition about the same.

Mar 5 Mar 5/95. Still in bed: appetite good: bowels regular: makes no complaints. Apparently improving.

" 6/3 Mar 6/95. Wt (undressed) 128½ pds: Looks a good deal in flesh. Mar 13/95. Talks to himself a little, in a low tone. Has improved: says "he feels real well". Makes no complaints —

" 21 Mar 21/95. Sleeps well, nightly. Appetite good: bowels regular: talks to himself a great deal:

" 23 keeps on improving. Mar 23/95. Apparently quite recovered, but does not want to get up.

" 28 Mar 28/95. About as usual: but does not wish to get up. Urine passed & does not complain.

" 31 Mar 31/95. Mental condition appears quite good: lies very quiet in bed: eats & sleeps well, at night. Appetite Good: bowels regular (See the filed Nurses' Record as 0 22) —

Apl 2/17 Apl 2/95. Wt 124½ pds. P 76. Apl 7/95. Seems to be feeling quite well: does not appear to have any pain.

" 12 No Complaints. Seems contented to stay in bed. Apl 12/95. Does not appear to be suffering from

" 13 any trouble, but does not have ambition to get up. Apl 13/95. Transferred to annex, Ward

" 30 Apl 30/95. Patient is quiet & well-behaved. Talks very little, but quite rationally. Works in Dining-room. ——— (see nurses record filed as No 0 22)

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Personal and Medical History of David. A. Carney

Whole No. 3140.

Residence, 809 11th Ave So, Minneapolis

Date Admission, 27th September 1892

Admitted by, Dr Kilbourne Hour, 7 PM

How Sent, J. R. Corrigan, Jof P, Hennepin County

Sex, male

Age, 35

Civil Condition, married

Children, 6

Age Youngest Child,

Occupation, Blacksmith

Degree Education,

Profession Religion, Catholic

Habits, Formerly intemperate

Nativity, New York, Hoosier Falls.

Physicians Committing, E. S. Keeley & W. A. Jones

Correspondents, (Sister) Mary Carney 809 11th ave. So.

No. for Year, 52.

Insane Relatives, none; Insanity not hereditary

Cause Exciting, Domestic difficulties, Intemperance etc.

Cause Predisposing,

Form, Mania — Chronic.

Accompanying Bodily Disorder, know none - Insomnia -

Suicidal or Not, not

Date of this Attack, April 1892.

Duration, about 5 months

No. of Attack, 1st

No. of Admissions,

Age First Attack, about 35

Time of Leaving, 11th December 1901.

Time in Hospital, 9 yrs 2 mos 14 ds

Result, Transferred to Hastings Asylum

JK Jm

EXAMINATION ON ADMISSION.

Exd by Dr Baker Oct 7th 1892

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, fairly active

MEMORY:

Past Events,

Recent Events, seems good

Special Subjects,

PERCEPTIVITY: Realizes own condition —

Alert or Dull, ordinary observation quite good;

Correct or Illusive, Answers questions well.

REASONING POWER:

Ordinary Subjects,

Own Mental State, says there was reason for sending him here

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Occasionally got drunk; is sleeping well now, but very poorly when he first came. Before coming here had the feeling that there was some one going to injure him. This feeling was worse at night. Thought wife's folks put her up against him. They live at Albert Lea; has visited there since the trouble. admits he had trouble with his wife when he was intemperate —

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not,

Special Subjects, that some one was going to injure him.

Transitory or Not,

HALLUCINATIONS: has had "of hearing"

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Talk quite freely

Personal and Medical History of David. A. Carney

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet WEIGHT, 146 pounds (usual wt 165 lbs) NUTRITION, below normal.

WOUNDS OR ABNORMALITIES, probably none.

TONGUE, Tremors, fine, quite marked Coatings, Considerable, quite moist Promptness Movement, fairly prompt

PUPILS, Equality, Equal Size, about normal

Response Light, Yes; dilatation not full - Accommodation, yes

SIGHT, good

HEARING, fairly good

COORDINATION, Arms, finger to nose, eyes shut, fairly good.

Legs, standing on foot, good; standing, eyes shut, steady; turning quickly, fairly good.

TREMORS, Hands, yes Tongue, fine tremors, quite marked

Facial Muscles, slight tremors General,

REFLEXES, Patellar, Equal, but much diminished; (1 to 2, Dr R's scale)

Other Reflexes,

ARTICULATION, Hesitating, fairly prompt Slurred, somewhat

FACIAL EXPRESSION, about normal

SENSIBILITY,

HEART, sounds seem Good.

LUNGS, Chest 36in; Expansion 3in; seem normal.

9/29 D.M. EXAM. URINE, Color yellow; reaction acid; Sp gr 1015; albumen none; urea 1·1 %.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,	
BOWELS, Normal, about	Constipated,	Irregular,	
APPETITE, Good, yes	Medium,	Poor,	
SLEEP, Good, now but it was very	Poor, when he first came	Irregular,	
PULSE,	RESP.,	TEMP.,	

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow, rather; had no Convulsion or vertigo.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; about 65; good health.

Father or Pat. Relations, Father living; about 65; troubled with piles;

Brothers or Sisters, 3 brothers living; 1 used to drink; 2 died in infancy; 1 sister; good health.

1892

This man was brought here by a deputy Sheriff, with the following history. Cause of this attack is Domestic difficulties, Intemperance; family does not agree; some domestic disturbance; form is acute accompanying bodily disorder, none known; is troubled with insomnia; first symptoms manifested in April '92 after a family trouble; imagines some one conspires to keep him out of employment, & take him away or to kill him. This, the first attack; insanity now manifested by fear, suspicion of imaginary enemies; worse at night; has hallucination of sight. Not disposed to injure others; not suicidal; not filthy or destructive; only once in Jail for a few days, locked up by his wife. Has not been under medical treatment. His sister thinks his intemperance caused the domestic trouble, which, in turn, caused his mental derangement.

Sep 28 Sep 28/92. Was comparatively quiet and restful, sleeping 6 hours last night. Coughed a good deal during the night. Am. Pulse 86. R 22. T 99.6. Talks coherently, rationally; is quiet. Eats well. Says he has not eaten well for some time, nor slept well, until last night. Says he had some trouble with his wife, but that it is all right now; that he will do everything to get well, and get out, to earn his family a living. 5:30 PM P 82. R 20. T 98.8. Went out walking twice today. Sep 29/92. Rested quite well last night. Am. P 78. R 20. T 99. Is up in the Hall. Asks for work. Is somewhat thin and pale.

Oct 4 Oct 4/92. Has been uniformly quiet, resting and sleeping well at night, since the last note. Wt 148 pds. " 16 Pulse 74. Oct 16/92. Has continued uniformly quiet at night, resting and sleeping well. " 28 Oct 28/92. Is restful and sleeps well at night. By day, has been quiet, clean and tidy in dress and personal habits. Has not been gloomy or irritable. Talks quite freely, calmly & pleasantly when spoken to. Is not, however, very aggressive in beginning Conversations. Walks in the hall. Goes out walking, being quite active physically, and prompt in movements. Has written a few letters to his father. When not occupied with work, or going walking, sits, not engaged in conversation or in games or in reading. Bodily health has improved.

Nov 2/16 Nov 2/92. Wt 164 pds. Pulse 80. Nov 16/92. Has today transferred from C2 to A2; " 25 Nov 25/92. Has been uniformly quiet, resting and sleeping well at night. Has also been uniformly quiet and well-behaved, pleasant & courteous in manner, of good habits, Conversing pleasantly, calmly and fairly freely when Conversation is begun, and has lately engaged more readily in Conversation. Has also grown more active physically and has engaged in games with his fellow patients. While, for some time past, anxious to get out and go to work, he has, as a rule, been patient, shewing very slight impatience on one or two occasions. Has not manifested definite delusions in Conversation or manner & has not seemed fearful of harm. ——— Has improved quite decidedly in physical health.

Was today visited by his sister and taken home by her.

1893 Jan 31 Jan 31/93. Word was recently received from patient's relatives that he was being troubled with spells of nervousness; also with insomnia; was unable to do any work & appeared to be getting worse; he was, today, sent for & brought back by the Supervisor. Was put on Ft.

Feb 3 Feb 3/93. Wt 150½ pds. Pulse 88. Has lost quite heavily in weight while not in trivial.
" 28 Feb 28/93. Since his return, patient has been uniformly quiet at night; claims, however, he is somewhat restless & uneasy & does not sleep very well. Is quiet, clean, tidy and well-behaved by day. Up & around in the ward. Appetite Good; bowels regular. Converses

1893

fairly freely with both officers & patients. Is a very willing & obliging worker. No definite delusions have been detected. Physical Health has improved since coming back here.

Mar 7 March 2/93. Wt 155 pds. Pulse 86. March 20/93. Complains this morning of a dull headache; says he slept poorly last night. Does not sleep well, as a rule. Is kept awake, he believes, "as a test". Was all right until a short time before coming here, when he got a scare. It seems to loosen the top of his head. First got a scare in Albert Lea; was told that "three Links" was after him. Got a second scare about " 25 1½ weeks before returning here this last time. Thought he was being "tested". March 25/93. Complains " 31 of constipation, headache & of not sleeping well. March 31/93. Is uniformly quiet at night. Reports, as noted above, that he does not sleep well, as a rule. Is quiet, clean, tidy & well-behaved by day. Sits around doing nothing & saying little. Talks fairly freely when addressed.

Apl 14/17 April 14/93. Wt 158½ pds. Pulse 80. Has been sleeping poorly a good deal lately. Apl 17/93. Slept poorly last Nt. " 19/29 April 19/93. Sleepless again last night. "It seems to ache like a plague". April 29/93. Seems to sleep a little better & says he feels better, as a rule. Writes letter.

May 3/31 May 3/93. Wt 159 pounds. Pulse 80. May 22/93. Conduct & behavior about as usual. Does not do frequently Complain of sleeping poorly. Keeps to himself a good deal of the time, & is fair with other patients, has nothing to do with or say to them. Physical health seems good. " 31 May 31/93. Appetite fair. Physical health is not very good. Is quietly behaved. Easily excited & is suspicious of every one. Sometimes bright & talks with his fellow patients; at others quiet & dull, keeping apart by himself. Says "people are not giving him a fair deal". Shows delusions still.

June 7/20 June 7/93. Wt 158½ pds. June 30/93. Appetite has improved & is now good. Bowels about normal. Talks a good deal about going out of here. Easily agitated. Walks around in his hall.

July 4/17 July 4/93. Wt 158 pds. Pulse 106. July 17/93. Patient is full of "queer ideas" – that "Dr. St's Aquatene " 31 is going through the hall" – that "on a certain day, at 5 minutes to 12, he got his man"; that "ideas and threats are flying through the mines" &c &c. July 31/93. Appetite continues good; bowels regular. Is quite hard to get along with, at times; and is much worse at some times, than at others. Seems periodical case. Seems in fair physical health.

Aug 5 Aug 5/93. Wt 155 pds. Pulse 70. Aug 5/93. Has, with several others, today been transferred to B3 East.
" 21 Aug 21/93. Inclined to be quarrelsome. Is very suspicious. When people are talking, says "they are talking about him". Much inclined to be alone. Takes no part in games. Seems quite good physical health. Habits clean. Does no work.—

Sep 1/20 Sep 1/93. Wt 155 pds. Pulse 80. Sep 20/93. Has "spells"; at times, wont say anything. When spoken to, " 27 will not give even a civil answer. Sep 27/93. Has accused attendants "of stopping his watch" and "of not treating him like the rest of the patients". Evidently still holds to his delusions.

Oct 4/31 Oct 4/93. Wt 154½ pds. Pulse 81. Oct 31/93. Has "spells" as before. When these "spells" occur, he does not care to eat or talk & is apt to be ugly. Is also nervous & restless, walking the hall a good deal of the time. Is very suspicious still, & has many wrong ideas.

Nov 2 93 Wt 164 P 77. Nov 8 93 Has spells & is more troublesome with other patients. Acts & plans contrary. Has all sorts of imaginations. Very suspicious. Appetite poor. Bowels regular. Dec 2 93 Wt 158 P 88. Dec 30 93 about the same in every way. Remains by himself all day along continually, watching attendants. Appetite poor. Bowels regular.

Jany 2 94 Wt 162 P 92. Jany 3 94 About the same, always looking for fault to find & very suspicious

See page after 402

Personal and Medical History of Henry Wickey





Whole No. 3141

Residence, Cannon Falls, Minn

Date Admission, 3rd October 1892

Admitted by, Dr Phelps Hour, 7 PM

How Sent, C. D. Anderson Jof P. Goodhue County

Sex, male

Age, 28 about

Civil Condition, Single

Children, none

Age Youngest Child,

Occupation, Farming & teaching

Degree Education,

Profession Religion, unknown

Habits, Temperate and moral

Nativity, Goodhue County

Physicians Committing, H. E. Conley and Philo. E. Jones

Correspondents, John Wickey Jr Cannon Falls, Minn

No. for Year, 53

Insane Relatives, none known of; insanity not hereditary

Cause Exciting, Unknown

Cause Predisposing,

Form, Acute - Melancholia

Accompanying Bodily Disorder, None

Suicidal or Not, Not

Date of this Attack, Last May

Duration, about 4 months

No. of Attack, 1st

No. of Admissions,

Age First Attack, about 28

Time of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

Exd by Dr Baker Oct 13/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear, at present.

Quick or Sluggish, fairly active

MEMORY:

Past Events, } says, sometimes good & sometimes poor;

Recent Events, } depends upon how he feels.

Special Subjects, Thinks he has been here 4 or 5 days.

PERCEPTIVITY:

Alert or Dull, Ordinary observation limited & 1/2 asto how far it goes

Correct or Illusive, Answers questions fairly well. Realizes own condition seems reticent but thinks he can take care of himself

REASONING POWER:

Ordinary Subjects,

Own Mental State, Unprepared

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has not drunk to excess at any time. Gives a history of lacunae memory. When questioned as to his memory, explains his inability to remember when he came or how long he has been here by saying he has not paid much attention to the passing of the time; has slight spells, a marked quivering of head & face, around the mouth & cheeks. Talks rather incoherently about "changing minds" with persons with whom he comes in contact. Had a bro this (mind-changing) when he was teaching school.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, quite often; a gloomy mental depression; depends upon whom he is with; sometimes has physical depression

DELUSIONS:

Systematized or Not,

Special Subjects, Thinks his father & mother are dead - does not think father wrote the letter to him of a few days ago.

Transitory or Not,

HALLUCINATIONS: Says does not know about these.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent usually-

Voluble or Reticent, fairly free on questioning; reticent at times. withholds certain things. he does not desire to tell or speak of them.

Personal and Medical History of Henry Wickey

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in WEIGHT, 167 pounds (usually about 175 lbs) NUTRITION, Fairly good

WOUNDS OR ABNORMALITIES, probably none (wounds); abnormalities, none.

TONGUE, Tremors, Considerable Coatings, slight white (center) Coated; teeth marks Promptness Movement, fairly prompt; irregular

PUPILS, Equality, Equal Size, somewhat dilated

Response Light, yes Accommodation, yes

SIGHT, near-sight good; far-sight not so good; right eye keenest and sharp.

HEARING, Good.

COORDINATION, Arms, finger to nose, Eyes shut, fairly well; somewhat inaccurate & uncertain.

Legs, Standing on foot, fair; Standing, Eyes shut, fair.

TREMORS, Hands, Considerable of hands. Tongue, Considerable

Facial Muscles, marked, of face, in intention. General,

REFLEXES, Patellar, unequal, right exaggerated (5-9); left somewhat diminished (4-5) Dr O'B's Scale.

Other Reflexes,

ARTICULATION, Hesitating, somewhat Slurred, some indistinctness

FACIAL EXPRESSION, Sad

SENSIBILITY, Seems good

HEART, Seems fairly Good

LUNGS, are good; Chest 37 in Expn 3 in

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, Tendency to be	Irregular, Yes
APPETITE, Good,	Medium, Yes	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, accelerated. (on ad.)	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother dead - thinks of dyspepsia; step mother living.

Father or Pat. Relations, Father living

Brothers or Sisters, 3 brothers, all living, in good health. 1 sister died of smallpox; 1 of cholera infantum.

1892 This man was brought here by Sheriff Anderson & his brother, with the following history; — Habits are temperate and moral; cause of this attack is unknown; form is acute depression; no accompanying bodily disorder. First symptoms manifested last May. This is the first attack — Insanity is now manifested by morbid wakefulness, and melancholia. Has shown no disposition to injure others; is not suicidal; not filthy or destructive. Has not been restricted but has had to be watched during the past week or two. Has been under medical treatment; bleeding from the arm & the bromides.

Oct 4 On admission, is very quiet, saying nothing, unless addressed, or interfered with. Resists by word and act, being weighed, and very strenuously, being taken up on the ward. Was put upon C.t. Oct 4/92. Was very restless last night, sleeping but 3 hours. Am. Is up and dressed. Pulse 84. Resists all interference, as
" 5 taking of pulse &c. Is stubborn and perverse, saying but little. Pm. Pulse 80. Oct 5/92. Was somewhat
" 6 restless last night, sleeping 6 hours. Am. Pulse 64. Pm. Pulse 80. Oct 6/92. Was somewhat restless
" 7 but slept quite well (about 6 hours) last night. Am. Pulse 76. Pm. Pulse 80. Oct 7/92. Slightly restless &
" 8 out of bed for a time, sleeping about 6 hours last night. Am. Pulse 76. Pm. Pulse 72. Oct 8/92. Restless,
" 9 sleeping 5 hours last night. Am. Pulse 72. Pm. Pulse 70. Oct 9/92. Found standing up in his room last night; resisted so strongly being put to bed that it required several to do it. Stood
" 10 up until 3 am. Slept about 3 hours. Am. Pulse 74. Pm. Pulse 80. Oct 10/92. Was restless for
" 11 about 4 hours, sleeping about 4 hours, last night. Am. Pulse 72. Pm. Pulse 80. Oct 11/92. Restless
" 12 and out of bed last night, sleeping but 2 hours. Am. Pulse 76. Pm. Pulse 74. Oct 12/92. Somewhat
" 18 restless, last night, sleeping 5 hours. Am. Pulse 76. Was today transferred to B2. Oct 18/92

Nov 3/92 During the past 6 nights, has, at times, been quite restless, but on the whole, has slept better, from 5 to 8 hours. Nov 3/92. Wt 164 lbs. Pulse 70. Nov 7/92. Has never been noisy at night. Has, for a time, very restless, sleeping poorly; has lately rested and slept better. Conduct by day has, at all times, been quiet. He has been clean, tidy and well-behaved, with the exception of resisting all interference. For some time after coming here was accustomed to walk the floor in slow, deliberate way, with eyes cast down, paying very little heed to those about him. When approached and addressed, scarcely answering, usually refusing to give his hand, showing no signs of pleasure or friendly greeting; gradually grew a little livelier in movement, and a little more animated in expression of countenance, and has, for some time, received the Drs greetings with a smile and a quite prompt return of them. Claims that he feels quite well. Has taken food regularly and in fair quantities.

Dec 5/92 Dec 5/92. Wt 163½ lbs. Pulse 68. Dec 7/92. Very infrequently slightly restless at night; As a rule, resting & sleeping well. Seems a little more willing to talk, a little more prompt in his answers, & somewhat more active physically, moving about more. Says nothing unless spoken to. Goes into room & looks out of the window, keeping away from others. Does not give expression to feelings of depression. Bodily health good. Dec 15/92. Has been transferred to B1 today.

Jan 3/93 Jan 3/93. Wt 164 lbs. Pulse 91. Jan 7/93. Is uniformly quiet, and seems to rest & sleep well at night. Still walks slowly about, with his hands in his pockets, eyes fixed upon the floor, saying nothing. When greeted, glances up for a moment, & responding. Cannot be got to carry conversation further than to answer simple questions or greetings.

(patient) does not know what Institution this is. Thinks
. Am. Lying down. Pulse 81; has headache; tongue coated;
feels fairly well; but has sore throat. Jan 26/93. Visited, today,

ud sleeping well at night. Conduct and behavior, by day,
a month ago, though he now seems somewhat more
, on the ward. Bodily health good
apart from others, unobservant of surroundings, speaking
seems fair.
e now willing to look up at his address, & around,
rease, from day to day. Has little or nothing to do with
less addressed & then replies only feebly. Is inactive. In
3. Appetite not very good. Patient, however, is in good
t inclined to do any work. Takes no part in games.
dly about hall, hands in pockets. Seldom talks. When
. Inclined to be slovenly in dress & habit.
June 30/93. Continues about as last described.
ght, without any apparent cause. Does not complain
dull & inanimate. Disinclined to get up in the morning,
iself. Has little or nothing to do with his fellow-patients.
plies almost inaudibly. Does no work. Dull and
ig in habits. —
outh also. No apparent cause & he does not complain
action & movement. Walks the floor slowly or stands around,
powers. untidy in dress; hard to get any word out of him or make him speak at all.

NAME. Henry Wickey

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	164	91	½	
Feb 3d	165	74	1	
March 3d	163½	99	1½	
Apl 4th	163	76		½
May 3d	162	68		1
June 1st	163	64	1	
July 14th	155	82		7
Aug 2d	151½	68		4½
Sept 1st	159½	60	8	
Oct 11th	163½	82	4	

Does not seem to improve much. —

Sept 1/93 Sept 1/93. Gained 8 pounds in flesh, last month. Sep 30/93. Is about the same. Never says a word. Will now sit in the one place, all day. Does not even care to keep himself clean.

Oct 31/93 Oct 4/93. A further gain in weight, in the past month. Oct 31/93. Seems to be getting worse. Does not care to talk or work. Is not clean or tidy in dress. Has to be told to wash & to come to meals. Ugly at times. Appetite poor.

Nov 2/93. Wt 163½. P 84. Nov 30/93 Appears to be getting worse. Is more slovenly & physical, has no ambition. Does not care to work

Dec 31/93 Always by himself. Is ugly at times. Very contrary. Appetite good. Bowels reg. Dec 2/93 Wt 167. P 84. Dec 30/93 No change.

Jany 2/94 Wt 164½. P. 86. Jany 30. 94 Keeps about the same, Takes meals in A3 Ward in B2. Febry 28/94 Wt 162½. P 77. —

Feb 28/94 Feb 28/94. Keeps about the same, from month to month. Seldom speaks. Has no ambition. Is indolent and idle. Careless & untidy about his personal appearance. Contrary, & ugly at times. Inclined always to keep by himself. Has "spells" of laughing to himself. Sleeps in B2. and takes his meals in the A3 Ward.

Mar 3/31 March 3/94. Wt 164 lbs. Pulse 72. March 31/94. There is no change calling for remark, at this date.

Apl 2/30 April 2/94. Wt 164 - - 79. April 30/94. Patient appears of late, to be becoming more & more stupid. Much inclined to be indolent & lazy; lies about on the benches. Wont speak. Difficult to arouse in mornings.

May 31 June 30 July 31 During this period, no improvement has been noticed - Keeps in quite good flesh - Ex. Wt 164 lbs. Ex. Wt 170 lbs - Ex. Wt 168 lbs. Is restless in his ways: stubborn & of a mean disposition; is slovenly in dress & appearance. Quite difficult to get him to speak. Keeps almost keeps with work but very little. Is indolent & lazy - Is lately becoming more stupid - Health

1892

This man was brought here t
Habits are temperate and r
accompanying bodil
Insanity is now
to injure others; is n
watched during the p
the bromides.

On admission, is very quiet,
Oct 4 being weighed, and, very strenu
restless last night, sleeping bu
" 5 taking of pulse &c. Is stubborn a
" 6 restless last night, sleeping 6 hours.
" 7 has slept quite well (about 6 hours) las
" 8 out of bed for a time, sleeping about 6 ho
" 9 sleeping 5 hours last night. Am. Pulse 7
room last night; resisted so strongly being put to bed that it required several to do it. Stood
" 10 up until 3 am. Slept about 3 hours. Am Pulse 74. Pm. Pulse 80. Oct 10/92. Was restless for
" 11 about 4 hours, sleeping about 4 hours, last night. Am. Pulse 72. Pm. Pulse 80. Oct 11/92. Restless
" 12 and out of bed last night, sleeping but 2 hours. Am. Pulse 76. Pm. Pulse 74. Oct 12/92. Somewhat
" 18 restless, last night, sleeping 5 hours. Am. Pulse 76. Was today transferred to B2. Oct 18/92

ward and act,
. Oct 14/92. Was very
exists all interference, as
ulse 80. Oct 5/92. Was somewhat
t 6/92. Was somewhat restless
m. Pulse 80. Oct 7/92. Slightly restless &
. Am. Pulse 76. Pm. Pulse 72. Oct 8/92. Restless,
Pulse 70. Oct 9/92. Found standing up in his

Nov 3/92 During the past 6 nights, has, at times, been quite restless, but on the whole, has slept better, from 5 to 8 hours. Nov 3/92. Wt 164 lbs. Pulse 70. Nov 7/92. Has never been noisy at night. Was, for a time, very restless, sleeping poorly; has lately rested and slept better. Conduct by day has, at all times, been quiet. He has been clean, tidy and well-behaved, with the exception of resisting all interference. For some time after coming here was accustomed to walk the floor in slow, deliberate way, with eyes cast down, paying very little heed to those about him. When approached and addressed, scarcely answering, usually refusing to give his hand, showing no signs of pleasure or friendly greeting; gradually grew a little livelier in movement, and a little more animated in expression of countenance, and has, for some time, received the Drs greetings with a smile and a quite prompt return of them. Claims that he feels quite well. Has taken food regularly and in fair quantities.

Dec 5/92 Dec 5/92. Wt 163½ lbs. Pulse 68. Dec 7/92. Very infrequently slightly restless at night; As a rule, resting & sleeping well. Seems a little more willing to talk, a little more prompt in his answers, & somewhat more active physically, moving about more. Says nothing unless spoken to. Goes into room & looks out of the window, keeping away from others. Does not give expression to feelings of depression. Bodily health good. Dec 17/92. Transferred to B1 today.

Jan 3/93 Jan 3/93. Wt 164 lbs. Pulse 92. Jan 7/93. Is uniformly quiet, and seems to rest & sleep well at night. Still walks slowly about, with his hands in his pockets, eyes fixed upon the floor, saying nothing. When greeted, glancing up for a moment, & responding. Cannot be got to carry conversation further than to answer simple questions or greetings.

Jan 13/93. Tells the D. this morning, he (patient) does not know what Institution this is. Thinks he has been here about 2 weeks. Jan 15/93. Am. Lying down. Pulse 81; has headache; tongue coated; 16/93 given medicine. Jan 16/93. Am. Is up; feels fairly well; but has sore throat. Jan 26/93. Visited, today, by his father. —

Feb 7 Feb 7/93. Quiet & apparently resting and sleeping well at night. Conduct and behavior, by day, continue about as described in note of a month ago, though he now seems somewhat more active, occasionally working quite well, on the ward. Bodily health good.

Mar 18 Mar 18/93. Continues very quiet, sitting apart from others, unobservant of surroundings, speaking only when addressed. Bodily health seems fair.

April 12 April 12/93. Seems a little brighter, a little more willing to look up at his addresser, & around.

May 18 May 18/93. Patient seems to keep about the same, from day to day. Has little or nothing to do with any of his fellow-patients. Says nothing unless addressed & then replies only feebly. Is inactive. In quite good Physical health. May 31/93. Appetite not very good. Patient, however, is in good Physical condition. Inactive & idle; not inclined to do any work. Takes no part in games. Keeps by himself, on a bench, or strolls idly about hall, hands in pockets. Seldom talks. When spoken to, merely answers in a whisper. Inclined to be slovenly in dress & habits.

June 5/30 June 5/93. Wt 163 pounds. Pulse 84. June 30/93. Continues about as last described.

July 14 July 14/93. Has lost 4 pounds in weight, without any apparent cause. Does not complain

" 31 July 31/93. Seems to lack ambition; is dull & inanimate. Disinclined to get up in the morning. Foolish-acting, at times, laughing to himself. Has little or nothing to do with his fellow-patients. Seldom speaks unless addressed & then replies almost inaudibly. Does no work. Dull and uninterested in his surroundings. Untidy in habits. —

Aug 31 Aug 1/93. Has lost in weight the past month also. No apparent cause & he does not complain of any ill feeling. Aug 31/93. Very slow in action & movement. Walks the floor slowly or stands around, with hands in pockets. Untidy in dress; hard to get any word out of him or make him speak at all. Does not seem to improve much. —

Sept 1/30 Sept 1/93. Gained 6 pounds in flesh, last month. Sept 30/93. Is about the same. Never says a word. Will never sit in the one place, all day. Does not even care to keep himself clean.

Oct 31/93 Oct 1/93. A further gain in weight, in the past month. Oct 31/93. Seems to be getting worse. Does not care to talk or work. Is not clean or tidy in dress. Has to be told to wash & to come to meals. Ugly at times. Appetite poor.

Nov 2/93. Wt 163½. P 84 Nov 30/93 Appears to be getting worse. Is more slovenly & physical, has no ambition. Does not care to walk Dec 31/93 Always by himself. Is ugly at times very contrary. Appetite good Bowels reg. Dec 2/93 Wt 167. P 84 Dec 31/93 No change

Jany 7/94 Wt 164 lb. P. 86. Jany 30. 94 Keeps about the same, takes meals on A3 Sleeps on B2 Febry 28/94 Wt 162 lb P 77. —

Feb 28/94 Feb 28/94. Keeps about the same, from month to month. Seldom speaks. Has no ambition. Is indolent and idle. Careless & untidy about his personal appearance. Contrary, ugly at times. Inclined always to keep by himself. Has "fits" of laughing to himself. Sleeps on B2 and takes his meals on the A3 ward.

March 31/94 March 3/94. Wt 164 lbs. Pulse 92. March 31/94. There is no change calling for remark, at this date.

April 30/94 April 2/94. Wt 164 - - 79. April 30/94. Patient appears of late, to be becoming more & more stupid. Much inclined to be indolent & lazy; lies about on the benches. Wont speak. Difficult to arouse. Mornings.

May 31 June 30 July 31 During this period, no improvement has been noticed - keeps in quite good flesh - 3. Wt 164 lbs 9. Wt 170 lbs - 14 Wt 168 lbs Is reckless in his ways. Stubborn & of a mean disposition; is slovenly in dress & appearance. Quite difficult to get him to speak. Keeps about helps with work but very little. Is indolent & lazy. Is lately becoming more stupid - Health seems good - 132

Personal and Medical History of Michael Mahoney

Whole No. 3143

Residence, Austin, Mower Co.ty Minn

Date Admission, 4th October 1892

Admitted by, Dr Phelps Hour, 7 P.M.

How Sent, S. S. Washburn, Jof P, Mower County

Sex, Male

Age, 37

Civil Condition, Single

Children, None

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Is a church member

Habits, Good

Nativity, Red Rock, Mower Co.ty, Minn

Physicians Committing, C. A. Johnson and A. W. Allen

Correspondents, C. J. Mahoney, brother Albert Lea Rapids, Minn
(mother) Ellen Mahoney, Austin, Minn

No. for Year, 55

Insane Relatives, none — ; Insanity not hereditary

Cause Exciting, masturbation perhaps, but a blow over head from a shot-gun, the chief cause.—

Cause Predisposing,

Form, Melancholia — chronic

Accompanying Bodily Disorder, Masturbation

Suicidal or Not, Not

Date of this Attack, 2

Duration, 2

No. of Attack, not the 1st; 1st about 4 years ago.

No. of Admissions,

Age First Attack, 33 about

Time of Leaving, May 10" 93

Time in Hospital, 7 mo. 14 da.

Result, Imp'd.

EXAMINATION ON ADMISSION.

Ex'd by Dr Baker, Oct 6/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, somewhat sluggish

MEMORY: ? acts its accuracy & activity—

Past Events, Says, not very good, uncertain how long here.

Recent Events,

Special Subjects, approximates date of coming here

PERCEPTIVITY:

Alert or Dull, Ordinary observation seems fair; somewhat blunted

Correct or Illusive, Answers questions fairly well: values condition mm

REASONING POWER:

Ordinary Subjects,

Own Mental State, is fair

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has drunk to drunkenness at times. Left Eye ball moves inward, upward & downward, fairly freely, but not fully outward, when following object; right seems to move quite normally — Claims has had a cough sometimes at night & sweats. Also claims he had a quarrel at the pond 4 or 5 years ago & got a blow under the left Eye and on the head - was not unconscious after it, & went home into the woods; cannot say how long he remained there — Has felt sick & depressed all the past summer.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, is gloomy

DELUSIONS:

Systematized or Not,

Special Subjects, None detected

Transitory or Not,

HALLUCINATIONS: None detected

ILLUSIONS: None detected

CONVERSATION:

Coherent or Incoherent, coherent

Voluble or Reticent, Answers questions, but does not begin conversation, as a rule.

Personal and Medical History of Michael Mahoney

DETAILED HISTORY OF SICKNESS OF MR. M. Mahoney.
DIAGNOSIS.

DATE	HOUR	PULSE	RESP.	TEMP	
	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	
1893 April 27	7 5	76 74			up on ward.
28	7 5	70 88			ate no breakfast
29	7	74 76			
30	7				
May 1	7				
2					

NAME Michael Mahoney
(in underclothes)

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
January 3d	143½	80		10
" 10th	137	—		6½
* " 17th	126			2
* " 24th	126½		½	
* July 1st	125½			1
* " 9	127½		2	
* " 16	125			2½
* " 24	120			5
* March 2	124½	78	4½	
* " 11	125		½	
* " 18	126		1	
* " 25	126¾		¾	
* April 4th	127	—	¼	
* " 11th	128½	—	1½	
* " 18th	131	—	2½	
* " 26	132	—	1	
May — 3d	141¾	74		

Oct 29/92

M. [illegible] normal living, health not very good; [illegible]

Father or Pat. Relations, Father died at 45, of pleurisy, he thinks.

Brothers or Sisters, 4 brothers; all living; claims in good health; sisters, 1 living; claims good health—

Personal and Medical History of Michael Mahoney

Whole No. 3143

Residence, Austin, Mower Co.ty Minn

Date Admission, 4th October 1892

Admitted by, Dr Phelps Hour, 7 P.M.

How Sent, S. S Washburn, Jof P, Mower County

Sex, male

Age, 37

Civil Condition, single

Children, none

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Is a church member

Habits, Good

Nativity, Red Rock, Mower Co.ty, Min

Physicians Committing, C A Johnson and A W

Correspondents, C. J. Mahoney, brother, Pelican

(mother) Ellen Mahoney, Austin, Mi

No. for Year, 55

Insane Relatives, none — ; Insanity not hereditary

Cause Exciting, masturbation perhaps, but a blow over head from a shot-gun the chief cause.—

Cause Predisposing,

Form, Melancholia — chronic

" Masturbation

4 years ago.

EXAMIN

Eddy Dr Baker, Oct 6/92.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, somewhat sluggish

MEMORY: ? acts its accuracy & activity—

Past Events, Says, not very good, uncertain h

Recent Events,

Special Subjects, approximates date of comm

PERCEPTIVITY:

Alert or Dull, Ordinary observation seems fair; d

Correct or Illusive, Answers questions fairly well:

REASONING POWER:

Ordinary Subjects,

Own Mental State, is fair

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has drunk & drunkenness at times. Left Eye ball moves inward, upward & downward, fairly freely, but all, partly outward, when following object; right seems to move quite naturally. Claims has had a cough sometimes night sweats. Also claims he had a gunshot at the pond 4 or 5 years ago & got a blow under the left Eye and over the head - was not unconscious after it. Admits going into the woods; cannot say how long he remained there — has felt sick & depressed all the past summer.

CONVERSATION:

Coherent or Incoherent, coherent

Voluble or Reticent, Answers questions, but does not begin conversation, as a rule.

Personal and Medical History of Michael Mahoney

DETAILED HISTORY OF SICKNESS OF MR. M. Mahoney

DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
1893 April	7	5	76	72					
27	7	5	70	88					Up on ward.
28	7	5	74	76					ate no breakfast
29	7	5	74	76					
30	7	5	74	76					
May 1	7	5	72	76					On ward and yarding cattle
2	7	5	78	28					
3	7	5	24	76					
4	7	5	28	64					
5	7	5		64					
6	7	5	64						
7	7	5	102	72					Refuses to eat but willingly takes ice when offered by getting him started to it — Hungry & eats well
8	7	5	80	65					On ward — talks rational
9	7	5	80	64					On ward — talks rational
10	7		70						Visited by Mother & Brother — Talks Normal — Now left for about

Dr M Oct 24/92

M

Father or Pat. Relations, Father died at 44, of pleurisy, he thinks.

Brothers or Sisters, 4 brothers; all living; claims in good health; sisters, 1 living; claims good health—

Personal and Medical History of Michael Mahoney

and over the head - was not unconscious after he admits going into the woods; cannot say how long he remained there — Has felt sick + depressed all the past summer.

Personal and Medical History of Michael Mahoney

MEDICAL NOTS IN THE CASE OF M. Mahoney.

		DATE.	HR.	PULS.	TEMP.	RESP.	NOTES BY NURSE	NOTES BY PHYSICIAN.
1893	Mar	27	7.30	70				
			5.00	64				
		28	7.30	70			a/petite, g.n.d. Bowels move regular	
			5	68				
		29	7.30	76				
			5.	70				
		30	7.30	72			Bath.	
			5.	68				
		31	7.30	72				
			5	64			Getting stronger	
	April	1	7.30	76				
			5.00	68				
		2	7.00	70				
			6.00	64				
		3	7.30	74				
			6.30	78				
		4	7.30	76				
			5.00	68			Bowels move regular.	Bath.
		5	7.30	74				
			5.00	66				
		6	7.00	72				
			5.00	68				
		7	7.00	62				
			5.00	68				
		8	7.00	68				
			5.00	72				
		9	7.30	72				
			5.00	62				
		10	7.00	70				
			5.00	74				
		11	7.00	68				
			5.00	70				
		12	7.00	78			Bath.	
			5.00	72				
		13	7.00	66				
			5.00	72				
		14	7.00	76				
			5.00	74				
		15	7.00	72				
			5.00	66				
		16	7.00	76				
			5.00	74				
		17	7.00	76				
			5.00	64				
		18	7.00	62			a/petite g.n.d.	
			5.00	66				
		19	7.00	78			Bowels Move regular.	
			6.00	68			Bath.	
		20	7.00	80				
			5.00	72				
		21	7.00	72				
			5.00	68				
		22	7.00	76				
			6.00	70				
		23	7.00	72			a/petite g.n.d. bowels move regular.	
			5.00	72				
		24	7.00	60				
			5.00	66				
		25	7.00	74				
			5.00	70				
		26	7.00	72				
			5.00	68				

Mother or Mat. Relations, Mother living; health not very good; [illegible]

Father or Pat. Relations, Father died at 45, of pleurisy, he thinks.

Brothers or Sisters, 4 brothers; all living; claims in good health; sisters, 1 living; claims good health -

Personal and Medical History of Michael Mahoney

Personal and Medical History of Michael Mahoney

DETAILED HISTORY OF SICKNESS OF MR. M Mahoney
DIAGNOSIS . Mar 1 — 93

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
Mar 1	730		66		16		98.8		Bath.
	5		72		17		99.4		2 PM Bowels Moved.
" 2	730		72		17		99.6		
	5		74		17		98		
3	730		72		17		99.6		
	5		74		17		99.4		
4	730		70		16		98.8		
	5		70		17		99.2		
5	730		70		16		98.8		Very duel sugarathing and very stubborn at times
	5		66		17		99.8		
6	730		68		16		99.2		
	5		74		18		99		
7	730		75		16		99		
	5		68		17		99.4		appetite fairly good.
8	730		76		16		98.8		
	5		60		16		99		
9	730		70		16		99		
	5		60		14		99.2		
10	730		64		16		99		9 AM Gave bath.
	5		64		16		98.8		
11	730		74		16		98.8		
	5		64		14		99		
12	730		73		17		99.2		
	5		62		16		99.2		[illegible]
									Lies on back in bed - 7 days nothing.
13	730		68		14		98.4		
	5		68		14		99		
14	730		72		18		98		
	5		60		14		99.2		10 AM Bowels Moved.
15	730		72		16		99		
	5		67		16		99.2		Refuses Medicine.
16	730		68		16		98.8		
	5		64		16		99.2		
17	730		62		16		99		
	5		60		16		98.8		
18	730		72		16		98.6		appetite good.
	5		66		16		98.8		
19	730		72		16		98.8		
	5		72		17		98.6		
20	730		72		16		99		
	5		60		16		99		
21	730		66	Refused	8				Visited by Mother talked very little to her.
	5		70						
22	730		70						
	5		62						
23	730		72						
	5		66						
24	730		74						
	5		62						
25	730		68						
	5		64						2 PM Gave bath.
26	730		68						
	5		68						appetite good.

Mother or Mat. Relations, Mother living; health not very good; [illegible]

Father or Pat. Relations, Father died at 45, of pleurisy, he thinks.

Brothers or Sisters, 4 brothers; all living; claims in good health; sisters, 1 living; claims good health —

Oct 29/91

felt sick + depressed all the past summer.

Personal and Medical History of Michael Mahoney

Personal and Medical History of Michael Mahoney

DETAILED HISTORY OF SICKNESS OF MR. M. Mahoney
DIAGNOSIS. Feb 1, 93.

DATE:	HOUR	PULSE: AM	PULSE: PM	RESP.: AM	RESP.: PM	TEMP.: AM	TEMP.: PM	OTHER DATA.
Feb 1	7 30	65	15		98 4/5			Had slight passage
	5	60		17		98		
2	7 30	68	14		97			Appears dull and says he is very sick.
	5	68		18		97		Eats fairly well.
3	7 30	65	16		98			
	5	60		16		98		
4	7 30	68	15		98			
	5	65		16		99		
5	7 30	65	16		98			
	5	64		16		99		
6	7 30	75	16		99			Gave Laxative
	5	64		18		98		
7	7 30	69	16		98			2 PM Gave laxative Cascara - Bowels moved
	5	62		16		99		
8	7 30	74	17		98			7 45 A M Bowels moved freely
	5	66		16		99		
9	7 30	64	16		99			
	5	66		16		99		Bowels moved.
10	7 30	70	16		98			
	5	62		16		99		Appetite fairly good.
11	7 30	68	15		98			Appears some better of Cake.
	5	64		16		99		
12	7 30	72	16		98			
	5	76		18		99		Appetite fairly good.
13	7 30	74	16		98			
	5	66		16		99		Eats about same Appears better of Cake.
14	7 30	80	17		99			
	5	68		18		99		
15	7 30	68	15		98			Appears about the same.
	5	66		18		99		
16	7 30	70	15		99			
	5	66						
17	7 30	70	15		98			Refused one dr cane
	5	64		18		99		
18	7 30	74	17		98			Is very stubborn at times
	5	70		15		99		
19	7 30	72	15		99			Eats but very little of Cake
	5	67		16		99		
20	7 30	76	16		99			
	5	66		15		99		Restless all day.
21	7 30	72	17		98			
	5	78		18		99		
23	7 30	80	15		99			3 PM Bowels moved.
	5	72		15		99		out in the house walking around at midnight
24	7 30	92	16		99			
	5	72		17		99		" " " " " " " "
25	7 30	74	16		99			
	5	74		16		99		Days quiet all day.
26	7 30	74	17		98			
	5	70		16		99		No Changes
27	7 30	69	16		99			
	5	64		16		98		a little more energy.
28	7 30	76	17		98			
	5	72		16		99		

Mother or Mat. Relations, Mother living; health not very good; [illegible]

Father or Pat. Relations, Father died at 45, of pleurisy, I think.

Brothers or Sisters, 4 brothers; all living; claims in good health; sisters, 1 living; claims good health -

DETAILED HISTORY OF SICKNESS OF MR. M. Mahoney
DIAGNOSIS.

January 12 83

DATE:	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA.
Jan 13	730		62		17		99		Ate very little breakfast 8 PM Cleared mucus
		5		68		17		99	Ate no dinner 130 1 pint of milk 1 pint of milk
14	730		62		16		99		8 AM 1 pint of Milk
		5		64		18		100	
15	730		67		18		99		Ate no breakfast 8. 1 Pint of mucus. 1 PM pint of milk
		5		68		18		100	
16	730		68		18		99		
		5		60		17		98	
17	730		66		18		99		Enema of oil
		5		64		18		100	
18	730		62		18		986		Bowels moved copious evacuation had no effect
		5		60		17		99	12 PM Enema operated
19	730		64		17		984		Ate fourth good breakfast
		5		7				99	
20	730		69		17		98		
		5		66		18		998	
21	730		68		18		968		Bowels moved
		5							
22	730		66		17		982		
		5		64		19		100	
23	730		60		16		98		
		5		63				99	
24	730		66		17		986		Bowels Constive
		5		60		16		99	Enema of Oil
25	730		60		16		97		Enema had no Effect
		5		58		17		988	
26	730		60		16		984		2 PM Enema of Soap Suds
		5		60		17		986	8 PM Bowels moved.
27	730		66		18		996		
		5		52		14		984	
28	730		63		15		982		Eats fairly well.
		5		69		15		992	
29	730		70		16		982		
		5		64		16		994	
30	730		74		17		984		
		5		60		15		99	
31	730		62		16		986		7 PM Bowels moved. Eats fairly well.
		5		60		15		988	

Mother or Mat. Relations, Mother living; health not very good; [illegible]

Father or Pat. Relations, Father died at 55, of pleurisy, he thinks.

Brothers or Sisters, 11 brothers; all living; claims in good health; sisters, 1 living; claims good health –

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet 1 in. WEIGHT, 149 pounds, usual. (Wt. 135 to 165 pds.) NUTRITION, below normal

WOUNDS OR ABNORMALITIES, wounds, none or slight; abnormalities, none detected.

TONGUE, Tremors, slight Coatings, almost none; moist Promptness Movement, moderate promptness

PUPILS, Equality, Equal (see "Remarks" preceding page) Size, about normal.

Response Light, none Accommodation, more marked in right eye - left eye almost none

SIGHT, Far sight, left eye impaired; right better; left eye also affected for near-sight.

HEARING, Good.

COORDINATION, Arms, finger to nose, eyes shut, fairly good; Legs, Standing on foot, fairly steady; left a little more steady than right; Running quickly, slight hesitation. Standing, eyes shut, some unsteady

TREMORS, Hands, almost none Tongue, slight

Facial Muscles, almost none General,

REFLEXES, Patellar, Equal; though somewhat diminished.

Other Reflexes,

ARTICULATION, Hesitating, somewhat Slurred,

FACIAL EXPRESSION, somewhat dull

SENSIBILITY,

HEART, Seems normal.

LUNGS, Chest 35½ in.; Exp. 2 in.; apex harsh respiration; especially right; sibilant rales at left apex.

Oct 29/04 EXAM. URINE, Color, pale yellow; reaction acid; Sp. gr. 1012; albumen, none; urea 1%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, Yes	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, one attack 4 years ago. ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, mother living; health not very good; troubled with nervousness.

Father or Pat. Relations, Father died at 44, of pleurisy, hiccucks.

Brothers or Sisters, 4 brothers; all living; Charles in good health; sisters, 1 living; Charles good health.

1892

This patient was brought here by Burt Maxwell and T. J. Mahoney, brother, with the following history. Habits are good. Cause of this attack is masturbation perhaps, but a blow over the head with a shot gun the chief cause. Form is acute. First symptoms of disease manifested by his going into the woods and remaining without food or clothing. This is not the first attack; had one about 14 years ago. Insanity is now manifested by lack of memory; afraid that he may injure some person in one of his fits. Has shown no disposition to injure others. Not suicidal; not filthy or destructive. The above mentioned blow is supposed to have been the beginning of his difficulties (Pt. – was out of his head for a while after the blow, for a few days. Was restrained a week ago.) Has not been under medical treatment. —

Oct 5 Oct 5/92. Was restless for 4 hours, sleeping but 3 hours, last night. Was visited by his brother today. —
" 6 Oct 6/92. Somewhat restless for a couple of hours, sleeping 5 hours last night. Am. Pulse 86.
" 7/8 Oct 7/92. Rested quite well, sleeping 7 hours last night. Am. Pulse 72. Oct 8/92. Rested quite well,
" 12 sleeping 7 hours last night. Am. Pulse 100. Visited yesterday and today by his brother; Oct 12/92 –
" 15 visited today by friends. Oct 15/92. Has been occasionally restless at night for a short time; as a rule, has slept well at night, from 7 to 8 hours. —
Nov 2 Nov 2/92. Wt 156½ pds. Pulse 84. Has gained 7½ pounds in weight.
" 8 Nov 8/92. Is invariably quiet at night, apparently resting and sleeping well. Complains occasionally that he does not sleep well. Ever since admission, conduct has been quite uniform; having been uniformly clean, tidy, and well-behaved, dressing and taking care of himself. Goes out walking; on the ward, is rather inclined to sit about, unoccupied, but converses considerable with his fellow-patients, and talks fairly freely with his physicians when spoken to. Talk is quiet, calm, and coherent. Pt has complained of not feeling well, quite often; has lately, however, seemed to feel better. Bodily health has improved. Has written a few letters
" 15 to his relatives. Nov 15/92. Complains that he does not feel well. His "stomach swells" and is
" 16 constipated. Nov 16/92. Is in bed today; "feels weak & down-hearted". Pulse 68. —
" 17 Nov 17/92. Still in bed. Is constipated. Pulse 73. "Brain does not seem right"; "seems dead & dry" –
" 23 Nov 23/92. Has kept his bed the greater part of the time since last notes, depressed in spirit & complaining of weakness occasionally of constipation. Pulse has been normal rate. Is up today & feels quite well.
Dec 5/6 Dec 5/92. Wt 153½ pds. Pulse N. Dec 7/92. Says he has been constipated for several days; vomited
" 8 this morning. Dec 8/92. Has refused food for 3 or 4 meals. Says he is not going to eat any more. Is very much depressed. Scarcely looking up or speaking when questioned or addressed. Since the spell of the 16th ult. at which he went to bed, patient has complained quite often of not feeling well; of feeling weak & badly in an indefinite way; spending the greater part of the time in his room; quite often going to bed by day. Is troubled some with constipation. Dec 9/92. Eats a little. Thinks his breath
" 9 smells badly. Dec 14/92. Is eating some better. Dec 19/92. Wt 148½ pounds. Dec 26/92. Wt 150 pds.
" 14/15 pds
1893
Jan 3/9 Jan 3/93. Wt 143½ pds. Pulse 80. Jan 4/93. Is quiet at night, apparently resting and sleeping well.
" 11 Is quite depressed in manner & sluggish. Looks quite thin & pale. Jan 11/93. Was today visited
" 12 by mother & sister. Jan 12/93. Examination made this Am. Tongue heavily coated. Was put to bed
" 13 in the "Sick-Ward" & instructions given to feed well. Jan 13/93. Was restless for an hour, sleeping 5 hours last night. Bowels moved. Complained of pain in stomach, & was very uneasy in his sleep.

Jan 13 Am. Ate very little breakfast, but took glass of milk. Pm. Ate no dinner; drank 2 pints of
" 14 milk during afternoon & at supper-time. Jan 14/93. Restless 1 hour & sleeping 6 hours, last night: had
" 15 a copious soft passage from bowels. 8 Am. Drank 1 pint milk. Jan 15/93. Out of bed and restless for an hour or so, sleeping fairly well, 6 hours, last night. Am. Ate no breakfast. Drank a pint
" 17/18 of milk at 8 Am & another at 1 Pm. Jan 17/93. Is constipated; given laxative. Jan 18/93. Still constipated. Visited today by his brother. Am. Refused medicine. Was given Enemas of oil this Pm.
" 20 Jan 20/93. Complains of pain in bowels, probably due to constipation; again given laxative. Visited by brother again, today. Jan 23/92. Again visited by brother today. Jan 24/93. Bowels for past 3
" 23/24 days have been obstinately constipated. Enemas of soapsuds & have been given. Jan 26. Pm Bowels
" 26 moved. Jan 31/93. For the first few days after removal to this hall, ate very little, sometimes refusing food altogether, but drank fair quantities of milk; later, commenced eating solid food, and for the past few days & now is, eating fairly well. During the day, pulse & respiration have been normal, with an occasional rise in temperature, more so in the evening (see record).
Feb 8 Feb 8/93. Since last note on this subject, patient has been uniformly quiet at night, resting and sleeping well (8 hours) each night; but last night, was quite restless, sleeping only 5 hours. Pulse, when taken during the night, has been about normal. As to one of the night, bowels have moved fairly freely. By day, has remained in bed quietly. At present seems quiet, dull and to not suffer in anyway. Has been gradually losing in weight (upto 1st inst) (see attached slip) —
" 9/28 Feby 9/93. Has regained 2 pounds in weight in the past 8 days. Feb 28/93 – Attached cli-
Mar 1 8 daily – -nical record for past month shows an approximately normal temperature, Pulse & respiration
March 1 8/93. Lies quietly in bed, at night apparently resting & sleeping well. Still lies quietly in bed by day; scarcely moves. Speaks only when addressed and occasionally
" 21 between them. Takes food somewhat better & has gained a little. Recently gave expression to the feeling that "it would be better if he were dead." Mar 21/93. Visited today by his brother.
April 12 April 12/93. Lies quietly in bed. Appears to sleep well at night. Keeps his bed, by day, & still.
" 28 Can be persuaded to say very little, merely in answer to greetings & questions. April 28/93. Was got
" 29 up from his bed today, dressed & put out on the hall. April 29/93. Remained in bed this morning, refusing his breakfast.
May 3/10 May 3/93. Has kept steadily gaining in weight. May 10/93. During the 3rd week in April, patient slept quite poorly at night (only from 4 to 5 hours each night). Has since rested quietly and slept 7 or 8 hours, each night. Sleeps around the ward daily; sluggish to speak. Does not talk much. – appetite has continued good (though he refuses occasional meals), and bowels regular.
Was today visited by his mother & brother & brothers taken home.

Discharged —

Personal and Medical History of Edward McCarthy

Whole No. 3144

Residence, Wells, Rice Co. Minn.

Date Admission, 5th October 1892.

Admitted by, Dr Phelps Hour, 1.30 P.m

How Sent, R. A. Mott, J of P, Rice County

Sex, Male

Age, 22 years

Civil Condition, Single

Children, none

Age Youngest Child,

Occupation, Farm laborer

Degree Education,

Profession Religion, Member Catholic Church

Habits, Good

Nativity, born in this County

Physicians Committing, W. D. Gadbois & B. Mattocks

Correspondents, Tim. McC— Faribault

Walbridge 1.30 says address changed to Faribault

No. for Year, 56

Insane Relatives, Father and 1 sister; (Insanity hereditary)

Cause Exciting, Inflammation of bowels with hereditary tendency

Cause Predisposing, Heredity

Form, Pubescent Insanity

Accompanying Bodily Disorder, victim of Masturbation

Suicidal or Not, Suicidal (see page 183.)

Date of this Attack, about 1 year ago (Continuous?)

Duration, about a year

No. of Attack, not 1st; one about 1 year ago

No. of Admissions,

Age First Attack, 21 years

Time of Leaving, 16th April 1894

Time in Hospital, 1 year; 6 mo; 11 days

Result, Died. Pulmonary Tuberculosis

EXAMINATION ON ADMISSION.

Exd by Dr Baker Oct 7/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Somewhat sluggish

MEMORY:

Past Events,

Recent Events, Seems fair

Special Subjects,

PERCEPTIVITY: Ordinary observation seems fairly good.

Alert or Dull, Answers questions with some hesitation.

Correct or Illusive, Thinks he has Consumption by the way this breath acts on his lungs. —

REASONING POWER:

Ordinary Subjects, } Poor; Impaired.
Own Mental State, }
Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

Has drunk some; not much; When showing a little mole near his navel, he points to his penis & says "that is uncapped"; says "thinks he has Consumption." (without reference to any suggestion to the lungs by the Dr.) Says why he was sent here was because "he was crazy"; feels as if his brain had turned into water — feels it "flushing round" as if in water; been this way for a year. —

EMOTIONAL STATE:

Normal, Calm,

Indifferent, probably

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, That brain is turned into water; feels so;

Transitory or Not, that he has Consumption; + trouble with lungs

HALLUCINATIONS: None detected.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, fairly coherent.

Voluble or Reticent, talks on being questioned; before answering questions, looks puzzled for a time.

Personal and Medical History of Edward McCarthy

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11 in WEIGHT, 142 pounds NUTRITION, fairly good

WOUNDS OR ABNORMALITIES, Small scar on forehead; a few on scalp; abnormalities, probably none.

TONGUE, Tremors, quite marked (Broad + flabby, large, tooth marked) Coatings, Considerable, moist Promptness Movement, slow

PUPILS, Equality, Equal Size, dilated

Response Light, yes Accommodation, yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, finger to nose, eyes shut, fairly well;

Legs, standing, one foot, steady; standing, eyes shut, sways some;

TREMORS, Hands, almost none Tongue, quite marked.

Facial Muscles, almost none General,

REFLEXES, Patellar, Equal; slightly exaggerated.

Other Reflexes,

ARTICULATION, Hesitating, fairly prompt Slurred, somewhat muffled

FACIAL EXPRESSION, Blankish

SENSIBILITY,

HEART, Sounds clear; 2nd sound accentuated

LUNGS, Chest 34½ in; Expansion 2½ to 3 in; seem good.

Dr M 10/11/92 EXAM. URINE, Clear, pale yellow; Sp. gr. 1028; albumen none; urea 1.8%

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, yes	Careless,
BOWELS, Normal,	Constipated, yes	Irregular,
APPETITE, Good,	Medium,	Poor, irregular
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow, probably.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; claims good health.

Father or Pat. Relations, Father died; don't know where;

Brothers or Sisters, 3 Brothers living; ages 27. 23. 14 respectively. One sister; is in this Hospital now, & has been

1892

This man was brought here by Wm Gergen Jr, Chief of Police, Faribault, Minn; the following history accompanied the warrant. Insanity is hereditary. Supposed cause of attack is inflammation of the bowels, with hereditary tendency; form is acute; is also a victim of masturbation. First symptoms were manifested about 1 year ago. This is not first attack; can't state as to others. Insanity is now manifested by being suicidal & having tendency to maim. Has shown disposition to injure others. Tried to hang himself and, at one time, to use a razor for castration. Is not disposed to filthy or destructive habits. Bodily disease not serious. Has not been restrained or confined, but has been watched carefully. Has been under medical treatment for about a year for stomach trouble, and for his passion for self-abuse. He is under the impression that harm is to be done him. He is violent and attempts to harm his friends.

Oct 6 Oct 6/92. Was slightly restless for 2 hours, sleeping 6 hours, last night. Am. Pulse 88.
" 7 Oct 7/92. Slightly restless for 1 hours, sleeping 7 hours, last night. Am. Pulse 88.
" 8 Oct 8/92. Was restless for a couple of hours, sleeping 8 hours, last night. Am. Pulse 80.
" 9/10 Oct 9/92. Somewhat restless, out of bed once, sleeping 6 hours, last night. Oct 10/92. Restless and
" 15 somewhat noisy, sleeping 4 hours last night. Oct 15/92. Is usually more or less restless at night, sleeping from 6 to 7 hours.
Nov 2 Nov 2/92. Wt 145 pds. Pulse 84. Was, on admission, put on B2, and has since been moved to A'
" 10 Nov 10/92. Has never been noisy at night, although, at times, restless out of bed. Has dressed and attended to his personal wants. Is clean but slouchy. On the hall, sits on a bench with others, without entering into conversation with them. Walks about in an aimless, indifferent way. When greeted, mumbles some reply, but does not carry on any further conversation. Gets up and shakes hands in a childish way. Whole conduct and general behavior looks mid-ite mental infeeblement. Bodily health seems quite good.
Dec 5 Dec 5/92. Wt 139 pds. Pulse 102. Has lost 6 pounds in weight in past 4 weeks.
" 10 Dec 10/92. Fairly quiet, resting and sleeping well. Has a quite-markedly feeble-minded way about him. Is quite pale. Dec 15th/92. Is pale & anaemic. Pulse 95. Has some cough. There are no marked physical changes at apices of lungs detectable. Put on vin. Is restless and confused in mind this evening, that he was moved to B3 for closer night-watching.
" 18 Dec 18/92. Has been almost completely stuporous since yesterday; refuses to take his medicine.
" 21 Dec 21/92. Lies curled up in bed, says absolutely nothing. Eats poorly. Is constipated.
" 24 Dec 24/92. Lies in a completely stuporous state; in terms muscular rigidity. Resists all efforts to move him. Jan 1/93. See attached record of Pulses & temperatures, from which it is seen that there is a quite marked morning rise above the morning, with a difference of from 1 to 2 degrees.
1893 Jan 3 Pulse is also much accelerated. Jan 3/93. Wt (in underclothing) 126 pds. Pulse 92.
" 11 Jan 11/93. Since the 15th ult, has been stuporous & completely silent the greater part of the time; has however, roused up a few times, & spoken a few words when extended his hand in greeting. Has quite often called for water. There has been a marked tendency to constipation, no cough; lately, a fair appetite; at times, absolutely refusal of medicine, some restlessness
" 17 dyspepsia. Some fever present (see record.). 8 Pm. Pulse 95. T @ 101. Jan 12/93, 830 am. Pulse 9[illegible]
" 13 T @ 100. 7 Pm. Pulse 116. T @ 101.4. Jan 13/93. 830 Am. Pulse 98. T @ 99.8. (See continuation on Record attached).

1893

NAME. Edward McCarthy (* (under clothing))

AL CHART. Designed by J. P. Crozer Griffith, M.D.

Age, ... Residence, ...

Case No. ..... Date, May 3.

Date, 1893.	Weight.	Pulse.	Gain.	Loss.	
Jan 3d	126	92	.....	4 (est.)	
Jan 7th	121	86	.....	1	
Mar 3d	125½	104	½	.....	
Apr 4th	136	110	.....	.....	
May 3d	131	98	.....	Still sick in bed	
June 3d	145	140	.....	up	
July 1st	130½	104	.....	"	
			.....		
			.....		
			.....		
			.....		
			.....		

Temperature Scale. Centigrade Scale.

Treatment.

URINE. Oz. / Contains / Sp. Gr.

BOWELS.

WEIGHT.

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Aug 1/93 Aug 14 - [illegible] 138 pds. [illegible] (carried to page 132)

1892

This man was brought here [illegible]
history accompanied the warran[illegible]
-mation of the bowels, with heredit[illegible]
First symptoms were manifested [illegible]
Insanity is now manifested by [illegible]
to injure others. Tried to hang him[illegible]
to filthy & destructive habits. Bodily [illegible]
been watched carefully. Has been [illegible]
and for his passion for self-abuse. He is [illegible] -omach trouble, [illegible] harm is to be done him. He is violent and attempts to harm his friends.

Oct 6 Oct 8/92. Was slightly restless for 2 hours, sleeping 6 hours, last night. Am. Pulse 88.
" 7 Oct 7/92. Slightly restless for 1 hours, sleeping 7 hours, last night. Am. Pulse 88.
" 8 Oct 8/92. Was restless for a Couple of hours, sleeping 8 hours, last night. Am. Pulse 80.
" 9/10 Oct 9/92. Somewhat restless, out of bed once, sleeping 6 hours, last night. Oct 10/92. Restless and
" 15 somewhat noisy, sleeping 4 hours last night. Oct 15/92. Generally more or less restless at night, sleeping from 6 to 7 hours.
Nov 2 Nov 2/92. Wt 148 pds. Pulse 84. Was, on admission, put on B2, and has since been moved to A1
" 10 Nov 10/92. Has never been noisy at night, although at times, restless out of bed. Has dressed and attended to his personal wants. Is clean but slouchy. On the hall, sits on a bench with others, without entering into conversation with them. Walks about in an aimless, indifferent way. When greeted, mumbles some reply, but does not carry on any further conversation. Gets up and shakes hands in a childish way. Whole conduct and general behavior looks to indicate mental infeeblement. Bodily health seems quite good.
Dec 5 Dec 5/92. Wt 139 pds. Pulse 102. Has lost 5 pounds in weight in past 4 weeks.
" 10 Dec 10/92. Fairly quiet, resting and sleeping well. Has a quite-markedly feeble-minded
" 15 way about him. Is quite pale. Dec 15th/92. Is pale & anaemic. Pulse 95. Has some cough. There are no marked physical Changes at apices of lungs detectable. Put on iron. Is restless and confused in mind this evening, that he was moved to B3 for closer night-watching.
" 18 Dec 18/92. Has been almost completely stuporous since yesterday, refuses to take his medicine.
" 21 Dec 21/92. Lies curled up in bed, says absolutely nothing. Eat poorly. Is constipated.
" 24 Dec 24/92. Lies in a completely stuporous state; in tense muscular rigidity. Resists all efforts to move him. Jan 1/93. See Attached record of Pulses & temperatures, from which it is seen that
1893 Jan 1 there is a quite marked morning rise above the morning, with a difference of from 1 to 3 degrees.
" 3 Pulse is also much accelerated. Jan 3/93. Wt (in underclothing) 126 pds. Pulse 92.
" 11 Jan 11/93. Since the 15th ult, has been stuporous & completely silent the greater part of the time; has however, roused up a few times, & spoken a few words & even extended his hand in greeting. Has quite often called for water. There has been a marked tendency to Constipation, no cough; lately, a fair appetite; at times, absolutely refusal of medicine, some restlessness & dyspnoea. Some fever present (see record.) 8 Pm. Pulse 95. T 101. Jan 12/93, 830 Am. Pulse 94
" 13 T 100. 7 Pm. Pulse 116. T 101.4. Jan 13/93. 830 Am. Pulse 98. T 99.8. (See continuation on Record attached).

GRAPHIC CLINICAL CHART. Designed by J. P. Crozer Griffith, M.D.

Name, Edward McCarthy Age, Residence,
Disease, Case No. Date, May 3.

DAY OF MONTH: 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23
DAY OF DISEASE:
TIME OF DAY: A.M. / P.M.

PULSE / RESP. / TEMP.

Clinical Notes.

Treatment.

URINE: Oz. / Contains / Sp. Gr.
BOWELS.
WEIGHT.

Centigrade Scale.

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(carried to page 132)

1892

This
history
-mation
First a
Insanity
to injure
to filthy
been watch
and for his
and attempt

-romach trouble,
-nm is to be done him. He is violent

Oct 6 Oct 6/92. Was s -rs, sleeping 6 hours, last night. Am. Pulse 88.
" 7 Oct 7/92. Highly restless for 1 hours, sleeping 7 hours, last night. Am. Pulse 88.
" 8 Oct 8/92. Was restless for a Couple of hours, sleeping 8 hours, last night. Am. Pulse 80.
" 9/10 Oct 9/92. Somewhat restless, out of bed once, sleeping 6 hours, last night. Oct 10/92. Restless and
" 15 somewhat noisy, sleeping 4 hours last night. Oct 15/92. Generally more or less restless at night, sleeping from 6 to 7 hours.
Nov 2 Nov 2/92. Wt 148 pds. Pulse 84. Was, on admission, put on B2, and has since been moved to A1
" 10 Nov 10/92. Has never been noisy at night, although, at times, restless out of bed. Has dressed and attended to his personal wants. Is clean but slouchy. On the hall, sits on a bench with others, without entering into conversation with them. Walks about in an aimless, indifferent way. When greeted, mumbles some reply, but does not carry on any further conversation. Gets up and shakes hands in a childish way. Whole conduct and general behavior looks indicate mental enfeblement. Bodily health seems quite good.
Dec 5 Dec 5/92. Wt 139 pds. Pulse 102. Has lost 6 pounds in weight in past 4 weeks.
" 10 Dec 10/92. Fairly quiet, resting and sleeping well. Has a quite markedly feeble minded
" 15 way about him. Is quite pale. Dec 15th/92. Is pale & anaemic. Pulse 96. Has some cough. There are no marked physical changes at apices of lungs detectable. Put on iron. Is restless and confused in mind this evening, that he was moved to B3 for closer night watching.
" 18 Dec 18/92. Has been almost completely stuporous since yesterday; refuses to take his medicine.
" 21 Dec 21/92. Lies curled up in bed, says absolutely nothing. Eats poorly. Is constipated.
" 24 Dec 24/92. Lies in a completely stuporous state; in tense muscular rigidity. Resists all efforts to move him. Jan 1/93. See Attached record of Pulses & temperatures, from which it is seen that
1893 Jan 1 there is a quite marked evening rise above the morning, with a difference of from 1 to 2 degrees.
" 3 Pulse is also much accelerated. Jan 3/93. Wt (in undercloching) 126 pds. Pulse 92.
" 11 Jan 11/93. Since the 15th ult, has been stuporous & completely silent the greater part of the time; has however, roused up a few times, & spoken a few words & even extended his hand in greeting. Has quite often called for water. There has been a marked tendency to Constipation, no cough; lately, a fair appetite; at times, absolutely refusal of medicine, some restlessness
" 17 by spells. Some fever persists (see record.). 8 Pm. Pulse 95. T (R) 101. Jan 12/93. 830 Am. Pulse 94
" 13 T (R) 100. 7 Pm. Pulse 116. T (R) 101.4. Jan 13/93. 830 Am. Pulse 98. T (R) 99.8. (See continuation on Record attached).

CLINICAL NOTES IN THE CASE OF Mr Ed Mc Carthy

MO:	DAY.		PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
July	17	5 Pm	108	102.4			
	18	8 Am	100	99.6			
		5 Pm	116	101.8			
	19	8 AM	100	99.3		appetite good Bowels regular	
		5 Pm	100	102.4			
	20	8 Am	94	99.4			
		5 Pm	116	103			
	21	8 Am	98	99.3			
		5 Pm	124	103.2			
	22	8 Am	98	100			
		5 Pm	100	101.			
	23	8 Am	100	99			
		5 Pm	120	102.6			
	24	8 Am	92	99			
		5 Pm	108	102.6			
	25	8 Am	100	98.6			
		5 Pm	114	100.6			
	26	8 Am	108	99.2			
	27	8 Am	100	98.8			
		5 Pm	108	101.2			
	28	8 Am	100	99.4			
		5 Pm	96	101.4			
	29	8 Am	104	99.8			
	30	8 Am	106	99.4			
		5 Pm	100	99.6			
	31	8 Am	120	100.4			
		5 Pm	126	101.			
Aug	1	8 Am	123	100.2			
	2	8 Am	106	99.8			
		5 Pm	119	101.6		appetite good Bowels regular	
	3	8 Am	119	100.3			
		5 Pm	128	101.4			
	4	8 Am	116	99.3			
	5	8 Am	120	99.8			
		5 Pm	122	100.8			
	6	8 Am	104	99.8			

Aug 1/93 Aug 1/93 - Wt 138 pds. Pulse 120. Aug 1/93 - Appetite good. Bowels regular.

(carried to page 132)

1892

Oct 6 Oct 6/92. [illegible] excess for 2 hours, sleeping 6 hours, last night. Am. Pulse 88.

" 7 Oct 7/92. Slightly restless for 1 hours, sleeping 7 hours, last night. Am. Pulse 88.

" 8 Oct 8/92. Was restless for a Couple of hours, sleeping 8 hours, last night. Am. Pulse 80.

" 9/10 Oct 9/92. Somewhat restless, out of bed once, sleeping 6 hours, last night. Oct 10/92. Restless and

" 15 somewhat noisy, sleeping 4 hours last night. Oct 15/92. Is usually more or less restless at night, sleeping from 6 to 7 hours.

Nov 2 Nov 2/92. Wt 145 pds. Pulse 84. Was, on admission, put on B2, and has since been moved to A'-

" 10 Nov 10/92. Has never been noisy at night, although, at times, restless out of bed. Has dressed and attended to his personal wants. Is clean but slouchy. On the hall, sits on a bench with others, without entering into conversation with them. Walks about in an aimless, indifferent way. When greeted, mumbles some reply, but does not carry on any further conversation. Gets up and shakes hands in a childish way. Whole conduct and general behavior looks indicate mental infeeblement. Bodily health seems quite good.

Dec 5 Dec 5/92. Wt 139 pds. Pulse 102. Has lost 6 pounds in weight in past 4 weeks.

" 10 Dec 10/92. Fairly quiet, resting and sleeping well. Has a quite markedly feeble-minded

" 15 way about him. Is quite pale. Dec 15th/92. Is pale & anaemic. Pulse 96. Has some cough. There are no marked physical changes at apices of lungs detectable. Put on iron. Is restless and confused in mind this evening, that he was moved to B3 for closer night watching.

" 18 Dec 18/92. Has been almost completely stuporous since yesterday; refuses to take his medicine.

" 21 Dec 21/92. Lies curled up in bed, says absolutely nothing. Eat poorly. Is constipated.

" 24 Dec 24/92. Lies in a completely stuporous state; in tense muscular rigidity. Resists all efforts to move him. Jan 1/93. See Attached record of Pulses & temperatures, from which it is seen that there is a quite marked morning rise above the morning, with a difference of from 1 to 3 degrees.

1893 Jan 1

" 3 Pulse is also much accelerated. Jan 3/93. Wt (in underclothing) 125 pds. Pulse 92.

" 11 Jan 11/93. Since the 15th ult, has been stuporous & completely silent the greater part of the time; has, however, roused up a few times, & spoken a few words when he denied his hand in greeting. Has quite often called for water. There has been a marked tendency to Constipation, no cough; lately, a fair appetite; at times, absolutely refusal of medicine, some restlessness

" 12 by spells. Some fever present (see record.). 8 Pm. Pulse 95. T @ 101. Jan 12/93, 830 Am. Pulse 94

" 13 T @ 100. 7 Pm. Pulse 116. T @ 101.4. Jan 13/93. 830 Am. Pulse 98. T @ 99.8. (See continuation on Record attached).

DETAILED HISTORY OF SICKNESS OF MR. Ed Mc Carthy

DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
19				12			1024	1024	Up on Ward
20	8		100				98	99	
20	8		104				1002		Appetite good - Quite noisy at times
"		5		110					and restless
20	8		110				1026		
21	8		92				100		
"		5		124				1032	
22	8		94				996		
"		5		110				1024	
23	8		96				994		Appetite good Bowels regular
"		5		110				102	
24	8		98				100		
25	8		88				997		
"		5		114				1025	
26	8		104				1004		
"		5		120				103	
27	8		106				1002		
"		5		118				1026	
28	8		98				1006		
"		5		120				1041	
29	8		106				1009		
30	8		106				1002		
"		5		126				1026	
July 1	8		94				101		
"		5		132				1042	
2	8		104				1002		
3	8		96				1014		
"		5		122				104	
4	8		94				1002		
"		5		120				1022	
5	8		96				996		
"		5		112				1028	
6	8		100				994		
7	8		100				1002		
"		5		108				1028	
8	8		96				996		
"		5		104				1018	
9	8		108				998		
"		5		124				1028	
10	8		104				1008		
"		5		124				1027	Visited by Mother
11	8		94				998		
"		5		116				1022	
12	8		112				1002		
"		5		112				1028	
13	8		100				100		
"		5		104				1028	
14	8		100				1006		
"		5		116				1022	
15	8		94				100		
16	8		96				100		
"		5		118				1028	
17	8		92				994		Is not as active as when first

getting out of bed - Is still careless in conduct - full of reckless action untidy. His temp has risen of a range since up but he does not seem to feel it.

(carried to page [illegible])

Medical History of Edward Mc Carthy

1892

Oct 6 Oc

" 7 Oct 7/92. Saying restless for 1 hours, sleeping 7 hours, last night. Am. Pulse 88.

" 8 Oct 8/92. Was restless for a couple of hours, sleeping 8 hours, last night. Am. Pulse 80.

" 9/10 Oct 9/92. Somewhat restless, out of bed once, sleeping 6 hours, last night. Oct 10/92. Restless and

" 15 somewhat noisy, sleeping 4 hours last night. Oct 15/92. Generally more or less restless at night, sleeping from 6 to 7 hours.

Nov 2 Nov 2/92. Wt 145 pds. Pulse 88. Was, on admission, put on B², and has since been moved to A¹.

" 10 Nov 10/92. Has never been noisy at night, although, at times, restless out of bed. Has dressed and attended to his personal wants. Is clean but slouchy. On the hall, sits on a bench with others, without entering into conversation with them. Walks about in an aimless, indifferent way. When greeted, mumbles some reply, but does not carry on any further conversation. Gets up and shakes hands in a childish way. Whole conduct and general behavior looks to mental enfeeblement. Bodily health seems quite good.

Dec 5 Dec 5/92. Wt 139 pds. Pulse 102. Has lost 6 pounds in weight in past 4 weeks.

" 10 Dec 10/92. Fairly quiet, resting and sleeping well. Has a quite markedly feeble-minded

" 15 way about him. Is quite pale. Dec 15th/92. Is pale & anaemic. Pulse 95. Has some cough. There are no marked physical changes at apices of lungs detectable. Put on vin. Is restless and confused in mind this evening, but he was moved to B³ for closer night watching.

" 18 Dec 18/92. Has been almost completely stuporous since yesterday; refuses to take his medicine.

" 21 Dec 21/92. Lies curled up in bed, says absolutely nothing. Eats poorly. Is constipated.

" 24 Dec 24/92. Lies in a completely stuporous state; in tense muscular rigidity. Resists all efforts to move him. Jan 1/93 See Attached record of Pulses & temperatures, from which it is seen that there is a quite marked evening rise above the morning, with a difference of from 1 to 2 degrees.

1893 Jan 1

" 3 Pulse is also much accelerated. Jan 3/93. Wt (in underclothing) 125 pds. Pulse 92.

" 11 Jan 11/93. Since the 15th ult, has been stuporous & completely silent the greater part of the time; has, however, roused up a few times, & spoken a few words & moved & raised his head in greeting. Has quite often asked for water. There has been a marked tendency to constipation, no cough; lately, a fair appetite; at times, absolutely refusal of medicine, some restlessness

" 12 dyspnoea. Some fever present (see record). 8 Pm. Pulse 95. T(e) 101. Jan 12/93, 830 Am. Pulse 94

" 13 T(e) 100. 7 Pm. Pulse 116. T(e) 101.4. Jan 13/93. 830 Am. Pulse 98. T(e) 99.8. (See continuation on Record attached).

Ed. Mc Carthy

DETAILED HISTORY OF SICKNESS OF MR. Ed. Mc. Carthy
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
May 25	8		102		21		99.2		
" 26	8	5	116	104	23	20	99	102	Appetite good. Bowels not moved
" 27	8	5	114	100	21	22	101.8	99	Up on Ward.
" 28	8	5	114	124	22	24	100.3	104	Up on Ward. Is quite restless
" 29	8	5	144	124	24	24	100.2	102	and also noisy at times.
" 30	8	5	114	120	22	22	100.3	102	
" 31	8	5	114	130	22	24	100.6	101.7	
June 1	8	5	130	126	24	24	101	103.6	
" 2	8	5	114	114	22	22	101.2	101.4	
" 3	8	5	110	126	22	24	101.6	103.8	
" 4	8	5	128	120	24	22	101.3	101.4	Coughs quite a good deal at times
" 5	8	5	126	126	24	24	103.4	103.4	Struck on tattoo [illegible] today for the
" 6	8	5	128	126	24	24	100.3	103.7	
" 7	8	5	110	112	22	22	100	102.4	Struck the attendant today when
" 8	8	5	134		24				going to take temperature and
									took the thermometer in his mouth and guessed a struggle ensued before he got shaken out.
" 9	8		108		24		100.6		
" 10	8	5	120	104	24	22	99.8	103	
" 11	8	5	106	102	22	22	100	103	
" 12	8	5	112	127	22	24	100.6	102.4	
" 13	8	5	128	120	24	22	100.7	102.8	
" 14	8	5	106	106	22	22	100.2	102.9	
" 15	8	5	116	122	24	24	100.8	102	Vomited a good deal before and after dinner
" 16	8	5	102	116	22	24	100.7	103.2	
" 17	8	5	114	110	24	22	101	103.1	
" 18	8	5	102	124	22	24	100.1	103.2	
" 19	8		100		22		100.1		
			98				100.3		

Since being allowed out of doors has been extremely turbulent, mischievous & easily stirred up — appearance about the same.

Aug 1/93 to Aug 19

(carried to page 132)

sonal and Medical History of Edward Mc Carthy

...new. Used to hang himself and, at one time, to use a razor for castration. Is not disposed to filthy or destructive habits. Bodily disease not serious. Has not been restrained or confined, but has been watched carefully. Has been under medical treatment for about a year for stomach trouble, and for his passion for self-abuse. He is under the impression that harm is to be done him. He is violent and attempts to harm his friends.

Oct 6 Oct 6/92. Was slightly restless for 2 hours, sleeping 6 hours, last night. Am. Pulse 88.
" 7 Oct 7/92. Slightly restless for 1 hours, sleeping 7 hours, last night. Am. Pulse 88.
" 8 Oct 8/92. Was restless for a couple of hours, sleeping 8 hours, last night. Am. Pulse 80.
" 9/10 Oct 9/92. Somewhat restless, out of bed once, sleeping 6 hours, last night. Oct 10/92. Restless and somewhat noisy, sleeping 4 hours last night. Oct 15/92. Generally more or less restless at night, sleeping from 6 to 7 hours.
Nov 2 Nov 2/92. Wt 145 pds. Pulse 84. Was, on admission, put on B2, and has since been moved to A1.
" 10 Nov 10/92. Has never been noisy at night, although, at times, restless out of bed. Has dressed and attended to his personal wants. Is clean but slouchy. On the hall, sits on a bench with others, without entering into conversation with them. Walks about in an aimless, indifferent way. When greeted, mumbles some reply, but does not carry on any further conversation. Gets up and shakes hands in a childish way. Whole conduct and general behavior looks indicate mental infeeblement. Bodily health seems quite good.
Dec 5 Dec 5/92. Wt 139 pds. Pulse 102. Has lost 6 pounds in weight in past 4 weeks.
" 10 Dec 10/92. Fairly quiet, resting and sleeping well. Has a quite-markedly feeble-minded way about him. Is quite pale. Dec 15th/92. Is pale & anaemic. Pulse 95. Has some cough. There are no marked physical changes at apices of lungs detectable. Put on iron. Is restless and confused in mind this evening, but been moved to B3 for closer night-watching.
" 18 Dec 18/92. Has been almost completely stuporous since yesterday; refuses to take his medicine.
" 21 Dec 21/92. Lies curled up in bed; says absolutely nothing. Eat poorly. Is constipated.
" 24 Dec 24/92. Lies in a completely stuporous state; in tense muscular rigidity. Resists all efforts to move him. Jan 1/93. See Attached record of Pulses & temperatures, from which it is seen that there is a quite marked morning rise above the morning, with a difference of from 1 to 2 degrees.
" 3 Pulse is also much accelerated. Jan 3/93. Wt (in underclothing) 126 pds. Pulse 92.
" 11 Jan 11/93. Since the 15th ult, has been stuporous & completely silent the greater part of the time; has, however, roused up a few times, & spoken a few words when attended. Has had in greeting. Has quite often called for water. There has been a marked tendency to constipation, no cough; lately, a fair appetite; at times, absolutely refusal of medicine, some restlessness
" 17 dyspnoea. Some fever present (see record.). 8 Pm. Pulse 95. T 101. Jan 12/93, 830 am. Pulse 94
" 13 T 100. 7 Pm. Pulse 116. T 101.4. Jan 13/93. 830 Am. Pulse 98. T 99.8. (See continuation on Record attached).

MEDICAL NOTS IN THE CASE OF Ed. Mc. Carthy

MO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
April	14	8 A.M.	120	101			
		5 P.M.	118	102			
	15	8 A.M.	108	100.2			
		5 P.M.	112	101			
	16	8 A.M.	92	99.4		appetite good.	
		5 P.M.	100	100			
	17	8 A.M.	82	99.4		Is quite noisy and restless	
	17	5 P.M.	104				
	18	8 A.M.	112	100.6			
		5 P.M.	118	102.4			
	20	8 A.M.	116	101.4			
	21	8 A.M.	120	101.2			
		5 P.M.	104	102.2			
	22	8 A.M.	112	101.4		appetite good	
		5 P.M.	106	102			
	23	8 A.M.	116	102			
		5 P.M.	102	103.6			
	24	8 A.M.	108	101.4			
		5 P.M.	106				
	25	8 A.M.	106	100.2			
		5 P.M.	116	101.4			
	26	8 A.M.	104	100.			
		5 P.M.	108	101.4			
	27	8 A.M.	96	99.8			
		5 P.M.	93	101.3			
	28	8 A.M.	98	101.2			
		5 P.M.	95	101.3		Bowels moved freely at 730 A.M.	
	29	8 A.M.	96	100.8			
		5 P.M.	118	102.6		Bowels moved	
	30	8 A.M.	113	101.			
		5 P.M.	111				
May	1	8 A.M.	97				
		5 P.M.	103				
	2	8 -	99	102.3			
	3	8 A.M.	98	100.		Bowels moved last night.	
		5 P.M.	90	101			
	4	8 A.M.	92	99.6			

(carried to page 132)

to injure others. Given to taking himself out, at one time, to use a razor for castration. Is not disposed to filthy or destructive habits. Bodily disease not serious. Has not been restrained or confined, but has been watched carefully. Has been under medical treatment for about a year for stomach trouble, and for his passion for self-abuse. He is under the impression that harm is to be done him. He is violent and attempts to harm his friends.

Oct 6 Oct 6/92. Was slightly restless for 2 hours, sleeping 6 hours, last night. Am. Pulse 88.
" 7 Oct 7/92. Slightly restless for 1 hours, sleeping 7 hours, last night. Am. Pulse 88.
" 8 Oct 8/92. Was restless for a Couple of hours, sleeping 8 hours, last night. Am. Pulse 80.
" 9/10 Oct 9/92. Somewhat restless, out of bed once, sleeping 6 hours, last night. Oct 10/92. Restless and somewhat noisy, sleeping 4 hours last night. Oct 15/92. Generally more or less restless at night, sleeping from 6 to 7 hours.
Nov 2 Nov 2/92. Wt 145 pds. Pulse 84. Was, on admission, put on B2, and has since been moved to A'
" 10 Nov 10/92. Has never been noisy at night, although, at times, restless out of bed. Has dressed and attended to his personal wants. Is clean but slouchy. On the hall, sits on a bench with others, without entering into conversation with them. Walks about in an aimless, indifferent way. When greeted, mumbles some reply, but does not carry on any further conversation. Gets up and shakes hands in a childish way. Whole conduct and general behavior looks indicate mental infeeblement. Bodily health seems quite good.
Dec 5 Dec 5/92. Wt 139 pds. Pulse 102. Has lost 6 pounds in weight in past 4 weeks.
" 10 Dec 10/92. Fairly quiet, resting and sleeping well. Has a quite-markedly feeble-minded way about him. Is quite pale. Dec 15th/92. Is pale & anaemic. Pulse 95. Has some Cough. There are no marked physical Changes at apices of lungs detectable. Put on vin. Is restless and confused in mind this morning, but has been moved to B3 for closer night-watching.
" 18 Dec 18/92. Has been almost Completely stuporous since yesterday; refuses to take his medicine.
" 21 Dec 21/92. Lies curled up in bed, says absolutely nothing. Eats poorly. Is constipated.
" 24 Dec 24/92. Lies in a completely stuporous state; in tense muscular rigidity. Resists all efforts to move him. Jan 1/93. See Attached record of Pulses & temperatures, from which it is seen that there is a quite marked morning rise above the morning, with a difference of from 1 to 2 degrees.
1893 Jan 1
" 3 Pulse is also much accelerated. Jan 3/93. Wt (in underclothing) 126 pds. Pulse 92.
" 11 Jan 11/93. Since the 15th ult., has been stuporous & completely silent the greater part of the time; has, however, roused up a few times, & spoken a few words when attended. Has had in greeting. Has quite often called for water. There has been a marked tendency to constipation, no cough; lately, a fair appetite; at times, absolutely refusal of medicine, some restlessness & dyspnoea. Some fever present (see record.). 8 PM. Pulse 95. T (R) 101. Jan 12/93, 830 Am. Pulse 94
" 12 T (R) 100. 7 PM. Pulse 116. T (R) 101.4. Jan 13/93. 830 Am. Pulse 98. T (R) 99.8. (See continuation on Record attached).

Obstinately Constipated. No passage for 4 days

MEDICAL NOTS IN THE CASE OF Ed. Mc Carthy

MO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
March	13	5 PM.	90	99.4			
	14	8 AM.	100	99.4			
	"	5 PM.	94	99.2			
	15	8 AM.	100	100		Appetite good.	
	"	5 PM.	102	100.2		Bowels regular	
	16	8 AM.	116	99.8			
	"	5 PM.	104	100.6			
	17	8 AM.	118	100.2			
	"	5 PM.	110	101.2			
	18	8 AM.	116	99.8			
	"	5 PM.	108	100.8			
	19	8 AM.	116	100.4			
	"	5 PM.	108	100.2			
	20	8 AM.	118	100.2			
	"	5 PM.	104	100.4			
	21	8 AM.	112	100.2			
	"	5 PM.	106	101			
	22	8 AM.	116	100			
	"	5 PM.	120	101			
	23	8 AM.	124	101.2			
	"	5 PM.	116	101.2			
	24	8 AM.	96	99.2			
	"	5 PM.	98	100.2			
	25	8 AM.	90	98.4			
	"	5 PM.	94	100		Bowels moved	
	26	8 AM.	102	100.2			
	"	5 PM.	96	100.2			
	27	8 AM.	106	99.4			
	"	5 PM.	94	99.6			
	28	8 AM.	84	99.6			
	"	5 PM.	84	100			
	29	8 AM.	102	99.4			
	"	5 PM.	88	100.6			
	30	8 AM.	104	99.8			
	"	5 PM.	116	101			
	31	8 AM.	102	99.6			
	"	5 PM.	118	101.2			
April	1	8 AM.	106	99.8		Appetite good	
	"	5 PM.	110	101.2			
	2	8 AM.	106	100			
	"	5 PM.	118	99.8			
	3	8 AM.	100	100.2			
	"	5 PM.	130	102.4			
	4	8 AM.	116	101.2		Bowels moved	
	"	5 PM.	112	100.8			
	5	8 AM.	108	99.8			
	"	5 PM.	116	101.2			
	6	8 AM.	122	100.6			
	"	5 PM.	130	102.4			
	7	8 AM.	136	102		Has to be fed again today	
	"	[illegible]	[illegible]	[illegible]			
	8	8 AM.	140	101.2			
	"	5 PM.	108	101.4			
	9	8 AM.	106	100.2			
	"	5 PM.	118	101.4			
	10	8 AM.	106	100		Is quite noisy and restless	
	"	5 PM.	106	101.2			
	11	8 AM.	114	100.6			
	"	5 PM.	96	100.8			
	12	8 AM.	104	101.6			
	"	5 PM.	90	101.6			
	13	8 AM.	104	100.4			
	"	5 P.M.	106 -	101.4			

Bowels regular. Is fairly well-behaved now.

(carried to page 132)

and attempts to harm his friends.

Oct 6 Oct 6/92. Was slightly restless for 2 hours, sleeping 6 hours, last night. Am. Pulse 88.
" 7 Oct 7/92. Slightly restless for 1 hours, sleeping 7 hours, last night. Am. Pulse 88.
" 8 Oct 8/92. Was restless for a Couple of hours, sleeping 8 hours, last night. Am. Pulse 80.
" 9/10 Oct 9/92. Somewhat restless, out of bed once, sleeping 6 hours, last night. Oct 10/92. Restless and
" 15 somewhat noisy, sleeping 4 hours last night. Oct 15/92. Generally more or less restless at night, sleeping from 6 to 7 hours.

Nov 2 Nov 2/92. Wt 145 pds. Pulse 84. Was, on admission, put on B2, and has since been moved to A1
" 10 Nov 10/92. Has never been noisy at night, although, at times, restless out of bed. Has dressed and attended to his personal wants. Is clean but slouchy. On the hall, sits on a bench with others, without entering into conversation with them. Walks about in an aimless, indifferent way. When greeted, mumbles some reply, but does not carry on any further conversation. Gets up and shakes hands in a childish way. Whole conduct and general behavior looks to dicate mental infeeblement. Bodily health seems quite good.

Dec 5 Dec 5/92. Wt 139 pds. Pulse 102. Has lost 6 pounds in weight in past 4 weeks.
" 10 Dec 10/92. Fairly quiet, resting and sleeping well. Has a quite markedly feeble minded
" 15 way about him. Is quite pale. Dec 15th/92. Is pale & anaemic. Pulse 96. Has some Cough. There are no marked physical changes at apices of lungs detectable. Put on iron. Is somewhat
" 18 restless and confused in mind this evening, that he was moved to B3 for closer night watching.
" 21 Dec 18/92. Has been almost completely stuporous since yesterday; refuses to take his medicine.
" 24 Dec 21/92. Lies curled up in bed, says absolutely nothing. Eats poorly. Is constipated.
1893 Jan 1 Dec 24/92. Lies in a completely stuporous state; in tense muscular rigidity. Resists all efforts to move him. Jan 1/93. See Attached record of Pulses & temperatures, from which it is seen that
" 3 there is a quite marked evening rise above the morning, with a difference of from 1 to 2 degrees. Pulse is also much accelerated. Jan 3/93. Wt (in underclothing) 126 pds. Pulse 92.
" 11 Jan 11/93. Since the 15th ult., has been stuporous & completely silent the greater part of the time; has however, roused up a few times, & spoken a few words & even extended his hand in greeting. Has quite often asked for water. There has been a marked tendency to constipation, no cough; lately, a fair appetite; at times, absolutely refusal of medicine, some restlessness
" 12 dry spells. Some fever persists (see record.). 8 Pm. Pulse 95. Temp 101. Jan 12/93, 830 am. Pulse 94
" 13 Temp 100. 7 Pm. Pulse 116. Temp 101.4. Jan 13/93. 830 Am. Pulse 98. Temp 99.8. (See continuation on Record attached).

tely Constipated. no passage for 4 day.
Lies in bed; Placidly inactive Dull

DETAILED HISTORY OF SICKNESS OF MR. Ed Mc Carthy
DIAGNOSIS.

1893.

DATE	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	OTHER DATA
13	16	97				101	Inv. bed. stuporous takes food well.
14	84	96			102		refuses medicine. Takes soup & milk
15	36	110			98	101.8	appetite good
16	80	116			97.6	101.4	
17	80	106			99.2	101.8	
18	84	102			97.8	101.8	
19	80	96			99.2	101.8	Bowels moved
20	84	110			101	102	
21	86	114			100.6	101.4	
22	80	96			99.2	101	Bowels moved, Eats well
23	84	100			99.2	101.4	
24	80	102			100	101.4	
25	80	98			99.6	100.8	Bowels moved
26	84	104			99	100.8	
27	84	98			99	100	
28	84	96			99	101	
29	80	96			99.2	101	
30	80	96			99.6	101	Bowels moved this a.m.
31	80	90			99.6	100.8	Appetite good
Feb. 1	84	96			99.2	100.8	Dull - Lies in bed - Placidly inactive
2	84	96			100	100.8	Bowels moved
3	84	98			99.8	100.2	
4	84	92			99	100.4	
5	84	90			99	100	
6	84	88			99.2	100	Bowels regulated by enema a good deal of Death. does not talk any except when asking for something
7	84	96			99	100.2	
8	84	100			100	100	appetite poor.

(carried to page 132)

...l and Medical History of Edward McCarthy

...iately Constipated. No passage for 4 day.
...d. Less in bed during ...

DETAILED HISTORY OF SICKNESS OF MR. Edward McCarthy
DIAGNOSIS.

DATE	AGE	PULSE AM.	PULSE PM.	RESP. AM.	RESP. PM.	TEMP. AM.	TEMP. PM.	OTHER DATA.
1892								
Oct 18	10	120						Temp. Ordered put to bed.
	8	116				99		
	9	112				100		
	8	104				100		
	9	104				100		
	9	98				100		
	8	106				100		
	7	110				101.8		
	7	106				96		
	6	106				100.6		
	6	112				101		
	8	110				99		
	8	110				99		
	8	104				100		
	9	110				99		
	8	112				101		
	9	98				99		
	8	102				101		
	9	106				99		Is constipated
	8	102				99		
	9	98				99		
	8	92				100		
	9	106				100		
	8	94				101		
1893								
Jan 1	8	100				99		
	8	90				101		

...wers regular. Is fairly well-behaved now.
(carried to page 132)

...to filthy & destructive habits. Bodily disease not known. Has ...
been watched carefully. Has been under medical treatment for about a year for stomach trouble, and for his passion for self-abuse. He is under the impression that harm is to be done him. He is violent and attempts to harm his friends.

Oct 6 Oct 6/92. Was slightly restless for 2 hours, sleeping 6 hours, last night. Am. Pulse 88.
" 7 Oct 7/92. Slightly restless for 1 hours, sleeping 7 hours, last night. Am. Pulse 88.
" 8 Oct 8/92. Was restless for a couple of hours, sleeping 8 hours, last night. Am. Pulse 80.
" 9/10 Oct 9/92. Somewhat restless, out of bed once, sleeping 6 hours, last night. Oct 10/92. Restless and somewhat noisy, sleeping 4 hours last night. Oct 15/92. Is usually more or less restless at night, sleeping from 6 to 7 hours.
Nov 2 Nov 2/92. Wt 145 pds. Pulse 84. Was, on admission, put on B2, and has since been moved to A1.
" 10 Nov 10/92. Has never been noisy at night, although at times, restless out of bed. Has dressed and attended to his personal wants. Is clean but slouchy. On the hall, sits on a bench with others, without entering into conversation with them. Walks about in an aimless, indifferent way. When greeted, mumbles some reply, but does not carry on any further conversation. Gets up and shakes hands in a childish way. Whole conduct and general behavior looks indicate mental enfeblement. Bodily health seems quite good.
Dec 5 Dec 5/92. Wt 139 pds. Pulse 102. Has lost 6 pounds in weight in past 4 weeks.
" 10 Dec 10/92. Fairly quiet, resting and sleeping well. Has a quite-markedly feble-minded way about him. Is quite pale. Dec 15th/92. Is pale & anaemic. Pulse 96. Has some cough. There are no marked physical changes at apices of lungs detectable. Put on iron. Is restless and confused in mind this evening, that he was moved to B3 for closer night-watching.
" 18 Dec 18/92. Has been almost completely stuporous since yesterday; refuses to take his medicine.
" 21 Dec 21/92. Lies curled up in bed, says absolutely nothing. Eats poorly. Is constipated.
" 24 Dec 24/92. Lies in a completely stuporous state; in tense muscular rigidity. Resists all efforts to move him. Jan 1/93. See Attached record of Pulses & temperatures, from which it is seen that there is a quite marked evening rise above the morning, with a difference of from 1 to 2 degrees.
1893 Jan 1
" 3 Pulse is also much accelerated. Jan 3/93. Wt (in underclothing) 126 pds. Pulse 92.
" 11 Jan 11/93. Since the 15th ult. has been stuporous & completely silent the greater part of the time; has however, roused up a few times, & spoken a few words when stirred. Has his hand in greeting. Has quite often called for water. There has been a marked tendency to constipation, no cough; lately, a fair appetite; at times, absolutely refusal of medicine, some restlessness dyspnoea. Some fever persists (see record.). 8 Pm. Pulse 95. T 101. Jan 12/93, 830 Am. Pulse 94
" 12 T 100. 7 Pm. Pulse 116. T 101.4. Jan 13/93. 830 Am. Pulse 98. T 99.8. (See continuation on Record attached).
" 13

[illegible] and Medical History of Edward Mc Carthy

[illegible] been restrained or confined, but has
[illegible] under medical treatment for about a year for stomach trouble,
and for his passion for self-abuse. He is under the impression that harm is to be done him. He is violent
and attempts to harm his friends.

Oct 6 Oct 6/92. Was slightly restless for 2 hours, sleeping 6 hours, last night. Am. Pulse 88.
" 7 Oct 7/92. Slightly restless for 1 hours, sleeping 7 hours, last night. Am. Pulse 88.
" 8 Oct 8/92. Was restless for a Couple of hours, sleeping 8 hours, last night. Am. Pulse 80.
" 9/10 Oct 9/92. Somewhat restless, out of bed once, sleeping 6 hours, last night. Oct 10/92. Restless and
" 15 somewhat noisy, sleeping 4 hours last night. Oct 15/92. Is usually more or less restless
at night, sleeping from 6 to 7 hours.

Nov 2 Nov 2/92. Wt 148 pds. Pulse 84. Was, on admission, put on B[2], and has since been moved to A[1].
" 10 Nov 10/92. Has never been noisy at night, although, at times, restless out of bed. Has dressed
and attended to his personal wants. Is clean but slouchy. On the hall, sits on a bench with
others, without entering into conversation with them. Walks about in an aimless, indifferent
way. When greeted, mumbles some reply, but does not carry on any further conversation.
Gets up and shakes hands in a childish way. Whole conduct and general behavior looks to intense
mental infeeblement. Bodily health seems quite good.

Dec 5 Dec 5/92. Wt 139 pds. Pulse 102. Has lost 6 pounds in weight in past 4 weeks.
" 10 Dec 10/92. Fairly quiet, resting and sleeping well. Has a quite-markedly feeble-minded
" 15 way about him. Is quite pale. Dec 15th/92. Is pale & anaemic. Pulse 96. Has some Cough.
There are no marked physical Changes at apices of lungs detectable. Put on vin. Is so restless
and confused in mind this evening, that he was moved to B[3] for closer night-watching.
" 18 Dec 18/92. Has been almost Completely stuporous since yesterday; refuses to take his medicine.
" 21 Dec 21/92. Lies curled up in bed, says absolutely nothing. Eat poorly. Is constipated.
" 24 Dec 24/92. Lies in a completely stuporous state; in tense muscular rigidity. Resists all efforts
to move him. Jan 1/93. See Attached record of Pulse & temperatures, from which it is seen that
1893 there is a quite marked morning rise above the morning, with a difference of from 1 to 2 degrees.
Jany 1
" 3 Pulse is also much accelerated. Jan 3/93. Wt (in underclothing) 126 pds. Pulse 92.
" 11 Jan 11/93. Since the 15th ult. has been stuporous & completely silent the greater part of the
time, has however, roused up a few times, & spoken a few words & extended his hand in
greeting. Has quite often called for water. There has been a marked tendency to Constipation,
no cough; lately, a fair appetite; at times, absolutely refusal of medicine, some restlessness
" 12 dyspnoea. Some fever persists (see record). 8 Pm. Pulse 95. T(a) 101. Jan 12/93. 830 Am. Pulse 9[illegible]
" 13 T(a) 100. 7 Pm. Pulse 116. T(a) 101.4. Jan 13/93. 830 Am. Pulse 98. T(a) 99.8. (See continuation on Record attached).

CLINICAL NOTS IN THE CASE OF Mr Ed Mc Carthy

MO.	DA.	HR.	PULS	TEMP.	RESP.	NOTES BY NURSE.	NOTES BY PHYSICIAN.
Feby	1	9 am	78	97.6		Bowels moved	
	7	730 Pm	100	100.6			
	"	11	10 Am	82	99.6		
	"		530 Pm	90	101.2		
	"	11	9 Am	87	100	22	
	"		3 Pm	106	100.3		
	"	12	9 Am	80	99.6		
	"		730 Pm	98	100.2	Bowels regular	
	"	13	9 Am	84	99.6		
	"		730 Pm	98	100.2		
	"	14	9 Am	92	99		
	"	11	5 PM	84	99.8		
	"	15	8 AM	78	98.4		
	"	11	7 PM	80	100.2		
	"	16	9 Am	86	98.6		
	"	11	5 PM	102	100.6		
	"	17	8 30 AM	96	99.4		
	"		5 PM	90	101		
	"	18	7 AM	106	100.2		
	"	11	5 PM	108	104		
	"	19	8 30 AM	116	101		
	"	11	5 PM	112	102.8		
	"	20	8 30 AM	86	99	Bowels Costive	
	"		5 PM	84	99.8	Bowels regular	
	"	21	8 AM	100	100		
	"		5 PM	104	100.6		
	"	22	8 30 AM	108	100.2		
	"		5 PM	118	102.8		
	"	23	8 30 AM	116	99.4		
	"		5 PM	110	101		
	"	24	8 AM	92	99.4		
	"		5 00	99	100.8		
	"	25	8 AM	90	99.4		
	"		5 PM	104	100.8		
	"	26	8 AM	96	99.2		
	"		5 PM	102	100.8		
	"	27	8 AM	100	100.2	Bowels apparently	
	"		5 PM	100	100.6	Bowels regular	
	"	28	8 AM	96	99.2		
	"		5 PM	94	100.4		
March	1	8 AM	92	99.4			
	"		5 PM	98	100.2		
	2	8 AM	100	99.4			
	"		5 PM	94	101.2		
	3	8 AM	96	99.4			
	"		5 PM	94	100.2		
	4	8 AM	94	99.2			
	"		5 PM	86	100.4		
	5	8 AM	100	99.8			
	6	8 AM	102	99.8			
	"		5 PM	116	101.8		
	7	8 AM	96	99.4			
	"		5 PM	110	102.2		
	8	8 AM	108	99.8			
	9	8 AM	104	99.4			
	"		5 PM	92	99.8		
	10	8 AM	104	99.8	Talks some today, laughs &c		
	"		5 PM	94	101.6		
	11	8 AM	100	99.4	Talks and responds		
	"		5 PM	100	100.6	what he hears	
	12	8 AM	102	99.4	said		
	"		5 PM	100	100.6		
	13	8 AM	102	99.			

1892

Oct 6
" 7
" 8
" 9/10
" 15

Nov 2
" 10

Dec 5
" 10
" 15
" 18
" 21
" 24

1893
Jany 1
" 3
" 11
" 13
" 17
" 23

1893

Jan 29/93. Is obstinately constipated. No passage for 4 day.

Feb 1/93. Is dull. Lies in bed; placidly inactive. Feb 1/93. Still confined to his bed by night & day. Lies there in a stuporous, dull condition. Bowels have moved fairly, at times, though there is a strong tendency to constipation. Appetite has, as a rule, been good. Drinks a good deal of water; and seldom speaks except to ask for something. Occasionally refuses his medicine. Acceleration of pulse has continued; also the marked evening rise in temperature, as also noted previously. By night, has rested & slept well, apparently, uniformly 8 hours, seemingly but little restless. Has lately become somewhat dirty in his habits. Though appetite is noted as being good, yet he is losing in flesh. (see Record attached).

Mar 23 Mar 28/93. For a long time perfectly silent, quiet at night & saying nothing by day; for the past 2 weeks has been somewhat noisy at night & has talked freely, but foolishly, as if participating in greetings. Incoherent & silly. Has kept his bed steadily, with acceleration of pulse & low fever, with little cough & few other objective signs of disease. Is fairly well.

Apl 6 Apl 6/93. Temperature has been moderately low; pulse not very rapid; patient in very fair nutrition; and was today got up. Apl 8/93. Has been up the past two days, but the pulse became so much more accelerated than while in bed & the temperature ran up higher than it was for several weeks past. Patient again put to bed. Has recently put on Enteric pills of Creosote, but refused them after
" 13 taking a few. Apl 13/93. Has been quite decidedly restless & noisy at night for some time past; & quite recently was extremely noisy & awake all night, getting up & attacking his room-mates, talks a great deal, noisily & incoherently, excitedly, by day. Has almost no cough.

May 18 May 18/93. During 3rd week of last month, was very noisy & restless at night, sleeping only from 3 to 5 or 6 hours each night. Since then, though he has been more or less restless & noisy, yet he has slept, as a rule, 6 to 7 hours, and within the past 10 nights, sleep has been uniformly good. Is more or less restless & noisy by day. Talks a good deal, noisily & incoherently. Appetite has been good & bowels
" 31 regular (see Records attached.). — May 31/93. Appetite good; bowels are irregular. Has been, all along, confined to his bed, until a couple of weeks ago, when he was got up. Has a very restless disposition & is never contented sitting down, and, at times, is extremely noisy. Talks quite rationally; seems to remember quite a good deal of his past life. Habits clean at present, though he has been dirty for a days, during this month.

June 3/30 June 3/93. Has gained some in weight, since being up from his bed. June 30/93. Keeps about the house.
July 10/31 July 10/93. Was visited by his mother, to day. July 31/93 Appetite fairly good. Bowels move regular. Is fairly quiety-behaved. Occasionally gets into trouble with his fellow-patients. Seems improving somewhat. Habits fairly clean now. Temperature record (as per attached sheets) has been proving better, rather than poorer, since he has been up.

Summary. Patient was confined to his bed for some months. After being allowed up & about, was for some time, extremely talkative, mischievous & easily stirred up; very noisy, at times, also. During July, he was not so active as when first gotten out of bed. Is still careless, incoherent, full of reckless action; untidy. His temperature has more of a range, since up, but he does not seem to feel it.

Aug 1/93 Aug 1/93. 2 lbs 13 8 ozs. Pulse 120. Aug 1/93. Appetite good. Bowels regular. Is fairly well-behaved now.

(carried to page 132)

Personal and Medical History of Martin R Grattum

Whole No. 3146

Residence, Norway, aforesaid County.

Date Admission, 6th October 1896.

Admitted by, D. Phelps Hour, 9. am

How Sent, E. V. Farrington, Jo P., Fillmore County

Sex, male

Age, 30

Civil Condition, Single

Children, None

Age Youngest Child,

Occupation, Farming

Degree Education,

Profession Religion, Yes; Lutheran.

Habits, Good

Nativity, Minnesota

Physicians Committing, G. A. Love and Henry Jones

Correspondents, Rasmus Johnson (Father)
Jno. Grattum (Bro) Mpls. Sverige office Chicago - Minn
Ole Antrison - (Bro-in-law)
Lanesboro'

No. for Year, 58

Insane Relatives, None — ; (Insanity not hereditary)

Cause Exciting, Masturbation

Cause Predisposing, Masturbation?

Form, Melancholia - Chronic

Accompanying Bodily Disorder, None

Suicidal or Not, Not

Date of this Attack, 2 years ago

Duration, 2 years or so

No. of Attack, 1st — so far as known

No. of Admissions,

Age First Attack, 28 years

Time of Leaving, 10th May 1896.

Time in Hospital, 3 years 7 mos : 4 days

Result, Died: Phthisis pulmonalis

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr Baker Oct 7/96 =

MENTAL ACTIVITY:

Clear or Confused, seems clear

Quick or Sluggish, fairly active

MEMORY:

Past Events, Recent Events, Special Subjects, } says "not the best"

PERCEPTIVITY:

Alert or Dull, Ordinary observation fair; answers

Correct or Illusive, Questions fairly well: hesitates some.

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, acknowledges he gets scared without any reason.

Transitory or Not,

HALLUCINATIONS: none

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:

Patient examined in bed on "Sick Ward". Claims has had a pain between the navel & ensiform for 2 years. Complains that noise hurts his ears & causes him pain in heart & stomach. Says, vomits sometimes; abdomen rather full, has a "doughy" feeling; tympanic resonance of stomach & the large colon runs up abnormally high towards the left axilla; gets tired when he talks much. Says, used to lock himself in his room because people used to scare him -

Personal and Medical History of Martin R. Grattum

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, rather poor; is pale

WOUNDS OR ABNORMALITIES, Scars on right Cheek & left hand; abnormalities, none.

TONGUE, Tremors, quite marked Coatings, slight Promptness Movement, rather slow; irregular

PUPILS, Equality, Equal Size, dilated

Response Light, imperfect Accommodation, yes

SIGHT, fair

HEARING, Good

COORDINATION, Arms, finger to nose, eyes shut, slight inaccuracy.

Legs, standing, unfast, poorly; standing, eyes shut, slight swaying;

TREMORS, Hands, some of. Tongue, quite marked.

Facial Muscles, some of face, in intention General,

REFLEXES, Patellar, Equal, exaggerated.

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART, No murmurs; 1st sound not strong; heart's action made rapid on slight exertion.

LUNGS, Girth 32½in - expansion 2in; some hardness of respiration at apices.

Oct 7/96 EXAM. URINE, Color yellow; reaction acid; Sp. gr. 1024; albumen none; urea 1·2%

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Constipated, Yes Irregular, occasionally has diarrhoea

APPETITE, Good, says Medium, Irregular Poorly.

SLEEP, Good, Poor, Irregular,

PULSE, 98 RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of *Martin R. Grattum*

1892

This patient was brought here by Ole. S. Olson, Deputy Sheriff, with the following history; Supposed cause of attack is masturbation; form "chronic"; no accompanying bodily disorder; first symptoms manifested 2 years ago; began writing to all patent-medicine firms for medicines - this the first attack, so far as known. Insanity is now manifested by his being afraid that someone is about to injure him and locks himself in his room. Has shown no disposition to injure others. Is not suicidal. Not disposed to filthy or destructive habits. Has not been restrained or confined.

Oct 6/92 On admission; is very pale and thin; complains of pain in his chest, and lay down on the bed soon after reaching the ward. Claims that he cannot lie on his left side, as it smothers him. Was put up on the "Sick ward" and allowed to remain in bed. At 10.30 am. Pulse was 108. R. 18. Te. 98.6. Oct 7/92. Was somewhat restless
" 9 last night, sleeping but 4 hours. Oct 9/92. Complains of constipation and of pain in the pit of his stomach.
" 11 Oct 11/92. Has remained in bed until today; he is now up, but does not remain up long, lying down again.
" 15 Oct 15/92. For several nights after admission, was quite restless, sleeping as little as 1 hour in one night, and several times, only 3 a. m. or 4 hour; has lately been resting and sleeping better. Since the 11th inst. has been up, part of each day; but frequently lies down; and, when sitting, seems to do so with some difficulty. Temperature, taken night and morning, has shown no marked daily range, and very slight Elevation above normal; respiration has been normal; Pulse, even when lying in bed, has been somewhat accelerated, and, when up, runs up to over 100, at times. Bowels have a tendency to Constipation. Appetite is quite good, and food is taken regularly.

Nov 1/92 Nov 2/92. Wt. (in undershirt only) 117½ pounds. Pulse 78. Nov 12/92. Has kept his bed almost continuously
" 16 since the last note, but was, today, got up, rather against his will.
Nov 16/92. Patient has never been noisy, by night, appearing to rest and sleep well. While keeping his bed, lay very quietly, neatly covered up, clean and tidy, saying very little, unless approached and addressed, and not talking freely then; speaking in rather a feeble, indistinct and unanimated way. Complained often of feeling ill in various places, more especially in his abdomen, in the epigastric region, and complained of the noise hurting his head, holding his fingers in his ears much. Gave expression to no definite delusions, and no hallucinations or illusions detected. Seems simply depressed and affected with hypochondriacal ideas. Has a tendency to Constipation, and, on a very few occasions, vomited some. Spits a good deal. Is very pale and sallow and thin. Has, at one time, had a rise of temperature, when temperature has been taken. Pulse is almost always accelerated, more markedly when he is up. Has been up daily since the 12th inst & seems a little brighter.

Dec 1/92 Dec 5/92. Wt 130 lbs. Pulse 84. Dec 14/92. Rests & sleeps well. Lies up, daily, on the hall. Has gained
" 19 in strength, in cheerfulness, in freedom from complaints of ill-feeling. Had a spell of sickness from 3rd to 7th inst which seemed to be only a severe cold; patient not remaining in bed long.
1893 Dec 19/92. Wt 135 lbs. Dec 26/92. Wt 138 lbs.
Jan 3/93 Jan 3/93. Wt 138½ lbs. Pulse 98. Jan 10/93. Wt 142½ lbs.
" 13 Jan 13/93. Uniformly quiet, resting & sleeping well, at night. Is now up & dressed all day, rarely
" 16 lying down. Complains less frequently of feeling ill. Is gaining. Jan 16/93. Has eruption on scrotum
" 22 Salve applied. Jan 22/93. Salve renewed today.

Personal and Medical History of *Martin R. Grattum*

1893

Feby 1/93 Feby 13/93. Has taken a great deal of exercise in the hall, walking back and forth, and has gained in strength, in appetite, and in cheerfulness. Has had no return of the eruption on the scrotum. Has had no return of the feeling of sickness. Has had no return of the feeling of ill-health. Has had no return of the feeling of weakness. Has had no return of the feeling of nervousness. Has had no return of the feeling of depression. Has had no return of the feeling of anxiety. Has had no return of the feeling of fear. Has had no return of the feeling of dread. Has had no return of the feeling of horror. Has had no return of the feeling of despair. Has had no return of the feeling of suicidal tendency. Has had no return of the feeling of homicidal tendency. Has had no return of the feeling of delusions. Has had no return of the feeling of hallucinations. Has had no return of the feeling of illusions. Has had no return of the feeling of insanity. Has had no return of the feeling of mental disease. Has had no return of the feeling of mental disorder. Has had no return of the feeling of mental derangement. Has had no return of the feeling of mental aberration. Has had no return of the feeling of mental alienation. Has had no return of the feeling of mental unsoundness. Has had no return of the feeling of mental weakness. Has had no return of the feeling of mental imbecility. Has had no return of the feeling of mental idiocy. Has had no return of the feeling of mental dementia. Has had no return of the feeling of mental amentia. Has had no return of the feeling of mental confusion. Has had no return of the feeling of mental excitement. Has had no return of the feeling of mental depression. Has had no return of the feeling of mental anxiety. Has had no return of the feeling of mental fear. Has had no return of the feeling of mental dread. Has had no return of the feeling of mental horror. Has had no return of the feeling of mental despair. Has had no return of the feeling of mental suicidal tendency. Has had no return of the feeling of mental homicidal tendency. Has had no return of the feeling of mental delusions. Has had no return of the feeling of mental hallucinations. Has had no return of the feeling of mental illusions. Has had no return of the feeling of mental

1894

This patient was brought [illegible]
Supposed cause of attack is [illegible]
first symptoms manifest[illegible]
medicines - This the first att[illegible]
afraid that some one is about [illegible]
no disposition to injure other[illegible] ... ...

...nal and Medical History of *Martin R. Grattum*

...formly quiet, resting and sleeping well at night. D... ...s con-

...upon the "Sick Mans"

...s. Oct 7/92. Was somewhat restless ...ints of constipation and of pain in the pit of his stomach.

...roday; he is now up, but does not remain up long, lying down again.

...nights after admission, was quite restless, sleeping as little as 1 hour a night, ...several times, only 3 4 or 5 hour; has lately been resting and sleeping better. Since the 11th inst, has been up, part of each day; but frequently lies down; and, when sitting, seems to do so with some difficulty. Temperature, taken night and morning, has shown no marked daily range, and very slight Elevation above normal; respiration has been normal; Pulse, even when lying in bed, has been somewhat accelerated, and, when up, runs up to over 100, at times. Bowels have a tendency to Constipation. Appetite is quite good, and food is taken regularly.

Nov 2/92. Wt. (in undershirt only) 117½ pounds. Pulse 76. Nov 12/92. Has kept his bed almost continuously since the last note, but was, today, got up, rather against his will.

" 16 Nov 16/92. Patient has never been noisy, by night, appearing to rest and sleep well. While keeping his bed, lay very quietly, neatly covered up, clean and tidy, saying very little, unless approached and addressed, and not talking freely then; speaking in rather a feeble, indistinct and unanimated way. Complained often of feeling ill in various places, more especially in the abdomen, in the epigastric region, and complained of the noise hurting his head, holding his fingers in his ears much. Gave expression to no definite delusions, and no hallucinations or illusions detected. Seems simply depressed and affected with hypochondriacal ideas. Has a tendency to Constipation, and, on a very few occasions, vomited some. Spits a good deal. Is very pale and sallow and thin. Has, at one time, had a rise of temperature, when temperature has been taken. Pulse is almost always accelerated more markedly when he is up. Has been up daily since the 12th inst & seems a little brighter.

Dec 1/92 Dec 5/92. Wt 130 lbs. Pulse 84. Dec 14/92. Rests & sleeps well. Dresses daily, in the hall. Has gained in strength, in cheerfulness, is free from complaints of ill-feeling. Had a spell of sickness from 3° to 4° last which seemed to be only a severe cold; patient not remaining in bed long.

" 19 Dec 19/92. Wt 135 lbs. Dec 26/92. Wt 138 lbs.

1893 Jan 3/93 Jan 3/93. Wt 138½ lbs. Pulse 98. Jan 10/93. Wt 142½ lbs.

" 13 Jan 13/93. Uniformly quiet, resting & sleeping well, at night. Is now up & dressed all day, early

" 16 lying down. Complains less frequently of feeling ill. Is gaining. Jan 16/93. Has intertrigo on scrotum

" 22 Salve applied. Jan 22/93. Salve renewed today.

DETAILED HISTORY OF SICKNESS OF MR. *M. R. Grattum*
DIAGNOSIS.

1894 C. 2. E.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
July 5		5		108				101.6	2.25 P.M. Cyrus ward from B.t was given a hot bath and put to bed. Ate light supper.
6	7	5	112	90	20		100	101.8	Ate light breakfast and supper. Ate good dinner. 7.30 A.M. Complains of pain in stomach.
7	7	5	104	90	20		100.2	102.6	Slept quietly nearly all night. Appetite good.
8	7	5	100	100					"
9	7	5	104	90				100.2	"
10	7	5	106	102	4			100.2	
11	7	5	106	92					Appetite fair 2.30 P.M. Given dose of bowels.
12	7	5	106	92					" 8 A.M. Bath.
13	7	5	108	88					"
14	7	5	104	90					" Good
15	7	5	100	96					Ate good breakfast and dinner and light supper. 10 A.M. Dressed and got ward. 12.30 P.M. Complains of bowels and was put back to bed again.
16	7	5	104	84					Night. Went about 1 P.M.
17	7	5	116	96	24	20	100	99.2	7.30 A.M. Medicine 5.30 P.M. Complains of pain in Bowels. Had passage. Appetite fair. Complains of pain in stomach.
18	7	5	104	90	24	18	99.4	98.8	Bath
19	7	5	100	88		18		100.2	
20	7	5	100	92					
21	7	5	96	96					12.40 P.M. Complains of bowels. Given dose of Salts.
22	7	5	84	100					
23	7	5	96	112					3 P.M. Shoulder Chair
24	7	5	100	84					Night. Bowels moved
25	7	5	96	80					7.30 A.M. Bath

(...ase to Nurse's work a - page 194)

…nal and Medical History of *Martin R. Grattum*

…ifomly quiet, resting and sleeping well at night. …es con-

…per the "Sick Ward"

…N 7/92. Was somewhat restless … of constipation and of pain in the pit of his stomach. …oday; he is now up, but does not remain up long, lying down again. …nights after admission, was quite restless, sleeping as little as 1 hour in one night, …eral times, only 3. 4. or 5 hours; has lately been resting and sleeping better. Since the 11th inst. has been up, part of each day; but frequently lies down; and, when sitting, seems to do so with some difficulty. Temperature, taken night and morning, has shown no marked daily range, and very slight Elevation above normal; respiration has been normal; Pulse, even when lying in bed, has been somewhat accelerated, and, when up, runs up to over 100, at times. Bowels have a tendency to Constipation. Appetite is quite good, and food is taken regularly.

Nov 7/92 Nov 7/92. Wt. (in undershirt only) 117½ pounds. Pulse 76. Nov 12/92. Has kept his bed almost continuously
" 12 since the last note, but was, today, got up, rather against his will.
" 16 Nov 16/92. Patient has never been noisy, by night, appearing to rest and sleep well. While keeping his bed, lay very quietly, neatly covered up, clean and tidy, saying very little, unless approached and addressed, and not talking freely then; speaking in a rather a feeble, indistinct and unanimated way. Complained often of feeling ill in various places, more especially in his abdomen, in the epigastric region, and complained of the noise hurting his head, holding his fingers in his ears much. Gave expression to no definite delusions, and no hallucinations or illusions detected. Seems simply depressed and affected with hypochondriacal ideas. Has a tendency to constipation, and, on a very few occasions, vomited some. Spits a good deal. Is very pale and sallow and thin. Has, at one time, had a rise of temperature, when temperature has been taken. Pulse is almost always accelerated, more markedly when he is up. Has been up daily since the 12th inst & seems a little brighter.

Dec 5/92 Dec 5/92. Wt 134 pds. Pulse 84. Dec 11/92. Rests & sleeps well. Dresses, daily, in the hall. Has gained
" 11 in strength, in cheerfulness, in freedom from complaints of ill-feeling. Had an upset of sickness
" 12 from 3° to 7th inst which seemed to be only a severe cold; patient not remaining in bed long.
" 19 Dec 19/92. Wt 135 pds. Dec 26/92. Wt 138 pds.
1893 Jan 3/93 Jan 3/93. Wt 138½ pds. Pulse 98. Jan 10/93. Wt 142½ pds.
" 13 Jan 13/93. Uniformly quiet, resting & sleeping well, at night. Is now up & dressed all day, rarely
" 16 lying down. Complains less frequently of feeling ill. Is gaining. Jan 16/93. Has intertrigo on scrotum
" 22 Salve applied. Jan 22/93. Salve renewed to-day.

DETAILED HISTORY OF SICKNESS OF MR. *Martin R Grattum*
DIAGNOSIS .

DATE:	HOUR	PULSE: AM	PULSE: PM	RESP.: AM	RESP.: PM	TEMP.: AM	TEMP.: PM	OTHER DATA
6th								On admission put in bed confirm of pain in left Chest on and lay on left side Slightly Annoyed him
			6		86		201	986
7th		6		88		121		984
			6		86		221	988
8		6		88		121		986
			6		80		15	992
9		6		92		14		988
			6		80		18	988
10		6		88		125		986
		6		84		18		986
11		6		80		15		988
		6		86		18		986
12		6		90		12		98
		6		86		20		986
13		6		92		120		98
		6		104		18		—
14		6		108		121		986
		6		94		20		—
15		6		92		120		—
		6		94		20		—
16		6		98		19		—
		6		82		20		—
17		6		82		21		—
18		6		86		19		—
		6		92		21		—
19		6		88		120		986
		6		96		22		—
20		6		86		121		—
		6		84		22		—
21		6		88		120		—
		6		78		21		—
22		6		78		121		—
23		6		96		120		—
		6		80		22		—
24		6		82		18		—
		6		82		21		—
25		6		80		120		—
		6		78		15		—
26		6		82		120		—
		6		78		20		—
27		6		80		121		—
		6		72		120		—
28		6		80		122		—
29		6		88		120		—
		8		76		21		—
30		6		86		122		—
		6		80		18		—
31		6		74		120		986
		6		76		18		—
Nov 1st		6		92		118		—
		6		82		18		—
		2	6	—	30	—	19	988

Bowels still loose left well
bowels not on since appetite any good.
Bowels moved 4 Pm appetite not so good
" " 7 am
has ~~pneumonia~~ pain of washing
eats well.
Condition Same

(… to transfer Work a - Page 134)

...onal and Medical History of Martin R. Grattum

...ne sick man
...1/92. Was somewhat restless
...ms of constipation and of pain in the pit of his stomach.
...today; he is now up, but does not remain up long, lying down again.
...ne nights after admission, was quite restless, sleeping as little as 1 hour at one night,
and several times, only 3 & 4 hours; has lately been resting and sleeping better. Since the 11th inst,
has been up, part of each day, but frequently lies down; and, when sitting, seems to do so with
some difficulty. Temperature, taken night and morning, has shown no marked daily range, and
very slight Elevation above normal; respiration has been normal; Pulse, even when lying in bed, has
been somewhat accelerated, and, when up, runs up to over 100, at times. Bowels have a tendency to
Constipation. Appetite is quite good, and food is taken regularly.

Nov 7/92 Nov 7/92. Wt. (in undershirt only) 117½ pounds. Pulse 76. Nov 12/92. Has kept his bed almost continuously
since the last note, but was, today, got up, rather against his will.
" 16 Nov 16/92. Patient has never been noisy, by night, appearing to rest and sleep well. While keeping
his bed, lay very quietly, neatly covered up, clean and tidy, saying very little, unless ap-
proached and addressed, and not talking fully then; speaking in rather a feeble, indistinct and
unanimated way. Complained often of feeling ill in various places, more especially in the
abdomen, in the epigastric region, and complained of the noise hurting his head, holding
his fingers in his ears much. Gave expression to no definite delusions, and no halluci-
nations or illusions detected. Seems simply depressed and affected with hypochondriacal
ideas. Has a tendency to constipation, and, on a very few occasions, vomited some. Spits
a good deal. Is very pale and sallow and thin. Has, at one time, had a rise of temperature,
when temperature has been taken. Pulse is almost always accelerated, more markedly
when he is up. Has been up daily since the 12th last & seems a little brighter.

Dec 5/92 Dec 5/92. Wt 113 pds. Pulse 84. Dec 14/92. Rests & sleeps well. Sups, daily, on the hall. Has gained
in strength, in cheerfulness, in freedom from complaints of ill-feeling. Had a spell of sickness
from 3° to 7th inst which seemed to be only a severe cold; patient not remaining in bed long.
" 19 Dec 19/92. Wt 135 pds. Dec 26/92. Wt 138 pds.
1893 Jan 3 Jan 3/93. Wt 138½ pds. Pulse 98. Jan 10/93. Wt 142½ pds.
" 13 Jan 13/93. Uniformly quiet, resting & sleeping well, at night. Is now up & dressed all day, rarely
" 16 lying down. Complains less frequently of feeling ill. Is gaining. Jan 16/93. Has intertrigo on scrotum
" 22 & labia applied. Jan 22/93. Salve renewed today.

...iformly quiet, resting and sleeping well at night. Does con-

...ment

DETAILED HISTORY OF SICKNESS OF MR. Grattum
DIAGNOSIS.

DATE	HOUR	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
Nov 1st	6	150	92	19	18			finds fault frequently
2	6	150		19	18			Gets Well. Bowels moved 2 Pm
3	6	186		19				Appetite very good.
4	6	188		82	19			
5	6	186		120	18			Bowels not moved
6	6	184		82	20			Bowels moved during night.
7	5	176		120	18			
8	5	150		76	18			
9	5	184		150	18			Condition some
10	5	182		120	15			Bowels moved slightly 4 Pm
11	5	180		84	17			
12	5	188		78	18			
13	5	172		150	18			was up part of day complained towards
14	5	171		100	18			up 5 am
15	5	188		102				
16	5	186		98				
17	5	188		98				
18	5	186		98				
19	5	188		98				Is constipated
20	5	188		98				
21	5	188		98				
22	5	188		98				
23	5	188		98				
24	5	188		98				
25	5	188		98				
26	5	188		98				
27	5	188		98				
28	5	188		98				
29	5	188		98				
30	5	188		98				
Dec 1	5	188		98				
2	5	188		98				
3	5	188		98				Is up - was given permission to do this yesterday
4	5	188		98				
5	5	188		98				
6	5	188		98				
7	5	188		98				
8	5	188		98				
9	5	188		98				
10	5	188		98				
11	5	188		98				
12	5	188		98				
13	5	188		98				
14	5	188		98				

(... transferred to a - page 134)

DETAILED HISTORY OF SYMPTOMS OF Mr. M R Gratrum
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA.
189									
Dec 15	I	I	96	80	I		I		
" 16	I	I	80	88	I		I		
" 17	I	I	88	96	I		I		
" 18	I	I	100	102	I		I		
" 19	I	I	102	80	I		I		
" 20	I	I	98	86	I		I		
" 21	I	I	92	92	I		I		
" 22	I	I	90	86	I		I		
" 23	I	I	92	94	I		I		
" 24	I	I	102	96	I		I		
" 25	I	I	88		I		I		
" 26	I	I			I		I		
" 27	I	I			I		I		
" 28	I	I			I		I		
" 29	I	I			I		I		
" 30	I	I			I		I		
" 31	I	I			I		I		
Jan 1	I	I			I		I		
" 2	I	I			I		I		
" 3	I	I			I		I		
" 4	I	I			I		I		
" 5	I	I			I		I		
" 6	I	I			I		I		
" 7	I	I			I		I		
" 8	I	I			I		I		
" 9	I	I			I		I		
" 10	I	I			I		I		
" 11	I	I			I		I		
" 12	I	I			I		I		
" 13	I	I			I		I		
" 14	I	I			I		I		
" 15	I	I			I		I		
" 16	I	I			I		I		
" 17	I	I			I		I		
" 18	I	I			I		I		
" 19	I	I			I		I		
" 20	I	I			I		I		
" 21	I	I			I		I		
" 22	I	I			I		I		
" 23	I	I			I		I		
" 24	I	I			I		I		
" 25	I	I			I		I		
" 26	I	I			I		I		
" 27	I	I			I		I		
" 28	I	I			I		I		
" 29	I	I			I		I		
" 30	I	I			I		I		
" 31	I	I			I		I		

(carried to Transfer Book a - page 134)

upon the "Sick Ward"

98.6. Oct 7/92. Was somewhat restless
symptoms of constipation and of pain in the pit of his stomach.
was quiet today; he is now up, but does not remain up long, lying down again.
several nights after admission, was quite restless, sleeping as little as 1 hour in one night,
and, several times, only 3 4 or 5 hours; has lately been resting and sleeping better. Since the 11th inst,
has been up, part of each day; but frequently lies down, and, when sitting, seems to do so with
some difficulty. Temperature, taken night and morning, has shown no marked daily range, and
very slight Elevation above normal; respiration has been normal; Pulse, even when lying in bed, has
been somewhat accelerated, and, when up, runs up to over 100, at times. Bowels have a tendency to
Constipation. Appetite is quite good, and food is taken regularly.

Nov 7/92. Wt. (in undershirt only) 117½ pounds. Pulse 76. Nov 12/92. Has kept his bed almost continuously
since the last note, but was, today, got up, rather against his will.

" 16 Nov 16/92. Patient has never been noisy, by night, appearing to rest and sleep well. While keeping
his bed, lay very quietly, neatly covered up, clean and tidy, saying very little, unless ap-
proached and addressed, and not talking freely then; speaking in a rather a feeble, indistinct and
unanimated way. Complained often of feeling ill in various places, more especially in his
abdomen, in the epigastric region, and complained of the noise hurting his head, holding
his fingers in his ears much. Gave expression to no definite delusions, and no hallucin-
nations or illusions detected. Seems simply depressed and affected with hypochondriacal
ideas. Has a tendency to constipation, and, on a very few occasions, vomited some. Spits
a good deal. Is very pale and sallow and thin. Has, at one time, had a rise of temperature,
when temperature has been taken. Pulse is almost always accelerated, more markedly
when he is up. Has been up daily since the 12th inst seems a little brighter.

Dec 5/92. Wt 134 pds. Pulse 84. Dec 14/92. Rests & sleeps well. Comes, daily, on the hall. Has gained
in strength, in cheerfulness, & in freedom from complaints of ill feeling. Had a spell of sickness
from 3° to 7th inst which seemed to be only a severe cold; patient not remaining in bed long.

" 19 Dec 19/92. Wt 135 pds. Dec 26/92. Wt 138 pds.

Jan 3/93 Jan 3/93. Wt 138½ pds. Pulse 98. Jan 10/93. Wt 141½ pds.

" 13 Jan 13/93. Uniformly quiet, resting & sleeping well, at night. Is now up & dressed all day, rarely
" 16 lying down. Complains less frequently of feeling ill. Is gaining. Jan 16/93. Has intertrigo on scrotum
" 22 Salve applied. Jan 22/93. Salve renewed today.

1893

Oct 6/93 Admitted to Ward "C" from Reception Hospital. Has been under observation there for some days. Is suffering from Chronic Alcoholism. Has been drinking heavily for some years. Has had delirium tremens on several occasions. Is now suffering from a mild attack. Has been under the influence of liquor for some days. Is very nervous and shaky. Has a tremor of the hands. Is very restless. Has been taking Bromide of Potash and Chloral. Has had no sleep for several nights. Is very much run down in health. Has a poor appetite. Bowels regular. Tongue coated. Pulse 120. Temperature 99.

" 7 Has had a restless night. Has been taking Bromide of Potash and Chloral. Is very nervous and shaky. Has a tremor of the hands. Is very much run down in health. Has a poor appetite. Bowels regular. Tongue coated. Pulse 120. Temperature 99.

" 9 Has had a restless night. Has been taking Bromide of Potash and Chloral. Is very nervous and shaky. Has a tremor of the hands. Is very much run down in health. Has a poor appetite. Bowels regular. Tongue coated. Pulse 120. Temperature 99.

" 11 Has had a restless night. Has been taking Bromide of Potash and Chloral. Is very nervous and shaky. Has a tremor of the hands. Is very much run down in health. Has a poor appetite. Bowels regular. Tongue coated. Pulse 120. Temperature 99.

" 15 Has had a restless night. Has been taking Bromide of Potash and Chloral. Is very nervous and shaky. Has a tremor of the hands. Is very much run down in health. Has a poor appetite. Bowels regular. Tongue coated. Pulse 120. Temperature 99.

Nov 25/93 Has had a restless night. Has been taking Bromide of Potash and Chloral. Is very nervous and shaky. Has a tremor of the hands. Is very much run down in health. Has a poor appetite. Bowels regular. Tongue coated. Pulse 120. Temperature 99.

" 16 Has had a restless night. Has been taking Bromide of Potash and Chloral. Is very nervous and shaky. Has a tremor of the hands. Is very much run down in health. Has a poor appetite. Bowels regular. Tongue coated. Pulse 120. Temperature 99.

Dec 5/93 Has had a restless night. Has been taking Bromide of Potash and Chloral. Is very nervous and shaky. Has a tremor of the hands. Is very much run down in health. Has a poor appetite. Bowels regular. Tongue coated. Pulse 120. Temperature 99.

" 19 Has had a restless night. Has been taking Bromide of Potash and Chloral. Is very nervous and shaky. Has a tremor of the hands. Is very much run down in health. Has a poor appetite. Bowels regular. Tongue coated. Pulse 120. Temperature 99.

1893/94 Jan 3/94 Has had a restless night. Has been taking Bromide of Potash and Chloral. Is very nervous and shaky. Has a tremor of the hands. Is very much run down in health. Has a poor appetite. Bowels regular. Tongue coated. Pulse 120. Temperature 99.

" 13 Has had a restless night. Has been taking Bromide of Potash and Chloral. Is very nervous and shaky. Has a tremor of the hands. Is very much run down in health. Has a poor appetite. Bowels regular. Tongue coated. Pulse 120. Temperature 99.

" 16 Lying down. Complains less frequently of feeling ill. Is yawning. Jan 16/94. Has interrings on scrotum

" 22 Salve applied. Jan 22/94. Salve renewed to-day.

1893

Feby 2 Feby 3/93. Uniformly quiet, resting and sleeping well at night. By day is up & around. Does consideable work in dining room & also on the ward. Continues to gain some.

Mar 1/94 Mar 1/93 Was today transferred to B'. — Mar 31/93. Appears to sleep well at night. Is gained apparently in physical health. Is rather more cheerful, but still complains of ill feeling. Gets around & does no work. Disliked being changed to B'.

Apl 1/93 Apl 1/93. Says he does not sleep well, but thinks he sleeps about 6 hours. Apl 15/93. Depressed & complaining; inclined to avoid others & conversation. Has occasionally played games, billiards.

May 18 May 18/93. No special change to note. Apparently rests & sleeps well at night. Moves about a little more freely. Keeps a good deal by himself. Less frequently complains now. — May 31/93. Seems more contented now on this ward. Quiet & well-behaved. Does no work. Occasionally plays billiards. Goes at walking. Appetite not very good. Bowels regular.

June 30 June 30/93. Does not change much. Appears, however, somewhat more active. Appetite poor. Goes out walking with the rest but does not walk to. Keeps by himself most of the time.

July 13/31 July 13/93. Has grown more active, gradually. Transfered to A' today. July 31/93. Apparently rests & sleeps well, at night. Appetite has improved. Bowels are normal. Complains, at times, of a "weak-feeling". Is feeling better than when he came to this hall. Plays pool, seemingly interested in this game. —

Has today moved over to the Annex, as these "A" wards are about to be used for female patients owing to the "A" westwards being under reconstruction.

Aug 10/31 Aug 10/93. Lies along quietly & seemingly contentedly: indolent & inactive. Aug 31/93. No change.

Sept Sept 1/93. A quiet, harmless patient. Does no work. Says "he is sick" but seems to eat & sleep well.

Oct 31 Oct 31/93. Former note still good. Nov. 22/93. Quiet & inoffensive. Does no work. Weak & in poor health. Walks about

Nov 22 walking one day & had to be brought back on account of weakness & fatigue, before we had gone far. Dec 20/93. No change. Jany 31/94. Had

Dec 27/1894 Jany 31/94 sore eyes for several weeks, they are improving now. In other respects, patient's condition remains about the same.

Feb 28 Feb 28/94. Quiet and harmless. Sits in the one place most of the time, and seldom speaks, unless spoken to. He says that he is sick". Does not go out walking on account of weakness. Has been troubled with sore eyes for some time. Does no work.

Mar 31 March 31/94. Eyes are much better. Otherwise there is no change to note in patient's condition, at this date.

Apl 30 April 30/94. Was successfully vaccinated on April 2nd. Patient's condition about the same for past few months.

May 1/31 May 31/94. No Special Change to note. May 31/94. Quiet and well-behaved: always complaining of not feeling well. Has, however, quite a fair appetite and sleeps quite well. Sits in one place most of the time & seldom speaks unless spoken to. Does no work.

June 25/30 June 25/94. Of late has been very weak; appetite poor: has been put to bed. June 30/94. Still in bed; appetite very poor;

July 5/ to be given extra diet. July 4/94. Complains of pains in stomach & constipation. July 5/94. Expectorates a good deal;

" 15 has a slight cough. Transferred to C'. Was put to bed there. July 15/94. Has been steadily confined to his bed. He has been resting & sleeping well: appetite much improved; bowels still constipated at times. 10 Am. Is dressed;

" 16 up & out in the hall. 12m. Complains of pain in bowels: put back to bed again. July 16/94. Vomited about 1 pint,

" 22 last night. July 22/94. Has been kept in bed, till today; has complained of bowels which have been very costive.

" 23/31 July 23/94. 3 Pm. Up, in roller chair. July 31/94. Has slept about 6½ hours nightly. Has been up & down from his bed; some days in roller-chair for a while. Is up now & on the hall: appears strong, but still complains of feeling weak. Appetite good. Bowels irregular. Mental condition about the same. Habits cleanly—

(carried to Transfer Book in page 134)

Personal and Medical History of Charles Nelson

Whole No. 3152

Residence, St Paul Minn

Date Admission, 15th October 1892.

Admitted by, Dr Phelps Hour, 7 P.M.

How Sent, John. B. Oliver, Sheff, Ramsey County

Sex, Male

Age, 41

Civil Condition, Married

Children, Two

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Episcopalian; Church member

Habits, Temperate

Nativity, England

Physicians Committing, A. McLaren and C. L. Greene

Correspondents, James Nelson

(address of Mother) St Paul, Minn 27 Holland Ave

No. for Year, 64

Insane Relatives, None ; (Insanity not hereditary)

Cause Exciting, Overwork & Exhaustion

Cause Predisposing, Probably religion

Form, Mania-acute

Accompanying Bodily Disorder, None

Suicidal or Not, not

Date of this Attack, Oct 13/92.

Duration, about 2 days

No. of Attack, 1st

No. of Admissions,

Age First Attack, 41.

Time of Leaving, May 6" '93

Time in Hospital, 6 mo. 21 d.

Result, Impd.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by D. Baker 10/25/92

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, very active

MEMORY:

Past Events, Seems Good

Recent Events, " "

Special Subjects, Probably Confused for times

PERCEPTIVITY:

Alert or Dull, ordinary observation fairly good; answers questions promptly; fairly coherent; does

Correct or Illusive, not realize own condition

REASONING POWER: Perverted

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Is temperate;

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes

Depressed,

DELUSIONS:

Systematized or Not, Numerous; unsystematized

Special Subjects,

Transitory or Not,

HALLUCINATIONS: No

ILLUSIONS: "

CONVERSATION:

Coherent or Incoherent, Incoherent; Coherent for times

Voluble or Reticent, very voluble

Personal and Medical History of Charles Nelson

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 in WEIGHT, 136½ pds. NUTRITION, below par

WOUNDS OR ABNORMALITIES, Cut on rt. wrist; rt. index finger operated on; abnormalities?

TONGUE, Tremors, Slight Coatings, slight Promptness Movement, prompt

PUPILS, Equality, Equal Size, slightly dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, finger to nose, eyes shut, fair.

Legs, Standing on foot, good; Standing, Eyes shut; sways some;

TREMORS, Hands, almost none Tongue, slight.

Facial Muscles, General,

REFLEXES, Patellar, Equal; Exaggerated (8-9)

Other Reflexes,

ARTICULATION, Hesitating, slightly Slurred, No

FACIAL EXPRESSION, fairly expressive

SENSIBILITY,

HEART, Seems Good

LUNGS, Seem good

Dr Mc Nap 92 — EXAM. URINE, Color, Cloudy yellow; reaction acid; Sp. gr. 1030; albumen none; urea .5%.

12/3/92 Dr. 13 — urine. micros. Triples phosphate crystals. much amorph. globules dark + some crystals - dark not diagnos.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, about	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, had previous attack, in Gov. Hospital, St Elizabeth, near Washington, D.C. } ONSET GRADUAL OR SUDDEN, sudden.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother dead; old age.

Father or Pat. Relations, Father dead; killed in war;

Brothers or Sisters, 3 brothers living; healthy; 1 sister living; 1 died, consumption.

1892 This man was brought here by Mr Courteau, deputy Sheriff, and brother, with the following history. Habits temperate; supposed cause of attack is overwork & exhaustion; form acute; no accompanying bodily disorder; first Symptoms manifested Oct 13/92: this is 1st attack. Insanity now manifested by acute maniacal delirium; religion prominent; has been violent. Not suicidal, nor disposed to filthy & destructive habits; no peculiarities of previous to symptoms known; has been restrained, but only during this attack, by wristlets & anklets.

Oct 15 On admission put upon Ct in a single room. Given hypnotic.

" 16 Oct 16/92. Unable to sleep after receiving the medicine, sleeping 2 hours, last night. Was noisy, extremely so, at times, the balance of the night; up & around his room. Am. Pulse 100. Tongue coated; bowels moved; ate well; is talking almost incessantly; and incoherently, but gives heed to questions. Pm. Pulse 108. Oct 17/92. Was extremely noisy nearly all last night, sleeping but 1 hour. Am. Pulse 98. Pm. Pulse 102. Is excited and noisy; shut in his room.

" 18 Not destructive, nor does he denude himself. Fairly clean. Takes food well. Oct 18/92. Extremely noisy for about 3 hours, last night, sleeping 6 hours. Am. Pulse 80. Is out in the hall today, and some quieter. Talks almost incessantly & incoherently, showing delusions. Does not talk very loudly or noisily. Says, among other things "I just took that man's visage & rubbed it out again", at the same time rubbing his hand over his face. Pm

" 19 Pulse 80. Oct 19/92. Was noisy the greater part of last night, sleeping but little. Am. Pulse 76.

" 20 Pm. Pulse 72. Oct 20/92. Has been quite noisy for a couple of hours, sleeping 6 hours last

" 21 night. Am. Pulse 82. Pm. Pulse 74. Has not been at all pugnacious or ugly. Oct 21/92. Rested

" 22 well, sleeping 8 hours last night. Pulse (Am) 76. Pm. Pulse 74. Oct 22/92. Was quiet

" 23 restful and slept 8 hours last night. Am. Pulse 80. Oct 23/92. Has been uniformly quiet, restful, and has slept well since last note. Has also become much calmer, more rational and better-behaved. Was today moved to B1.

Nov 14 Nov 2/92. Wt 141 lbs. Pulse 84. Has gained some in weight. Nov 14/92. Is troubled with wind

" 17 on his bowels, he says; Probably due to indigestion, from overeating. Nov 17/92. Has remained perfectly quiet at night, apparently resting and sleeping well. Has remained calm, quiet, and well-behaved by day. Is clean and tidy. Has been quite active, working quite well - Talks freely, when addressed, & coherently. Has not expressed delusion for some time. Does not mingle very freely with the others or talk much with them. Has a good appetite, possibly even over-eating & has gained in flesh. Has written his brother & is getting anxious to go home.

Dec 1 Dec 1/92. Told the cook, with whom he was working, that he was getting some queer ideas in his

" 2 head & he sent to the Ward. Dec 2/92. Put on hyoscin. Dec 5/92. Has been maniacal,

" 4 restless, talkative & incoherent, for the past 3 days. Today became troublesome and was moved

" 14 from B1 to C3; Dec 14/92. Quite quietly quieted down after the 4th dose, becoming unusually

" 17 quiet and silent; apparently somewhat depressed; has improved still further and was

" 21 moved to B1. Dec 17/92. Still shows delusions & some disturbance. Is quiet & works;

" 22 apparently gaining. Dec 22/92. Is in bed. Says he is only tired. Wants to get discharged.

" 23 Dec 23/92. Is up today. —

NAME. Charles Helson

DATE. 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jan 3	145	89	-	
Feb 3	149½	64	4½	
Mar 2	153	72	3½	
April 4th	153	86	-	
May 3?	157	84	4	

93. Has had a spell of maniacal excitement this morning, ts, and manifesting delusions. Has become violent somewhat restless & noisy at night for 2 or 3 nights ew fairly quiet and has slept well. By day, has been s still behaving rather oddly. Has not destructive or Has continued quiet & calm & somewhat more rational & back to B1. Jan 21/93 Has visited by brother today.

Asks to go home. Talks quite well. Describes things feel quite different; his state seems rather unstable, the last noted transfer to B1 has been uniformly ery clean, neat & tidy; conduct & behavior have been good, oddly, at times. Writes his brother occasionally, and is guests on this point. Bodily health good.

mitted to go home. Seems to have some weakness of 93. Is quiet at night & seems to sleep well. Works a spell of excitement. Seems somewhat calmer

27/93 Transferred from B1 to A2.

condition, apparently. Inclined, however, to sit apart depressed. Over-anxious to go home. Recently went not ening mischief, but, later, became more depressed

fused to work. Has been most importunate in his requests ntinued good, and physical health seems quite good. For account (he says) of his being kept here. Sits apart from ewation when that is begun.

Was, today, visited by a brother and allowed to go home with him.

— Discharged —

1892

Sept 18 This man was brought here by Mr Courteau, deputy Sheriff, and brother, with the following history. Habits temperate; supposed c... acute; no accompanying bodily disorder; first ... Insanity now manifested by acute maniacal del... Not suicidal, nor disposed to filthy or destructi... Known; has been restrained, but only during this a...

Oct 15 On admission put upon Ct in a single room.

" 16 Oct 16/92. Went to sleep after receiving the medic... Extremely so, at times, the balance of the nigh... Coated; bowels moved; ate well; is talking a... gives heed to questions. PM. Pulse 108. Oct 17 ... sleeping but 1 hour. AM. Pulse 98. PM. Pulse ...

" 18 Not destructive, nor does he denude himself. ... tremely noisy for about 3 hours, last night, ... had today, and some quieter. Talks almost n... Does not talk very loudly or noisily. Says, ... visage & rubbed it out again", at the same ti...

" 19 Pulse 80. Oct 19/92. Was noisy the greater part o...

" 20 PM. Pulse 72. Oct 20/92. Was quite noisy ... night. AM. Pulse 82. PM. Pulse 76. Has not ...

" 21 well, sleeping 8 hours last night. Pulse (AM...

" 24 restful and slept 8 hours last night. AM. P... quiet, restful, and has slept well since last ... more rational and better-behaved. Was today mo...

Nov 14 Nov 2/92. Wt 144 lbs. Pulse 84. Has gained so...

" 17 in his bowels, he says; Probably due to indigestion, ... perfectly quiet at night, apparently resting and sleeping well. Has remained calm, quiet, and well-behaved by day. Is clean and tidy. Has been quite active, working quite well - Talks freely, when addressed, & coherently. Has not expressed delusion for some time. Does not mingle very freely with the others or talk much with them. Has a good appetite, possibly even over-eating & has gained in flesh. Has written his brother & is getting anxious to go home.

Dec 1 Dec 1/92. Told the Cook, with whom he was working, that he was getting some queer ideas in his

" 2 head & asked to be sent to the Ward. Dec 2/92. Put on hyoscin. Dec 14/92. Has been maniacal, restless, talkative & incoherent, for the past 3 days. Today, became troublesome and was moved from B1 to C3; Dec 14/92. Quite quietly quieted down after the 4th shot, becoming unusually

" 14 quiet and silent; apparently somewhat depressed; has improved still rather and was

" 17 moved to B1. Dec 17/92. Still shows delusions & some disturbance. Is quiet & works;

" 22 apparently gaining. Dec 22/92. Is in bed. Says he is only tired. Wants to get discharged.

" 23 Dec 23/92. Is up to day. —

1893

Jan 3/10 Jan 3/93. Wt 145 lbs. Pulse 84. Jan 10/93. Has had a spell of maniacal excitement this morning, talking almost incessantly, incoherently, and manifesting delusions. Has become violent

" 18 and was moved to Ct. Jan 18/93. Has somewhat restless & noisy at night for 2 or 3 nights following the last note. Has since been fairly quiet and has slept well. By day, has been quiet and calm for several days, although still behaving rather oddly. Has not destructive or

" 20 violent in his attack. Jan 20/93. Has continued quiet & calm & somewhat more rational &

" 21 and better-behaved. Was today moved back to B1. Jan 21/93 Has visited by brother today.

Feb 3/17 Feb 3/93. Wt 149½ lbs. Pulse 64. Feb 17/93. Asks to go home. Talks quite well. Describes things fairly well. Says, for past 2 weeks, has felt quite different; his state seems rather unstable,

" 18 and uncertain, however. Feb 18/93. Since the last noted transfer to B1 has been uniformly quiet & restful at night. By day, is very clean, neat & tidy; conduct & behavior have been good, though occasionally inclined to act slightly oddly at times. Writes his brother occasionally, and is very anxious to go home, pressing his request at this point. Bodily health good.

Mar 13 Mar 13/93. Has been teasing to be permitted to go home. Seems to have some weakness of

" 25 mind, yet is fairly clear. March 25/93. Is quiet at night & seems to sleep well. Works daily & well on the ward. Has not had a spell of excitement. Seems somewhat calmer

" 27 & firmer in his mental state. Mar 27/93 Transferred from B1 to A2.

April 19 Apl 19/93. Has continued in fairly good condition, as to sanity. Inclined, however, to sit apart from others, to keep silence, & appearing depressed. Over-anxious to go home. Recently went out to work, working willingly for a time, seeming more cheerful, but, later, became more depressed and refused to work.

May 6 May 6/93. Has since persisted in his refusal to work. Has been most importunate in his requests to be allowed to go home. Appetite has continued good, and physical health seems quite good. For some time has appeared much depressed on account (he says) of his being kept here. Sits apart from the others. Is, however, quite free in conversation when that is begun.

Was, today, visited by a brother and allowed to go home with him.

— Discharged —

Personal and Medical History of Con O'Brien



Whole No. 3154

No. for Year, 66

Residence, Minneapolis

s, home (Insanity not hereditary)

Date Admission, 17th October 1892

Syphilis

Admitted by, Dr Phelps Hour, 7 PM

sing, Intemperance possibly

How Sent, Jno. B. Oliver, Jos P. Rams

ensic Paresis

Sex, Male

Bodily Disorder, Yes; tertiary Syphilis of nervous system

Age, 35

t, not

Civil Condition, Single

ttack, gradual failure of mental powers

Children, —

probably for some time

Age Youngest Child, —

1st

Occupation, Barber

sions,

Degree Education,

ttack, 2

Profession Religion, Yes; Catholic

ring, 13th October 1894

Habits, has drunk hard for a number of years; Syphilis 6 yrs ago

Time in Hospital, 1 year. 11 mo. 26 Days

Nativity, Ireland

Result, Died. General Paresis.

Physicians Committing, Arthur Sweeney and O. Martel

Correspondents,

EXAMINATION ON ADMISSION.

Exd by Dr. Baker 25th Oct/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, / Recent Events, / Special Subjects, } Seems very poor

PERCEPTIVITY:

Alert or Dull, Ordinary observation poor; answers

Correct or Illusive, Questions poorly.

REASONING POWER:

Ordinary Subjects, / Own Mental State, / Special Subjects, } Seems poor

GENERAL DESCRIPTIVE REMARKS: Has been a hard-drinker. Muscular acts are awkward & do not seem to be well under control. Has arcus senilis; left cornea slightly hazy. Says "has known the Dr 7 or 8 years"; "knows Mary Harris that that fellow in the White House at Washington. Remembers away back"

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Yes

Exalted, tendency to be; Childish glee.

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, That he has electric currents in his head

Transitory or Not,

HALLUCINATIONS: Denies; Seems probable he has some

ILLUSIONS:

CONVERSATION: Talks as, when started.

Coherent or Incoherent, Incoherent

Voluble or Reticent,

Personal and Medical History of Con O'Brien

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5½ in WEIGHT, 152 pounds NUTRITION, Somewhat below par.

WOUNDS OR ABNORMALITIES, Scar on right side of forehead; some in scalp. Abnormalities? — None detected.

TONGUE, Tremors, Yes Coatings, Almost none Promptness Movement, Fairly prompt; somewhat slow.

PUPILS, Equality, unequal; left the larger. Size, both pupils dilated; left decidedly.

Response Light, do not seem to Accommodation, do not seem to.

SIGHT, Seems impaired; both eyes.

HEARING, Seems impaired somewhat

COORDINATION, Arms, finger to nose, eyes shut, some awkwardness & inaccuracy

Legs, Standing, foot very unsteady; Standing, eyes shut, fairly steady; turning quickly, gait unsteady;

TREMORS, Hands, irregular of, Tongue, Yes

Facial Muscles, Slight tremors in intention. General,

REFLEXES, Patellar, Equal; exaggerated (about 9. Dr Pitts Scale)

Other Reflexes,

ARTICULATION, Hesitating, and - - - - - - - - - - - Slurred, markedly

FACIAL EXPRESSION, Dull

SENSIBILITY,

HEART, No heart murmurs.

LUNGS, Seem good.

Dr M Nov 10/92

EXAM. URINE, Color, light yellow; reaction acid; Sp. gr. 1024. albumen none; urea 1.8%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Fairly	Careless,
BOWELS, Normal, Probably	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	has slept Poorly since coming here.	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow, doubtless. No definite history of Convulsion or vertigo; see history of semi-conscious state.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1892

This man was brought here by Deputy Sheriff Courteau, with the following history. He has drunk hard for a number of years; had syphilis 6 years ago. Supposed cause of this attack is Syphilis; form is acute, exalted; has tertiary syphilis of nervous system; there has been a gradual failure of mental powers; came to City Hospital at St. Paul, Sept. 16th 1892 in a semi-conscious condition. This is first attack. Insanity is now manifested by the idea he has electric currents in his head; by delusions as to his health; and a general deterioration of mental powers. Is not disposed to injure others; not suicidal; is disposed, however, to be filthy; has also had gonorrhoea 3 times. Has not been restrained or confined. Was at City Hospital under specific treatment; no result.

Oct 18 On admission, was put upon B.H. Was somewhat noisy, restless & out of bed last night, sleeping 5 hours
" 19 Am. Pulse 116. Te 99.6. Was put to bed on account of high pulse. Pm. Pulse 100. Te 99. Oct 19/92. Has quite restless last night, getting up at one time; when night nurse attempted to put him back to bed patient became extremely noisy & violent, claiming that he was poisoned. Am. Pqt. Te 99.
" 20 Pm. P108. Oct 20/92. Restless & out of bed some last night, sleeping about 5 hours. Am. Pulse 95
" Pm. P 90. Became excited today & got up & attacked his room-mate, a helpless, sick man.
" 21 Oct 21/92. Somewhat restless & noisy last night, sleeping about 6 hours. Am. P88. Pm. Pulse 100.
" 22/23 Oct 22/92. Restless last night, sleeping 5 hours. Am Pulse 104. Pm. Pulse 96. Oct 23/92. Is usually more or less restless at night. On 2 different nights, sleeping none at all. Usually sleeping 5 to 7 hours. Has kept his bed until today, when, on account of restlessness, he was permitted to get up. Oct 30/92. Has been quite troublesome, at several
" 30 different times; throwing spittoons around, and today being quite violent, biting, kicking &c. Was put in seclusion for a short time. On the nights of the 29th & 29th, slept none. On the 28th slept 7 hours. When awake is restless, and at times, extremely noisy.

Nov 2/92 Nov 2/92. Wt 158 pds. Pulse 88. Nov 14/92. Claims that the head-nurse stopped his bowels.
" 19 Nov 19/92. Usually somewhat restless; at times, much so. Quite often, somewhat noisy; at times; extremely so; sleeping from 2 to 7 or 8 hours, at night. Has been up and around daily since the 29th ulto. Has been fairly clean and tidy. Has been troublesome subject to outbursts of wrath & violence. Talk, when approached, is drawling, indistinct tones; has a blank, sleepy look; moves around considerable, but rather awkwardly and slowly; does not seem to know where he is, nor to care at being kept here. Bodily health is fairly good.

Dec 5/20 Dec 5/92. Wt 152 pds. Pulse 79. Dec 20/92. Is nightly more or less noisy, for from 2 to 10 hours. Lengthy, fighting quite often; has a surly unpleasant face. Does not seem to realize where he is;
1893 never speaks about going away.

Jan 3/10 Jan 3/93. Wt 156½ pds. Pulse 80. Jan 20/93. Is, almost nightly, somewhat noisy & restless. By day, is comparatively quiet, dull and idle. Is demented.

Feb 3/9 Feb 3/93. Wt 150½ pds. Pulse 80. Has lost some in weight, the past month. Feb 9/93. Was struck on the
" 20 head, with a mop-handle, today by a fellow patient, receiving a slight cut. Feb 20/93. Very infrequently now somewhat slightly noisy restless at night; as a rule sleeping well — 7 to 8 hours, each night. By day, continues about the same; silent & dull. Seems contented. Bodily health fair.

March March 21/93. Is noisy for a short time on about ½ of the nights. Rests better & is quieter than formerly.

NAME. Con O'Brien

DATE, 189	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	156½	80	4½	....
Feby 3d	150½	80	....	6
March 3d	149½	96	....	1
April 4th	148½	70	....	1
May 3d	150½	88	2	....
Aug 1st	151	100	½	....
Sept 1st	152	90	1	....
Oct 3d	151	80	....	1

. Demented & uninterested in his surroundings.
other night, sleeping well on the whole. Is about the same in conduct,

ing at night. Otherwise no change in conduct or behavior -
no cough noticed. Habits are very dirty.
around a great deal; rubbing his hands & continually talking

noticed. Habits very dirty. No change in mental condition.
ical or mental condition, since last note -
ps. Pupils are unequal - there is very marked motor impairment.
tation & awkwardness of movement. Reflexes are about 10.
s President Cleveland" - Has recently been transferred to C.H. Ward
cough noticed. Talks most of the time in a mumbling
etic & half-helpless. Fell on the floor today & bruised his eye,
mouth to mouth. Still very paretic.
t 31/93 Appetite good. Habits fair. No cough noticed. -
coherent way. Is quite helpless. Nov 2 93 Wt 149½ P 108.
- good. Habits somewhat dirty. Talks but little, does
without force. Dec 2 93. Wt 150. P 82. Dec 15 93
Will fall on floor by dropping asleep. Dec 19 93
seem to be fading. Hardly able to walk alone.
ward, without help. Jany 1 94 Wt 142 P 98.
te dirty, prefers one place most of the time. Can't walk
the same. Can't talk much & is a complete dement.

[illegible] 141 pds. Pulse 98. Feb 14/94. Went asleep, on a bench, this morning; fell on & the floor, cutting his
" 17 forehead slightly. Feby 17/94. Patient soiled his clothes twice during the day. Had to be given two baths. -
" 28 Feby 28/94. Condition does not change much. He is very stupid & dull, and still full of delusions &c &c.
Mar 1/5 March 1/94. Wt 139 pds. Pulse 88. March 5/94. Re-giving patient a bath, today, one of his legs & foot were
" 19 found badly swollen; at 10.30 Am. was ordered to be put to bed (by Dr Herzog). March 19/94. Is no better today;
" 31 has ordered to be got up, dressed & put on the ward. March 31/94. Has been up daily since last note. No noticeable change.
Apl 2 April 2/94. Wt 129½ pds (a loss of 9½ pds, in the past month); Pulse 100. Patient is failing in bodily strength;
gets knocked about and sometimes hurt by the other patients. Habits have become very dirty, of late.
" 30 April 30/94. Patient is very feeble, and clumsy; fell down while out walking, & got bruised over left Eye.
Seems to be failing very much, of late. Appetite is only fair. Habits are very dirty, now. ——
May 1/2 May 1/94. Wt 129½ pds. Pulse 104. May 2/94. Has a red mark on each hip; look like beginning bed-sores; powder
June 1 applied to same. June 1/94. Wt 123 pds (is rapidly losing in flesh). Pulse &c. Appears slowly but steadily losing
" 30 worse. June 30/94. Becoming very much weaker. Appetite good; bowels regular; habits continue very dirty -
July 1/31 July 1/94. Wt 120 pds (is still losing in flesh). Pulse 92. July 31/94. Patient seems quite rapidly failing.

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1892

This man was br
drunk hard for a
Syphilis; from is ac
failure of mental pow
condition. This is first
in his head; by delusions
disposed to injure others;
3 times. Has not been rec

nsciousness
ectric currents
mental powers. Is not
olic; has also had gonorrhoea
ospital under specific treatment; no result.

Oct 18 On admission, was put upon B
" 19 Am. Pulse 116. Tr 99.6. Was put
quite restless last night, getting
patient became extremely noisy & violent, claiming that he was poisoned. Am. Pulse 99.
" 20 Am. P108. Oct 20/92. Restless & out of bed some, last night, sleeping about 5 hours. Am. Pulse 95
" Pm. P 90. Became excited today & got up & attacked his room-mate, a helpless, sick man.
" 21 Oct 21/92. Somewhat restless & noisy last night, sleeping about 6 hours. Am. P98. Pm. Pulse 100.
" 22/23 Oct 22/92. Restless last night, sleeping 5 hours. Am Pulse 104. Pm. Pulse 96. Oct 23/92. Is usually more or less restless at night. On 2 different nights, sleeping none at all. Usually sleeping 5 to 7 hours. Has kept his bed until today, when, on account of restlessness, he was permitted to get up. Oct 30/92. Has been quite troublesome, at several
" 30 different times; throwing spittoons around, and today being quite violent, biting, kicking &c. Was put in seclusion for a short time. On the nights of the 29th & 29th, slept none. on the 28th slept 7 hours. When awake is restless, and at times, extremely noisy.

Nov 2/94 Nov 2/92. Wt 158 pds. Pulse 88. Nov 14/92. Claims that the head-nurse stopped his bowels.
" 19 Nov 19/92. Usually somewhat restless; at times, much so. Quite often, somewhat noisy; at times; extremely so; sleeping from 2 to 7 or 8 hours, at night. Has been up and around daily since the 29th ulto. Has been fairly clean and tidy. Has been troublesome subject to outbursts of wrath & violence. Talk, when approached, is drawling, indistinct tones; has a blank, sleepy look; moves around considerable, but rather awkwardly and slowly; does not seem to know where he is, nor to care at being kept here. Bodily health is fairly good.

Dec 5/20 Dec 5/92. Wt 152 pds. Pulse 79. Dec 20/92. Is nightly more or less noisy, for from 2 to 10 hours. Is ugly, fighting quite often; has a surly unpleasant face. Does not seem to realize when he is; never speaks about going away.

1893
Jan 3/93 Jan 3/93. Wt 150½ pds. Pulse 80. Jan 20/93. Is, almost nightly, somewhat noisy & restless. By day, is comparatively quiet, dull and idle. Is demented.

Feb 3/93 Feb 3/93. Wt 150½ pds. Pulse 80. Has lost some in weight, the past month. Feb 9/93. Was struck on the
" 20 head, with a mop-handle, today by a fellow patient, receiving a slight cut. Feb 20/93. Very quiet now somewhat slightly noisy restless at night; as a rule sleeping well — 7 to 8 hours, each night. By day, continues about the same; silent & dull. Seems contented. Bodily health fair.

March 2/93 March 2/93. Is noisy for a short time on about ½ of the nights. Rests better & is quieter than formerly.

Does not attempt to carry on Conversation. Demented & uninterested in his surroundings.

Aller 20 April 20/93. Slightly noisy & restless about every other night, sleeping well on the whole. Is about the same in conduct, by day, as formerly.

Mayo 30 May 30/93. Is less frequently restless & noisy at night. Otherwise no change in conduct or behavior — Health about as usual. Appetite is poor; no cough noticed. Habits are very dirty.
" 31 May 31/93. Is on extra diet now. Stands around a great deal; rubbing his hands & continually talking to himself but talk cannot be understood.

June 30 June 30/93. Appetite poor. no cough yet noticed. Habits very dirty. No change in mental condition.

July 31 July 31/93. No change to note in either physical or mental condition, since last note —

Aug 18 Aug 18/93. Examined in office today, by Dr. Phelps. Pupils are unequal — there is very marked motor impairment. Cannot rise from chair without extreme hesitation & awkwardness of movement. Reflexes are about 10. Says he has been here 20 years — His name is "President Cleveland" — Has recently been transfered to C. H. East
" 31 Aug 31/93. Appetite good; bowels regular. No cough noticed. Talks most of the time in a mumbling tone. Habits are very dirty. Is quite paretic & half-helpless. Fell on the floor today & bruised his eye.

Sept 30 Sep 30/93. Does not change much, from month to month. Still very paretic.

Oct 31 Oct 31/93. Health about as usual. Oct 31/93 Appetite good. Habits fair. No cough noticed. — Still talks to himself in a mumbling, incoherent way. Is quite helpless. Nov 2/93 Wt 149½ P 108.

Nov 10/93 Appetite fair Bowels reg. Behaves good Habits somewhat dirty Talks but little, does not seem to have life enough to move without force. Dec 2/93. Wt 150. P 82. Dec 15/93

Dec 15/93 Patient seems to be failing. Very stupid. Will fall on floor by dropping asleep. Dec 19/93
" 19. Was up in Chapel, had his picture taken. Seems to be failing. Hardly able to walk alone.
" 30. Seems somewhat better, moves about ward, without help. Jany 1/94 Wt 142 P 98.

Jany 1/94. Appetite fair Bowels reg. Quite dirty, sits in one place most of the time. Can't walk
" 31 Does not talk any. Jany 31/94 About the same. Can't talk much & is very dirty as ever.

Feb 1/94 Feb 1/94 Wt 141 pds. Pulse 98. Feb 14/94. Went asleep on a bench, this morning; fell on & cut floor, cutting his
" 17 forehead slightly. Feb 17/94. Patient soiled his clothes twice during the day. Had to be given two baths —
" 28 Feby 28/94. Condition does not change much. He is very stupid & dull, and still full of delusions &c &c.

Mar 1/15 March 1/94. Wt 139 pds. Pulse 88. March 15/94. On giving patient a bath, today, one of his legs & foot were
" 19 found badly swollen; at 10.30 Am. was ordered to be put to bed (by Dr Herzog). March 19/94. Is some better today;
" 31 was ordered to be got up, dressed & put on the ward. March 31/94. Has been up daily since last note. No noticeable change.

Apl 2 April 2/94 Wt 129½ pds (a loss of 9½ pds, in the past month); Pulse 100. Patient is failing in bodily strength;
" 30 gets knocked about and sometimes hurt by the other patients. Habits have become very dirty, of late.
April 30/94. Patient is very feeble, and clumsy; fell down while at walking, & got bruised over left eye.
Seems to be failing very much, of late. Appetite is only fair. Habits are very dirty, now. ——

May 1/94 May 1/94 Wt 129½ pds Pulse 104. May 28/94. Has a red mark at each hip; look like beginning bed-sores; powder
June 1 applied to same. June 1/94. Wt 123 pds (is rapidly losing in flesh). Pulse 92. Appears slowly but steadily growing
" 30 worse. June 30/94. Becoming very much weaker. Appetite good; bowels regular; habits continue very dirty —
July 1/31 July 1/94. Wt 120 pds (is still losing in flesh). Pulse 92. July 31/94. Patient seems quite rapidly failing.

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Personal and Medical History of Elie Maliff alias Alis Melles

Whole No. 3155

Residence, St Paul

Date Admission, 17th October 1892

Admitted by, Dr Phelps Hour, 7 PM

How Sent, Jno. B. Olivier, Jof P., Ramsey Co

Sex, male

Age, 38

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Peddler

Degree Education,

Profession Religion, Yes; Hebrew

Habits, unknown

Nativity, Poland

Physicians Committing, O. Martel and A. Sweeney

Correspondents, Judge of Probate, Jno. B. Olivier (Friend of Patient) St Paul Minn



No. for Year, 67

...atives, unknown; also as to heredity

...ting, unknown

...disposing, unknown

...Mania - Chronic

...ying Bodily Disorder, none

... Not, not

...s Attack, not definitely stated not known

...ack, unknown

...nissions,

... Attack, unknown

...eaving, June 29. 1897

Time in Hospital, 4 yrs. 8 mos. 12 da.

Result, Transferred to Fergus Falls.

O.C. Phe

EXAMINATION ON ADMISSION.

Exd by Dr. Oakes 10/25/92

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, 2.

Quick or Sluggish, seems sluggish

MEMORY:

Past Events, 2.

Recent Events, 2. seems to have some idea of time here.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, 2.

Correct or Illusive, 2.

REASONING POWER:

Ordinary Subjects, 2.

Own Mental State, 2.

Special Subjects, 2.

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, feels no good

DELUSIONS: has probably

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: of hearing voices talking, talking, saying bad things —

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent, to point

Voluble or Reticent, Answers questions

Personal and Medical History of Elie Maliff alias Alis Melles

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 3 in WEIGHT, 152 pounds NUTRITION, fairly good; is pale

WOUNDS OR ABNORMALITIES, 2.; scalp disease

TONGUE, Tremors, quite tremulous Coatings, slight; tooth marked Promptness Movement, unsteady; fairly prompt

PUPILS, Equality, Yes Size, some dilated

Response Light, 2. seems unimpaired Accommodation, some

SIGHT, probably good

HEARING, Right unpaired; left good.

COORDINATION, Arms, finger to nose, eyes shut, fair.

Legs, standing at rest good; standing, Eyes shut, good.

TREMORS, Hands, Tongue, quite tremulous

Facial Muscles, General,

REFLEXES, Patellar, Equal; much diminished (+ 1 - 2.)

Other Reflexes,

ARTICULATION, Hesitating, Slurred, foreign

FACIAL EXPRESSION, Dull

SENSIBILITY,

HEART, seems normal

LUNGS, " "; Breathing loud wheezy.

D M Norm/qr EXAM. URINE, Color, yellow; reaction acid; Sp. gr. 1030; albumen none; urea 1.6%

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated,	Irregular, Yes
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, accelerated	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Elie Maliff
alias Alis Mellis

1892

This patient was brought here by Deputy Sheriff Courtean, with the following history. Habits, as regard temperance and morality, unknown. Cause of attack unknown; form is acute, evalted; no accompanying bodily disorder; On Aug 17th/92 examined for insanity and discharged; appeared at City Hospital Oct. 7th. Says a telephone in his chest through which people abuse him. Is sometimes violent. Insanity is now manifested by the delusion that he is threatened by people who converse through this telephone in his chest. Not disposed to injure others. Has undeamed delusion from imaginary Enemies. Is not suicidal; not filthy or destructive. Was under restraint at City Hospital, by wrist cuffs for 10 days. Has not been under medical treatment.

Oct 17/92 On admission; was put upon B.D. Oct 18/92. Was quiet and rested well, sleeping 9 hours, last night. Am. Ate well. Pulse 81. Tongue tooth-marked, coated & tremulous. Oct 22/92. Has been quiet at night, resting & sleeping well, since last note. Yesterday, Pulse was 88. Tem 97.6. This
" 23/92 Am. Pulse 92. Oct 23/92. Slept 8 hours last night. Am. Pulse 86. Oct 24/92. Slept 8 hours last
" 25 night. Am. Pulse 104. Oct 25/92. Has quiet, restful, and slept 8 hours last night. Am
" 26 Pulse 108. 4 Pm. Pulse 102. T. 99.2. Oct 26/92. Slept 8 hours last night. Am. Pulse 104. T. 99.2
" 27/30 Pm. Pulse 86. Oct 27/92. Am. Pulse 110. T. 99.2. Oct 30/92. Am. Pulse 102.
Nov 1/92 Nov. 1/92. 9 am. Pulse 112. Nov. 2/92. Wt 170 lbs. Pulse 106.
" 3/92 Nov 3/92. Am. Pulse 126. Nov 4/92. Am. Pulse 110.
" 14/92 Nov 14/92. Has rested and slept 8 hours each night since last note. Has the nose-bleed last night.
" 21/92 Nov 21/92. On last two night, reported slightly noisy & restless; at all other times having rested and slept well. Has been up in the hall daily; quiet; fairly clean and tidy; dressing & caring for himself and quite well-behaved. Talk very little with fellow-patients, but always approaches the Dr. when he comes in and with a preliminary "excuse me, Dr." tells of some ill-feeling, variously located, or asks why he is kept here. Seemed almost threatening at one time in this talk. His English is quite broken and very difficult to understand. Quite often tries to kiss the Dr's hand. Does no work.

Dec 5/92 Dec 5/92. Wt 168 lbs. Pulse 100. Dec 21/92. Continues quiet and to rest and sleep well, at night.
" 21/92 Seems to be feeling better. Now only asks to be let go. Tries to kiss the Dr's hand & even attempts to prostrate himself before him. Says something, which seems to mean, that he thinks he has been sent here for taking something, for which he now offers to pay if he can be let go away. Nose-bleed, which was quite frequent & free at one time, is now less so. —

1893
Jan 3/93 Jan 3/93. Wt 168½ lbs. Pulse 76. Jan 6/93. Is cleaning his clothes today; excited & badly behaved. —
" 15 Jan 15/93. Refused 2 meals yesterday. Obstinately standing in an end of the hall, fighting against
" 18/21 being moved. Jan 18/93. Has eaten only one meal since the 14th. Jan 21/93. During the past week, has grown more & more disturbed. Has persistently refused food & has been fed by the tube, resisting, strenuously, the feeding. Also has resisted all interference by the attendants: refusing to be dressed, to be removed from the spot where he stands; for the past two 3 days has been very excited and loudly noisy, crying, talking, & groaning. Has been extremely noisy at night, sleeping none, except when given hypodermics. Has been kept in seclusion; struggles
" 22/23 blindly when approached. Jan 22/93. Is noisy, irritable & violent today. Jan 23/93. Is constipated. Given laxatives. Jan 24/93. During past 2 nights, has been very excited, restless,
" 24 [illegible]

Personal and Medical History of Elie Maliff
alias alis Mellis

1893

NAME. Elie Maliff

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 5th	168½	78	1½	
Feby 5th	158	90		10½
Mar 2nd	167½	100	9½	
Apl 4th	171	88	3½	
May 3rd	169½	95		1½
June 8th	167	84		2½
July 1st	165½	112		1½
Augt 1st	162	104		3½
Sept 1st	163	98	1	
Oct 2nd	161	86		2

[illegible] 1 hour, each night. Last night was quieter, sleeping 8 hours, keep his clothes on, while in the hall. Jan 28/93. On the day & out of bed, the greater part of each night, sleeping none. Is quiet & slept 8 hours in each.

Feb 5/93 Feb 5/93. Was very troublesome this morning, which lasted about 2½ hours. Feb 6/93. For
" 7 the day, in part, to his refusal to keep dressed while in hall.
" 8 Feb 8/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 9 Feb 9/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 10 Feb 10/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 11 Feb 11/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 12 Feb 12/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 13 Feb 13/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 14 Feb 14/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 15 Feb 15/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 16 Feb 16/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 17 Feb 17/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 18 Feb 18/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 19 Feb 19/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 20 Feb 20/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 21 Feb 21/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 22 Feb 22/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 23 Feb 23/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 24 Feb 24/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 25 Feb 25/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
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" 27 Feb 27/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 28 Feb 28/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.

March 1/93 March 1/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
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" 27 March 27/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 28 March 28/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 29 March 29/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 30 March 30/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 31 March 31/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.

April 1/93 April 1/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
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" 3 April 3/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
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" 30 Sept 30/93. Very stubborn, at times. Habits clean. Otherwise, no change to note. (Noisily talkative, at times).

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" 30 Oct 30/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 31 Oct 31/93. No material change in patient's condition. Nov 1/93 Wt 167 lbs. Nov 17/93 Appetite good. Bowels reg. Behaves generally quiet with the exception of once in a while, when he will talk a good deal. Has delusions and talks incoherently. Habits clean. Seems to attract —

Nov 1/93 Nov 1/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
" 17/93 Nov 17/93. Has been quiet & well behaved, talks little but incoherently. Health apparently good.
Dec 20/93 Dec 20/93. Very troublesome of late, stubborn and inclined to fight. Jany 31/94. No change. —
Jan 31/94
Feb 28 Feby 28/94. Usually a quiet patient, but stubborn and even violent when aroused. Sits in one place, most of the time; does a little work in the ward. Health is apparently good. Habits are cleanly. —
March 31 March 31/94. No noticeable change. Still inclined to be very easily provoked; is also very stubborn, at times.
April 30 April 30/94. No change to note. Was vaccinated on April 24th — but vaccination failed. —
May 31 During this period, there has been no change observable. He is generally quiet & well-behaved, but is easily
June 30 aroused when he becomes pugnacious & violent. Sits in one place & seldom speaks. Walks a little in the ward.
July 31 Is neat in dress; habits are clean. Health apparently good. —
Aug 31 During these 3 months, there is no change calling for remark. Is generally well-behaved, though
Sept 30 at times noisy & stubborn & inclined to be pugnacious, if provoked or annoyed. Speech is
Oct 31 incoherent — Habits clean — He works a little in yard — Health apparently good —

carried to [illegible] 1449

1892

This patient was b
regard temperance an
no accompanying bo
appeared at City Hospita
he sometimes violent. H
people who conversed throug
-deavored to escape from h
nder restraint at City Hosp

Oct 17/92 On admission; was put upon
" 18 last night. Am. Ate well. Pulse 81.
quiet at night, resting & sleeping
" 23/24 Am. Pulse 92. Oct 23/92. Slept 8 ho
" 25 night. Am, Pulse 104. Oct 25/92. Was quiet, restful, and slept 8 hours last night. Am
" 26 Pulse 108. & Pm. Pulse 102. T. 99.2. Oct 26/92. Slept 8 hours last night. Am. Pulse 104. T. 99.2
" 27/30 Pm. Pulse 86. Oct 27/92. Am. Pulse 110. Te) 99.2. Oct 30/92. Am. Pulse 102.
Nov 1/2 Nov. 1/92. 9 am. Pulse 112. Nov. 2/92. Wt 170 lbs. Pulse 106.
" 3/4 Nov 3/92. Am. Pulse 126. Nov 4/92. Am. Pulse 110.
" 14 Nov 14/92. Has rested and slept well 8 hours each night since last note. Has the nose-bleed last night.
" 21 Nov 21/92. On but one night, reported slightly noisy & restless; at all other times having rested and slept well. Has been up in the hall daily; quiet; fairly clean and tidy; dressing & caring for himself and quite well-behaved. Talks very little with fellow-patients, but always approaches the Dr when he comes in and with a preliminary "Good morning, Dr" tells of some ill-feeling, variously located, or asks why he is kept here. Seemed almost threatening at one time in this talk. His English is quite broken and very difficult to understand. Quite often tries to kiss the Dr's hand. Does no work.

Dec 5/21 Dec 5/92. Wt 158 lbs. Pulse 100. Dec 21/92. Continues quiet and to rest and sleep well, at night seems to be feeling better. Now only asks to be let go. Tries to kiss the Dr's hand & even attempts to prostrate himself before him. Says something, which seems to mean, that he thinks he has been sent here for taking something, for which he now offers to pay if he can be let go away. Has had bleed, which was quite frequent & free at one time, is now less so. —

1893
Jan 3/6 Jan 3/93. Wt 158½ lbs. Pulse 96. Jan 6/93. Is wearing his clothes today; excited & badly behaved. —
" 15 Jan 15/93. Refused meals yesterday. Obstinately standing in and end of the hall, fighting against being moved.
" 18/21 Jan 18/93. Has eaten only one meal since the 14th. Jan 21/93. During the past week, has grown more & more disturbed. Has persistently refused food & has been fed by the tube, resisting, strenuously, the feeding. Also has resisted all interference by the attendants; refusing to be dressed, to be moved from the spot where he stands; for the past two days has been very excited and loudly noisy, crying, talking, & pounding. Has been extremely noisy at night, sleeping none, except when given hypodermics. Has been kept in seclusion; struggles blindly when approached.
" 22/23 Jan 22/93. Is noisy, excitable & violent today. Jan 23/93. Is constipated. Given laxative.
" 24 Jan 24/93. During past 2 nights, has been very excited, restless, noisy & out of bed, sleeping only about 1 hour, each night. Last night was quieter, sleeping 8 hours.
1/3 Jan 27/93. Is eating well now. Wont keep his clothes on, while in the hall. Jan 28/93. On the night of the 24th & 25th inst. was restless, noisy & out of bed the greater part of each night, sleeping none. Last night & night before was much more quiet & slept 8 hours on each.
Feb 2/9 Feb 2/93. Had an attack of unconsciousness this morning, which lasted about 2½ hours. Feb 9/93. For the past 8 days, has been kept in seclusion, owing, in part, to his refusal to keep dressed while in hall.
" 22 Feb 22/93. Had a hemorrhage (about a cupful) probably from the lungs. This is the 3d he has been known to have. Feb 23/93. Continues more or less restless, disturbed & noisy at night, sleeping, as a rule, poorly and sometimes none at all. Conduct & behavior, by day, do not improve. Occasionally refuses meals. Seems in good health, though there is a marked loss in weight in past 4 weeks.
" 28 Feb 28/93. Was brought down to the office for examination of his lungs; resisted strenuously & was noisy & excited.
Mar 29 March 29/93. Reported noisy at night but twice, during past 4 weeks. Quiet by day. Lies around; talks but little. Easily provoked to fight.
Apr 21 April 21/93. Uniformly quiet at night. Has lately been quite excitable & noisily talkative by day.
May 20 May 20/93. Continues quiet at night & apparently sleeps well. Is quite often reported as noisy during the daytime. Is more closely watched now and is less inclined to be pugnacious and ugly.
" 31 Is, however, easily irritated & excited. Bodily health seems quite good. May 31/93. Appetite good; bowels regular. Is restless, at times, by day & quite noisy. Does no work. Talks incoherently. Habits are clean. Does not change much from month to month.
June 30 June 30/93. Still noisy at times & talking excitedly. Appears in good physical health.
July 31 July 31/93. Appetite Continues good; bowels normal. Is better behaved of late; more quiet. Does not talk so much as formerly to, but answers questions. Habits are clean. Otherwise, no material change from last month.
Aug 15/30 Aug 15/93. Appetite good; bowels regular. Is fairly quietly behaved. Shows delusions. Sits in one place, most of the time; hardly ever talks to anyone. Habits are clean. Aug 30/93. No noticeable Change. At times, noisy.
Sept 30 Sept 30/93. Very stubborn, at times. Habits clean. Otherwise, no change to note (noisily talkative, at times).
Oct 31 Oct 31/93. No material change in patient's condition. Nov. 1/93 Wt 167 lbs. Nov 17/93 stopped food.

Boards reg: Behavior generally quiet, with the exception of once or twice, when he will talk a good deal. Has delusions and talks incoherently. Habits clean. From 6 to Jan 1st — Nov 24/93. Has been quiet & well behaved, talks a little but incoherently. Health apparently good.
Dec 28 Very troublesome of late, stubborn and inclined to fight. Jany 31/94 no change. —
Jan 31/94
Feb 28 Feby 28/94. Usually a quiet patient, but stubborn and even violent, when aroused. Sits in one place, most of the time; does a little work on the ward. Health is apparently good. Habits are cleanly. —
Mar 31 March 31/94. No noticeable change. Still inclined to be very easily provoked; is also very stubborn, at times.
Apl 30 April 30/94. No change to note. Was vaccinated on April 24th — but vaccination failed. —
May 31 / June 30 / July 31 During this period, there has been no change observable. He is generally quiet & well-behaved, but is easily aroused when he becomes pugnacious & violent. Sits in one place & seldom speaks. Works a little on the ward. Is neat in dress; habits are clean. Health apparently good. ——
Aug 31 / Sept 30 / Oct 31 During these 3 months, there is no change calling for remark. Is generally well-behaved, though at times noisy & stubborn & inclined to be pugnacious, if provoked or annoyed. Speech is incoherent. Habits clean. He works a little on ward. Health apparently good —

carried to A 145

Personal and Medical History of John J. McGrath



Whole No. 3156

Residence, Stillwater, Minn.

Date Admission, 18th October 1892.

Admitted by, Dr. Phelps Hour, 7 P.M.

How Sent, Rudolph Lehmicke, Jo P. Washington County

Sex, male

Age, 47

Civil Condition, married

Children, Yes, 4.

Age Youngest Child,

Occupation, Lumberman

Degree Education,

Profession Religion, Yes, Catholic

Habits, Drinking man till 2 mos; ago; then took pledge

Nativity, New York

Physicians Committing, H. C. Voght & Philip Mueller

Correspondents,

No. for Year, 68

Insane Relatives, x ; (Insanity not hereditary)

Cause Exciting, don't know

Cause Predisposing, Intemperance probably; had head injury

Form, Mania — Acute

Accompanying Bodily Disorder, No; Says he has never been ill.

Suicidal or Not, Not

Date of this Attack, 3 or 4 weeks ago

Duration, 3 or 4 weeks

No. of Attack, 1st as far as can be ascertained

No. of Admissions,

Age First Attack, 47 about

Time of Leaving, Nov. 1st. 1892

Time in Hospital,

Result, Transferred to Eastings.

EXAMINATION ON ADMISSION.

Exd by Dr. Baker Oct 29/92 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, somewhat confused

Quick or Sluggish, appears fairly active

MEMORY:

Past Events, says, remembers pretty well.

Recent Events, seems to be fairly good.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, rather limited, but fair; Answers questions after considerable repetition of question; doesn't realize

Correct or Illusive, own condition; thinks he is all well —

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, poor

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent, yes

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, that some person (professional man) had a power over him

Transitory or Not,

HALLUCINATIONS: none detected

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, coherent

Voluble or Reticent, Talks when Questioned

GENERAL DESCRIPTIVE REMARKS: Head-injury; scar + depression in skull, in forehead. Has drunk to excess. As to his coming here, claims he has not drunk for 2 yrs; used to drink, but claims he is temperate now; thought he was going to be taken to his uncle's + instead of that they brought him to Lock-up. Claims he had not done anything to cause them to do this. Tells the story of his going before the P.J. for examination; of answering questions all properly; and of his then being brought here, knowing not where he was going; says, tacked up a white flag merely out of curiosity; "had his own ideas about that". When started in conversation by questions, talks in a low, mumbling, almost inaudible tones, indistinct, fairly prompt. The difficulty in enunciation seems to be chiefly in a lack of force + energy, rather than in motor defect. Reading from paper however, develops both hesitation + slurring — In telling his story told Dr. J. in correct in his details, in a rather rude manner. Did not seem to respect the nature of the proceedings before the J.P. + while being taken said, was told by the deputy that he had to come to this Hospital; 3 days having elapsed since his descent —

Personal and Medical History of John J. McGrath

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10 in. WEIGHT, 140 pounds (usual 150) NUTRITION, below normal

WOUNDS OR ABNORMALITIES, Scar + depression in skull on forehead; scar on right thumb; abnormalities probably some

TONGUE, Tremors, quite marked Coatings, Considerable Promptness Movement, fairly prompt

PUPILS, Equality, very slight inequality; left being a trifle larger. Size, about normal

Response Light, Yes Accommodation, Yes

SIGHT, Seems good.

HEARING, Considerably impaired

COORDINATION, Arms, Finger to nose, eyes shut, fairly well done.

Legs, Standing on foot, somewhat unsteady; Standing, eyes shut, sways some; turning fairly good quickly,

TREMORS, Hands, some Tongue, quite marked

Facial Muscles, of face, on protrusion General,

REFLEXES, Patellar, equal + much exaggerated (8 or 9 Dr. P's Scale).

Other Reflexes,

ARTICULATION, Hesitating, Yes Slurred, quite markedly.

FACIAL EXPRESSION, fair

SENSIBILITY,

HEART, Normurmurs

LUNGS, Chest 36 in; Expansion about 3 in; Seem good.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Tendency to be Constipated, at present Irregular,

APPETITE, Good, fairly Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 67. some irreg. (mad). RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother died about 35 or 45; can't say Cause.

Father or Pat. Relations, Father died suddenly, about 70; claims heart trouble.

Brothers or Sisters, 1 Brother dead; 1 sister dead.

Personal and Medical History of John J. McGrath

1892 This man was brought here by C. O. Anderson, Deputy, with the following history. He has been a "drinking man" till about 2 months ago. He took pledge; says he has drank nothing since. Don't know cause of this attack; form is depressed; says he has never been ill; 3 or 4 weeks ago he says some professor passed him and produced some peculiar noises as he is weak & affected his head. As far as can be ascertained this is 1st attack. Insanity now manifested by the idea of the influence of same professor over him. He tacked a white flag on a shed at his home to keep the rebels away. Not disposed to injure others; not suicidal; not filthy or destructive. Don't know of any peculiarities of temper &c being previously manifested. Had an injury to his head when 15 or 16 years of age. No restraint or confinement has been employed. Not been under medical treatment.

Oct 19 Oct 19/92. Was restless last night, sleeping but 4 hours. Is up this morning, neatly dressed & feels quite well.
" 26 Is quiet. Oct 26/92. Has been resting and sleeping well, from 7 to 8 hours at night, since last note.
" 29 Oct 29/92. Transferred to B1 today, from B2.
Nov 5 Nov 2/92. Wt 142½ pds. Pulse 76. Nov 5/92. Attacked some one in B1 & was transferred to B2. He struck a fellow patient who was playing a guitar, without provocation(?) or warning.
" 22 Nov 22/92. Has been uniformly & perfectly quiet at night, resting and sleeping well. Has been up daily; has been cleanly in his habits; tidy in his dress; quiet and calm in demeanor talking very little to those around him, but responding to greetings pleasantly. Claims that he feels well & that he is well. Asks why he is kept here. Was probably laboring under some hallucination when he struck the patient, above. Bodily health has been probably good, although patient is rather thin and pale, & wrinkled.

Dec 5 / 22 Dec 5/92. Wt 153 pounds. Pulse 88. Dec 23/92. Is quiet, rests & sleeps well. Rarely gets into trouble; occasionally does, however; possibly through delusions or hallucinations. Dec 23/92. Attacked an attendant, and was moved from B2 to B3. —
1893
Jan 3 Jan 3/93. Wt 143 pds. Pulse 84. Jan 5/93. Talks rather threateningly & unfriendly today, thinking himself greatly abused by being kept here, quoting, as evidence that he is well, that he had received no medicine.
" 23 Jan 23/93. Uniformly quiet at night. Has talked rather threateningly on several occasions; is quite obstinate; will not permit cutting of his hair.
Feb 20 Feb 7/93. Is quiet & apparently rests & sleeps well at night. His day, is now somewhat better behaved, and has not lately been reported as so pugnacious & ugly as formerly. Is now gaining some in body weight.
Mar 13 March 13/93. Today attacked an attendant from behind & without any provocation or warning; made a quite
" 28 desperate struggle before he was got under control. March 28/93. Is almost completely & uniformly quiet at night, apparently sleeping well. Under the restraining influence of close watching of the member of attendants patient has quieted down and has been quite well-behaved ever since. Has very little to say. Sits apart from others.
Apr 20 April 20/93. Quite well-behaved for him, has lately been showing signs of ugliness again. Conduct and conditions are about as usual. — Was recently visited by a friend: jokingly at supper-table this evening and had to be taken out of dining-room. —
May 20 May 20/93. For the past month, has been quite well-behaved, not having been reported as either ugly or pugnacious.
" 31 Quiet; keeping apart from others. Health about as usual. May 31/93. Appetite good; bowels regular. Still of an ugly & quarrelsome disposition. Scarcely ever speaks to anyone. Plays cards some. Habits clean.
June 3 June 3/93. There is no noticeable change in conduct or behavior during the past month.

Personal and Medical History of John J. McGrath

NAME. John J. McGrath

DATE. 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Feby 3d	157	92	4	
Mar. 2d	155½	118		1½
Apl. 4th	157	88	1½	
May 3d	156	76		1
June 3d	157	72	1	
July 1st	155	86		2
Aug. 1st	153½	72		1½
Sept. 2d	156	76	2½	
Oct 2d	153	80		3

...ue. Appetite good. Bowels regular.
...civis for some time; this is, no doubt, owing to the closer
...till, however, of a disagreeable & quarrelsome nature. Surly
...bout him; very imprudent and abusive, especially if
... Health about as usual. Habits clean.
5/93. Appetite good; bowels regular. Is quietly behaved,
...voked. Very independent in his manner & imprudent also.
...to. Occasionally gets into fights. Is of clean habits.
...up, today, and made it black. Sep 30/93. Still very
...y & wants to fight. Uses very abusive language. Sits
...". —

...ther respects, above note still holds good. Oct 29/93 No change
...till holds good. Habits are clean. Nov 29/93 Wt 149 lbs. Still
...ov 24/93 Quiet & well behaved so far. Talk a little when
... Dec 28/93 No change — Jan 31/94. About the same.
...ed; sits in the one place, most of the time, occasionally
...profane. He does no work. Health apparently good. —
...ll indolent; does not help with anyone. Habits are cleanly.
...ndition at this date. Physical condition seems good. —
... Generally quiet, but stubborn and ill-tempered if annoyed. —
...ttendants & patients. Does no work. Habits clean. Does no work. —
...is stubborn, ill-tempered, very easily excited — Talks a little —
...himself is very incoherent. Habits clean; dress neat; health seems good.
...nges in his mental & physical condition, conduct or behavior. —
... is one very stubborn - ill-tempered; very easily provoked. Health seems to be good —

Feby / March / Apl 30 — During this Quarter, patient has been generally quiet, yet easily irritated & provoked. Still very ill-tempered, at times. Whistles & sings; speech incoherent. Does no work. Habits clean. Health good.

May / June / July 31 — During this period, patient has been generally quiet. He still, however, shows his mean and irritable disposition, at times. Talks to himself a good deal. Habits clean. Does no work. Health good.

Aug / Sept / Oct 31 — During these 3 months, patients condition, both mentally & physically has remained about the same. Stubborn & very irritable; speech irrational. Habits clean; health good. No work.

Nov 4 / Dec / Jan 31/94 — Nov 4/93. Wt 154 pds. Pulse 88. Nov Dec & to Jany 31/94. No change noted. Is very easily excited. Incoherent in speech. Indolent: does no work. Habits clean: health seems good.

Feb 1/94 & Aug 1/94 — Summary of Nurses Notes by Dr. Phelps. Patient stubborn: fairly neat. Talks rather incoherently: sits quietly about. At times is threatening & irritable. No bodily illness noted. Wt. 150 to 155 lbs. Aug 1/94 Wt. 145# Oct 31/94 General health fairly good. Is dull, stupid & inactive. Rather untidy: does no work. Jan 31/95 General health still good. No change of importance during period. Report by Dr. Wanous Feb 1 - July 31/95 Wt. 155# Incoherent. Has delusions. Habits tidy: very inactive: no mental change. Report by Dr Chapple Aug 1/95 - Jan 31/1900 Wt. 155#: cond. stationary: health fairly good: incoherent & deluded, talks to self: well behaved: cleanly: does nothing.

1900 Jan 31 — Apl 26. Transferred to Hastings Hospital —

1892 This man was brought here by
been a "drinking man" till a
Dont know cause of this
he says sound profe
his head. As far
of the influen
keep the rebels
of any peculiarities
Years of age. No rest
Oct 19 Oct 19/92. Was restless last
" 26 Is quiet. Oct 26/92. Has
" 29 Oct 29/92. Transferred to B3
Nov 2 Nov 2/92. Wt 142½ pds. Pulse 7
He struck a fellow patient who
" 22 Nov 22/92. Has been uniformly q
been up daily; has been clearly in he
talking very little to those around him, but responding to greetings pleasantly.
Claims that he feels well & that he is well. Asks why he is kept here. Was probably laboring
under some hallucination when he struck the patient, above. Bodily health has been probably
good, although patient is rather thin and pale, & wrinkled.

Dec 5 Dec 5/92. Wt 153 pounds. Pulse 88. Dec 23/92. Is quiet, rests & sleeps well. Rarely gets into trouble;
" 23 occasionally does, however; possibly through delusions or hallucinations. Dec 23/92. Attacked an
1893 attendant, and was moved from B2 to B3. —
Jan 3 Jan 3/93. Wt 153 pds. Pulse 89. Jan 5/93. Talked rather threateningly & imprudently today, thinking him-
self greatly abused by being kept here, questing, as evidence that he is well, that he had received no medicine.
" 23 Jan 23/93. Is uniformly quiet at night. Has talked rather threateningly on several occasions; is
quite obstinate; will not permit cutting of his hair.
Feb 20 Feb 5/93. Is quiet & apparently rests & sleeps well at night. By day, is now somewhat better behaved, and
has not lately been reported as so fractious & ugly as formerly. Is now gaining some in body weight.
Mar 13 March 13/93. Today attacked an attendant from behind & without any provocation or warning; made a quite
" 28 desperate struggle before he was got under control. March 28/93. Is almost completely & uniformly quiet at
night, apparently sleeping well. Under the restraining influence of close watching of the number of attendants
patient has quieted down and has been quite well-behaved ever since. Has very little to say. Sits apart from others
Apr 28 April 28/93. Quite well-behaved for a time, has lately been showing signs of ugliness again. Conduct and
condition are about as usual. — Was recently visited by a friend: jokingly at supper-table this evening
and had to be taken out of dining-room. —
May 20 May 20/93. For the past month, has been quite well-behaved, not having been reported as sick or fractious.
" 31 Quiet; keeping apart from others. Health about as usual. May 31/93. Appetite good; bowels regular. Still of
an ugly & quarrelsome disposition. Scarcely ever speaks to anyone. Plays cards some. Habits clean.
June 3 June 3/93. There is no noticeable change in conduct or behavior during the past month.

June 30 June 30/93. Patient keeps about the same. Appetite good. Bowels regular.
July 31 July 31/93. Has not been reported as fractious for some time; this is, no doubt, owing to the closer
watch that has been kept upon him. Is still, however, of a disagreeable & quarrelsome nature. Surly
and sullen. Has an independent air about him; very imprudent and abusive, especially if
any one asks him to move or to do anything. Health about as usual. Habits clean.
Aug 1st 15th Aug 1/93. Weight fluctuates. Aug 25/93. Appetite good; bowels regular. Is quietly behaved,
if let alone, but is easily irritated & provoked. Very independent in his manner & imprudent, also.
Always more or less cranky, when spoken to. Occasionally gets into fights. Is of clean habits.
Sept 15/20 Sept 27/93. Struck a fellow patient in the eye, today, and made it black. Sep 30/93. Still very
Easily provoked, when he becomes very angry & wants to fight. Uses very abusive language. Sits
in one place, by himself, most of the time. — " —
Oct 7/10 Oct 3/93. Health is about as usual. In other respects, above note still holds good. Oct 15/93 No change
" 31 Oct 31/93. Above general note of Sept 30th still holds good. Habits are clean. Nov 7/93 Wt 149½ lbs.
Nov 17 93 No change Transf'd to Annex Nov 24 93 Quiet & well behaved; prefers to talk a little when
Dec 28 addressed. Health apparently good. Dec 28/93 No change - Jan 31/94. About the same.
Jan 31/94
Feb 28 Feb 28/94. Is quiet & inoffensive, unless disturbed; sits in the usual place, most of the time, occasionally
singing in low tones; when aroused, is noisy & profane. He does no work. Health apparently good. —
Mar 31 Mar 31/94. Former note good up to date. Still indolent; does not help with any work. Habits are cleanly.
April 30 April 30/94. No change & note in patient's condition at this date. Physical condition seems good. —
May 31 } During this period, patient has kept about as usual. Generally quiet, but stubborn and ill-tempered if annoyed. —
June 30 } Uses coarse profane & vulgar language; abusive to attendants & patients. Does no work. Habits clean. Does no work. —
July 31 }
Aug 31 } During these 3 months, no special change noted. He is stubborn, ill tempered, very easily excited - talks a little
Sept 30 } in conversation, seems quite rational, but when talking of himself is very incoherent. Habits clean; dresses neat; health seems good.
Oct 31 }
Nov 30 } During this period, there is no change noticeable in his mental & physical condition, conduct or behavior. —
Dec 30 1894 } He is still very stubborn - ill-tempered; very easily provoked. Health seems to be good -
Jan 31 }
Feby } During this Quarter, patient has been, generally, quiet, yet easily irritated & provoked; still very
March } ill-tempered, at times. Whistles & sings; Speech incoherent. Does no work. Is clean. Health good.
April 30 }
May } During this Period, patient has been generally quiet. He still, however, shows his mean and
June } irritable disposition, at times. Talks to himself, a good deal. Habits clean. Does no work. Health good.
July 31 }
Aug } During these 3 months, patient's condition, both mentally & physically has remained about
Sept } the same. Stubborn & very irritable; Speech irrational. Habits clean; health good. Does no work.
Oct 31 }
Nov 4 Nov 4/95. Wt 154 pds. Pulse 88. Nov Dec & to Jany 31/96. No change noted. Is very easily
Dec } excited. Is incoherent in speech. Indolent; does no work. Habits clean; health seems good.
Jan 31/96 }
Feb 1/96 Summary of Nurses Notes by Dr. Phelps. Patient stubborn; fairly neat. Talks rather incoherently;
to sits quietly about. At times is threatening & irritable. No bodily illness noted.
Aug 1897 Wt. 150 to 155 lbs. Aug 1897 Wt. 145th Oct 31 97 General health fairly good. Is dull, stupid &
inactive. Rather untidy. Does no work. Jan 31 98 General health still good. No
to change of importance during period. (Cont. by Dr Wanous) Feb 1 - July 31 99 Wt. 153th Incoherent. Has de-
1900 lusions. Habits tidy; very inactive; no mental change. (Cont. by Dr Chapple) Aug 1 99 - Jan 31 1900 Wt 155th. Cond. stationary. Health
Jan 31 fairly good. Incoherent & deluded, talks to self, well behaved, cleanly, does nothing.
April 26 Transferred to Hastings Hospital —

Personal and Medical History of Soren Johnson
(this supposed to be name)

Whole No. 3157.
Residence, Brownsdale, Minn.
Date Admission, 19th October 1892.
Admitted by, Dr. Baker Hour, 1 PM
How Sent, S. S. Washburn Jo. P. Mower County
Sex, male
Age, about 28
Civil Condition, Single
Children, none
Age Youngest Child,
Occupation, Laborer
Degree Education,
Profession Religion, Not a Church member
Habits, Temperate as far as known
Nativity, Norway
Physicians Committing, J. N. Wheat & E. H. Washburn
Correspondents, M. B. Johnson
Brownsdale, Minn

No. for Year, 69
Insane Relatives, unknown (as to heredity, unknown)
Cause Exciting, not known
Cause Predisposing, not known
Form, Mania-Chronic
Accompanying Bodily Disorder, No
Suicidal or Not, Not
Date of this Attack, not known
Duration, not known
No. of Attack, not known
No. of Admissions,
Age First Attack, unknown
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.
MENTAL CHARACTERISTICS.

Exd by Dr Baker Oct 29/92

MENTAL ACTIVITY:
Clear or Confused, Confused probably
Quick or Sluggish, Sluggish
MEMORY:
Past Events,
Recent Events, Seems inaccurate
Special Subjects,
PERCEPTIVITY:
Alert or Dull, probably not very good
Correct or Illusive,
REASONING POWER: not very good
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Has a number of irregular, awkward, jerky movements; almost like Choreaic movements.

EMOTIONAL STATE: 2
Normal, Calm,
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Examination of Urine of M. Soren Johnson

Passed Nov 28-11-Am Examined Nov 28-4-Pm
Character Sp. G. 1036 Color Dark Yellow
Quantity in 24 hours Reaction Acid
Clear, cloudy, or a sediment Clear

Tests for Albumen.
1. Heat Yes 2. Nitric Acid No
3. Tanrets Yes

Tests for Sugar.
1. Fehlings Sol. 2. Haines Yes
3. Bismuth Slightly

Microscopical.
Urates — Phosphates
Mucus — Pus
Blood — Epithelium
Casts — Oxalate Linn

Amount Uren

Soren Johnson

ADMISSION—(Continued.)
ACTERISTICS.
NUTRITION, About normal
abnormalities, probably none(?)
able Promptness Movement, prompt but irregular
Size,
Accommodation, Yes
this test
Waxing, Eyesight, Swage some
Tongue, quite marked
General,
Slurred,
ns

Nov 10/92 EXAM. URINE, Color, transparent; reaction acid; Sp. gr. 1008; albumen none; urea 87.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, yes	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good, yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of

Whole No. 3157.

Residence, Brownsdale, Minn

Date Admission, 19th October 1

Admitted by, Dr. Baker Hour,

How Sent, E. S. Washburn Jr,

Sex, male

Age, about 28

Civil Condition, Single

Children, none

Age Youngest Child,

Occupation, Laborer

Degree Education,

Profession Religion, Not a church member

Habits, Temperate as far as known

Nativity, Norway

Physicians Committing, J. N. Wheat & E. S. Washburn

Correspondents, M. B. Johnson
Brownsdale, Minn

A.

Time o.

Time in Hos.

Result,

EXAMINATION ON ADMISSION.

Exd by Dr Baker Oct 29/92 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused probably

Quick or Sluggish, Sluggish

MEMORY:

Past Events,

Recent Events, Seems inaccurate

Special Subjects,

PERCEPTIVITY:

Alert or Dull, probably not very good

Correct or Illusive,

REASONING POWER: Not very good

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has a number of irregular, awkward, jerky movements; almost like Choreaic movements.

EMOTIONAL STATE: 2

Normal, Calm,

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Soren Johnson

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9½ in WEIGHT, 164 pds NUTRITION, About normal

WOUNDS OR ABNORMALITIES, Scar on right thumb; abnormalities, probably none (?)

TONGUE, Tremors, quite marked Coatings, Considerable Promptness Movement, prompt but irregular

PUPILS, Equality, a trifle unequal; left larger. Size,

Response Light, Seems to be some. Accommodation, Yes

SIGHT, Probably good

HEARING, probably good

COORDINATION, Arms, finger & nose, Eyes shut, wont try this test.

Legs, Standing on foot, fairly steady; Standing, Eyes shut, sways some

TREMORS, Hands, Tongue, quite marked

Facial Muscles, Irregular movements of face. General,

REFLEXES, Patellar, present; probably equal.

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART, action strong; seem to be no murmurs

LUNGS, Seem good.

D. M. Nov 10/92 EXAM. URINE, Color, transparent; reaction acid; Sp. gr. 1008; albumen none; urea · 87.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1892 This patient was brought here by M. B. Johnson, deputy (constable) and Chas. Knox, with the following history, which is very meagre. Habits are temperate as far as known — As to insanity being hereditary, insane relatives, supposed cause of this attack, manifestation of first symptoms, number of attack, any bodily disease, these are all unknown. Form of attack is chronic. Insanity is now manifested in all subjects. Is not disposed to injure others; not suicidal; not filthy or destructive. Has not been restrained or confined. As to being under medical treatment, not known.

Oct 19/20 On admission, pulse is 62. Oct 20/92. Rested quietly and slept 8 hours last night. Am. Pulse 63.
Nov 2/92. Has been, occasionally, slightly restless & noisy at night, but has, as a rule, rested and
" 23 slept well. Wt 167 pds. Pulse 70. Nov 23/92. At night, has quite infrequently been slightly restless and a little noisy. Has, however, usually rested and slept well. By day, has been quiet; has been up daily, dressed, and on the hall. Has been clean but slovenly and careless in dress; Has not been destructive. Says almost nothing to those around him; and when addressed scarcely replies and, usually, does not look up, or blurts out some short, abrupt, indistinct reply. Walks, bending forward, his eyes bent upon the floor, with a remarkably swaggering, swinging gait. Is markedly irritable & ugly; resisting when interfered with and even fighting. Yesterday, made a strong fight against the attendants when they attempted to control him. Has been in seclusion some. Bodily health good, apparently.

Dec 1/29 Dec 5/92. Wt 163 pds. Pulse 72. Dec 29/92. Is occasionally slightly noisy at night from a short mania; apparently rests and sleeps fairly well. By day, is sullen, irritable & pugnacious; very slouchy, lounging around, lying on the floor &c. Has quite often claimed that he was sick & has gone to bed, Claiming distress in his stomach & that he is constipated. Pulse has been from 56 to 72. Patient was permitted to lie in bed for some time, but as he would not keep in presentable order, Even throwing himself & bedding on the floor, and as he was not considered sick enough to necessitate his staying in bed, he was forcibly got up & dressed in a straight-suit.

1893
Jan 3/24 Jan 3/93. Wt 158 pds. Pulse 72. Jan 24/93. Occasionally slightly noisy at night restless. Sleeps daily, dressed in straight-suit; as he persists in defiling himself. Has been extremely & persistently pugnacious, striking any one in reach, without the slightest provocation. Kept a good
" 29 deal in seclusion in consequence. Surly-in tone & ugly in look. Jan 27/93. Has a hematoma coming
" 31 on his ear. Jan 31/93. Was behaving so badly on the hall today that he was ordered to be secluded.

Feb 3/28 Feb 3/93. Wt 166 pds. Pulse 78. Feb 25/93. In the period from 24th ult. to 18th inst, has been restless & noisy for from 1 to 2 hours each night; for the past week has been much more disturbed & noisy at night, sleeping only from 2 to 4 hours, each night. By day, is still kept in straight-suit; continues to be very badly behaved, ugly & pugnacious, frequently striking Attendants & patients without any cause or provocation. Is often put in seclusion. Bodily health seems good.

Mar 7/28 March 1/93. Wt 155½ pds. Pulse 80. March 28/93. Is nightly more or less noisy restless. Is persistently viciously ugly & pugnacious, destructive untidy, vulgar, profane, unapproachable, and has been kept in seclusion nearly all the time, for several weeks. When approached & addressed, replies in a snarling, angry manner.

April 4/10 April 4/93. Wt 159 pds. Pulse 78. April 6/93. Remains in bed for a few hours after rising time this morning

1893
complaining of feeling sick. Pulse taken 70. Later, got up & seemed about as usual.
Apr 24 April 24/93. Is quite often somewhat noisy at night; on the whole, sleeps fairly well. Has been out walking
" 29 a few times, and has, on the whole, seemed less viciously ugly, but still requires to be kept in seclusion.
April 29/93. Is particularly violent and destructive today.
May 3/10 May 3/93. Wt 152½ pds. Is losing in weight, the past 3 months. Pulse 68. May 10/93. Put on
" 24 hyoscin, in small doses. May 24/93. Is, each night, more or less slightly noisy, but appears to sleep about 8 hours as a rule. Lately, has not been so frequently ugly when allowed out on the hall; yet as he is still violent & destructive & somewhat pugnacious, he is kept in seclusion a good deal of the time. Is occasionally taken out walking, but has to be then very closely watched to prevent his getting into fights. Seems in good health.
June 30 June 30/93. Appetite is good. Bowels regular. No cough noticed. He is a most troublesome patient, so vicious & dangerous to the other patients in the ward that he had to be kept in seclusion 324 hours during May, and 267 hours this month, and he is so destructive of his clothes that he has to be kept in a straight-suit.
July 31 July 31/93. In the early part of this month patient got his collar-bone accidentally broken while tussling in the grove. This is now quite sound. Was in seclusion 135 hours, in this month. Conduct & behavior continue about as usual.

Aug 1/4 Aug 1/93. Was today transfered to C3. Weight 153½ pounds. Pulse 74. Aug 4/93. Injured his head by butting it against a tree. Persists in striking his head against wall, floor or trees.
" 22 Aug 22/93. Again injured his head, today, by striking it against a tree; also bruised his forehead.
" 31 Aug 31/93. Appetite good. Is ugly & has to be fed out on the hall. Physical conditions good. Bowels are regular. Is boisterous & noisy - at times, inclined to be ugly. Has not been in seclusion during this month. Habits are very dirty.

Sep 2/9 Sep 2/93. Weight 160 pounds (a gain of 6½ pds). Pulse 74. Sep 9/93. Surly & quarrelsome,
" 30 to day; striking other patients. Sep 30/93. Appetite very good. Is still fed out on the hall. Patient has been hard to control; ugly & aggravating to the other patients, also to attendants. Has to be very closely watched. Claims to have been in Insane Hospital at Yankton S.D. 2½ years & ran away. Has not been in seclusion this month. Has had 6 or 7 fights with his fellow patients during the month & has received bruises on face & blacked eyes from same.

Oct 1/ Oct 1/93. Wt 165½ pds. Pulse 63. Oct 7/93. Face bruised in fight with a fellow patient, for ay.
" 20 Is still fed, on the hall. Still has ugly "spells"; strikes & kicks; has to be very closely watched.
" 24 No seclusion this month. There is a slight improvement noticed, this month. Oct 25/93. Kicked
" 31 attendant (Nelson) in the Eye, to day, causing a discoloration. Oct 31/93. No change. Habits still dirty.

Nov 1/93 Wt 166 P 54 Nov 30/93 Appetite voracious. Fed on hall. Bowels reg: Health good Behavior
30 mischievous & ugly, provoking fights & causing fights. Is very noisy but seldom can be understood. Injuries: forehead cut and eye discolored fighting with fellow patient. Habits dirty. No improvement

Dec 1/93 Wt 171 P 58 Dec 10/93 Ugly fighting with Saunders. Struck attd Johnson in the
" 31 face causing a bruise. Dec 31/93 No change. Jany 2/94 Wt 170½ P 62 Jan 31/94
Jan 31/94 Appetite good Bowels reg. Phys. cond. very good Behavior mischievous, ugly and aggravating
Feb 1 Fed on hall & No change in any thing way. Feby 1/94 Wt 175½ pds. Pulse 62. Appetite very good. Has to
" 24 be fed, still, out on the hall. Is very boisterous; has "ugly spells"; is also noisy; annoying to others & has to be very closely watched. Talks incoherently; seldom can be understood. Has got into 2 or 3 fights this

(carried to 324)

Personal and Medical History of James Betcher
alias James Petcher

Whole No. 3159
No. for Year, 71
Residence, Stillwater (?) (unknown) St Paul Minn
Insane Relatives, unknown; (as to heredity, unknown)
Date Admission, 22nd October 1892
Cause Exciting, unknown; probably alcoholism
Admitted by, Dr Baker Hour, 7 PM
Cause Predisposing, unknown
How Sent, Rudolph Lehnicke, Jeff., Washington County
Form, Mania - acute
Sex, male
Accompanying Bodily Disorder, None
Age, 32
Suicidal or Not, not to our knowledge.
Civil Condition, unknown married
Date of this Attack, unknown (Cause under Observation Oct 21).
Children, unknown one
Duration, unknown
Age Youngest Child,
No. of Attack, unknown
Occupation, Claims to be a moulder
No. of Admissions,
Degree Education,
Age First Attack, unknown
Profession Religion, Claims to be a Baptist
Time of Leaving, Dec. 5th '92.
Habits, unknown has been intemperate
Time in Hospital, 1mo, 13d.
Nativity, Canada
Result, Recovered
Physicians Committing, C.O.B. Fraleigh & J. C. Clark
Correspondents, John Petcher, brother
Detroit, Mich

EXAMINATION ON ADMISSION.

Exd by Dr Baker Nov 23/92 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, quite active

MEMORY:
Past Events,
Recent Events, Seems good
Special Subjects,

PERCEPTIVITY:
Alert or Dull, ordinary observation seems to be quite good.
Correct or Illusive, Answers questions quite well; he does realize own condition

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,
} Fairly good

GENERAL DESCRIPTIVE REMARKS:
Intemperate; on ad. says 'had not eaten for 4 days' — Tongue slightly coated. When he was drinking heavily had 'spells' when he did not remember what occurred. Does not know name of street where his family lives. Has 'Chancre' —

EMOTIONAL STATE:
Normal, Calm, normal
Indifferent,
Exalted,
Depressed,

DELUSIONS:
Systematized or Not, None definite detected
Special Subjects,
Transitory or Not,

HALLUCINATIONS: had a "ringing of hearing"; claims has not now.

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, quite free

Personal and Medical History of James Betcher
alias James Petcher

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10in WEIGHT, 145 pounds NUTRITION, Fairly good
WOUNDS OR ABNORMALITIES, Scar on left wrist; tattoo, left arm; abnormalities, none
TONGUE, Tremors, slight Coatings, Slightly Coated (on ad.) Considerable (a/ exam). Promptness Movement, fairly prompt
PUPILS, Equality, slightly unequal; left larger. Size, about normal
Response Light, yes Accommodation, yes
SIGHT, Good
HEARING, right slightly impaired; left good.
COORDINATION, Arms, finger to nose, eyes shut, fairly good; left hand, however, somewhat inaccurate.
Legs, standing, one foot, fairly steady; standing, eyes shut, fairly steady: Turning quickly, fairly well.
TREMORS, Hands, Slight of Tongue, slight; some.
Facial Muscles, General,
REFLEXES, Patellar, diminished; responses only on re-inforcement; slightly more responsive on left leg.
Other Reflexes,
ARTICULATION, Hesitating, Slurred, quite clear
FACIAL EXPRESSION, Normal
SENSIBILITY,
HEART, Good
LUNGS, Good; girth 36½ in. Expansion 4in nearly.
EXAM. URINE, Color, light yellow; reaction acid; Sp gr. 1028; albumen none; urea 1.5%. (Dr. Mc Nov 23/92)

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, tendency to be.	Irregular,
APPETITE, Good, Yes	Medium,	Poor, has not eaten for 4 days (on ad.)
SLEEP, Good,	Poor,	Irregular,
PULSE, 117 (on ad.)	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Suddenly probably. Convulsion or vertigo, none;
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother dead; can't say cause; age 48.
Father or Pat. Relations, Father dead; of lung trouble;
Brothers or Sisters, 1 brother living; 1 brother dead; of inflammation of bowels;
1 sister living; claims good health; 1 sister died of consumption + heart disease.

Personal and Medical History of James Betcher
alias James Fetcher

1892

This man was brought here by Frank Swan, deputy sheriff, with the following history, which is very meagre and indefinite. As to his habits, heredity, nearer relatives, supposed cause of attack, bodily disease, number of attack, disposition to injure others, suicidal attempts, filthy or destructive habits, confinement or restraint, & medical treatment, all is unknown; Form of attack is acute; date of manifestation of first symptoms unknown; came under Observation Oct 21. Insanity is now manifested by his having delusions and hallucinations in regard to occupation, family, locality &c. Was discovered in a field at St Paul Park, on the morning of Oct 21, crying and claimed that two men were trying to kill him.

Oct 22d On admission, put on B2; Oct 23/92. Was somewhat restless, talking some to himself & in his sleep. sleeping about 6 hours, last night. Pm. Has been quiet and well-behaved to-day; ate well. Is nervous
" 24 and asks for hypnotic. Says he has been drinking heavily. Oct 24/92. Was quiet, rested well,
" 25 and slept about 7 hours, last night. Oct 25/92. Rested and slept well last night. Has two small ulcers or sores on his penis. Cannot give exact date of exposure, but thinks it must be nearly 4 weeks. Our patient was in a very much confused state about the time of coming here, probably;
" 30 there may have been a later exposure than he remembers. Oct 30/92. Has been somewhat restless the past few nights, sleeping only about 4 hours each night. Was to-day given hypnotic.
Nov 2 Nov 2/92. Wt 155 ½ lbs. Pulse 80. Has gained in weight.
" 7 Nov 7/92. Has been, occasionally, slightly restless at night, sleeping rather poorly; on the whole,
" 17 has slept quite well. Nov 17/92. Transferred to A2. Nov 21/92. By his request, sent back to B3.
Sores, which have been healed for some time, have a slight renewal.
" 23 Nov 23/92. Has been perfectly quiet at night, ever since coming here; has been quite restful and has slept well. Has been uniformly quiet, clean, tidy in dress, and well-behaved since coming here. Has been free, calm and coherent in conversation, not showing definite delusions. Quite active physically, moving about, going out walking; has played games a good deal & manifested interest in his surroundings. There is some confusion of memory concerning the memory of events occuring immediately preceding his coming here; in other respects, seems good. He has taken food regularly and in good quantity. Has made decided gain in weight and is well, physically. Sores on his penis have healed. There has been no marked glandular enlargement and only, within the past few days, a slight eruption. Whether the sores were true chancres or not is not yet decided. Nov 25/92. Has an eruption appearing on his forehead.
" 27 Nov 27/92. Is constipated. ——
Dec 5 Dec 5/92. Has continued to do well in conversation & conduct. Has made still further gain in weight. Has written quite frequent letters to his friends, especially his brother. ——

Was to-day permitted to go home alone.

Discharged

Personal and Medical History of H. N. Chamberlain

NAME. H. N. Chamberlain

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jan 3d	131	88	5	
Feby 3d	111	86		11
March 2d	119½	98	8½	
April 4th	124½	80	5	
May 3d	131½	100	7	
June 1st	129½	80		2
July 3d	128½	77		1
Aug 7th	126	90		2½
Sept 4th	127½	80	1½	
Oct 3d	131	64	3½	
Nov 2?	140	68	9	

e past month. Feb 21/93. For the past week, has been, almost
2 getting some stronger physically. Mentally getting worse.
ch & mumbling. Has a general idea of what he wants to say,
getting well & wants to go home soon. Is on extra diet and

ight, apparently sleeping well. Is up daily. Seems fairly
Seems somewhat brighter than described in last note.
gain. He is not so well. Reports himself as having spells,
s Convulsion. March 21/93. Has quite often lain on his bed,
s morning, Complains of pains in the lower region over the liver,
the pits, which seems fixed. March 31/93. Ate no breakfast
lped, & then vomiting it up.
at night, probably sleeping fairly well. Has complained
uplained less of feeling ill, lately, lying down less frequently.
s seen.
ight & other patients were having a day with one of the attea-
ay about as usual. Quite frequently is quarrelsome & frets
ten complain of feeling ill; now is less fault-finding.
during the past 3 months. Probably eats & sleeps
s have been reported, though he states he has such.
nsibility as Feb 13th. Says he was "kind of insane like"
been quiet & well-behaved for some days. Was to-day moved to B3.
ient (Adams). Appetite continues good; bowels regular. no
ns were quarrelsome & ugly; also given to fault-finding. Goes walking regularly.

No definite Convulsions have been reported, though he claims himself still subject to them.

June 1 June 1/93. Became violent, today & was put back upon C3. Had a convulsion, and, as soon as he
" 21 came out of it, he again became violent. June 21/93. Appetite very good, bowels normal. At times,
complains of numerous pains & aches; of "the noise bothering him & causing him to have these fits".
Behaves, sometimes, very well. Again, has "spells", when he uses bad language & fights often, without the
slightest provocation. Whenever attendants are having any trouble with a patient, he (C) is always on
their side & attacks the attendants. Noted for making a great many complaints. Manifests halluci-
nations. On coming to this ward, his eye was discolored, ear bruised & there was a slight cut
" 23 on back of head. Had a fight with a fellow patient today. Was, today, transferred to C4. June 23/93
" 30 Had a fight & hit a fellow-patient's nose, today. June 30/93. Since last note, has been quite well-
-behaved. Makes no complaints. Talks quite sensibly. Personal habits clean.
July 3 July 3/93. Does not vary much in weight. Is in quite fair physical health. Appetite keeps good.
" 31 July 31/93. Since being on this ward, he has continued quite well-behaved; less inclined to be
irritable & ugly. Complained some of being sick & was given medicine, which, he says, did him
much good. Helps some on the ward. No fits have been reported, since the one above mentioned.
Aug 7 Aug 7/93. Has been losing slightly in weight, the past 3 months. — No known cause.

(carried to page 292)

189[illegible]

This man was brought here by Fr
very meagre and indefinite
bodily disease, number
habits, confinement
manifestation of
manifested by his
Was discovered in a
that two men were trying

date of
w
, locality &c.
ng and claimed

Oct 27/92 On admission, patient
sleeping about 6 hours, last night
" 24 and asks for hypnotic. Says
" 25 and slept about 7 hours, last night
ulcers or sores in his penis. Cannot
4 weeks. On patient was in a very nu
" 30 there may have been a later exposure than
to himself & in his sleep.
to day; ate well. Is nervous
Oct 24/92. Was quiet, rested well,
pt well last night. Has two small
posure, but thinks it must be nearly
state about the time of coming here, probably;
members. Oct 30/92. Has been somewhat
restless the past few nights, sleeping only about 4 hours each night. Was today given hypnotic.
Nov 2 Nov 2/92. Wt 155½ lbs. Pulse 80. Has gained in weight.
" 7 Nov 7/92. Has been, occasionally, slightly restless at night, sleeping rather poorly; on the whole,
" 17 has slept quite well. Nov 17/92. Transferred to A[2]. Nov 21/92. By his request, sent back to C[3].
Sores, which have been healed for some time, have a slight renewal.
" 23 Nov 23/92. Has been perfectly quiet at night, ever since coming here; has been quite restful
and has slept well. Has been quiet, clean, tidy in dress, and well-behaved
since coming here. Has been free, calm and coherent in conversation, not showing
definite delusions. Quite active physically, moving about, going out walking; has
played games a good deal & manifested interest in his surroundings. There is some
confusion of memory concerning the memory of events occuring immediately pre-
-ceding his coming here; in other respects, seems good. He has taken food regularly
and in good quantity. Has made decided gain in weight and is well, physically.
Sores on his penis have healed. There has been no marked glandular enlargement
and only, within the past few days, a slight eruption. Whether the sores were true chancres
" 25 or not is not yet decided. Nov 25/92. Has an eruption appearing on his forehead.
" 27 Nov 27/92. Is constipated. ——
Dec 5 Dec 5/92. Has continued to do well in conversation & conduct. Has made still
further gain in weight. Has written quite frequent letters to his friends, especially
his brother. ——

Was today permitted to go home alone.

Discharged

on page 211.

Feb 19 Has lost considerably in weight in the past month. Feb 21/93. For the past week, has been about
" 23 nightly, somewhat noisy. Feb 23/93. Is getting some stronger physically. Mentally getting worse.
Seems greatly confused, Speech indistinct & mumbling. Has a genral idea of what he wants to say,
but seems unable to say it. Says he is getting well & wants to go home soon. Has extra diet and
has been on tonic.
Mar 18 March 18/93. Has lately been quiet at night; apparently sleeping well. Eats daily; seems fairly
strong although rather thin & pale. Seems somewhat brighter than described in last note.
Claims he is feeling well, at times; & again he is not so well. Reports himself as having spells,
" 21 but has never been seen in an active convulsion. March 21/93. Has quite often lain on his bed,
complaining of feeling badly, lately. This morning, Complains of pains in the lower region over the liver.
" 31 Has a deformity there, a bunch in one of the ribs, which seems fixed. March 31/93. Ate no breakfast
this morning, drinking but a cup of coffee, & then vomiting it up.
Apl 12 April 13/93. Has been uniformly quiet at night, probably sleeping fairly well. Has complained
some of being kept awake by noise. Has complained less of feeling ill, lately, lying down less frequently.
Goes out walking. No active convulsions seen.
May 12 May 12/93. Attempted to take part in a fight 2 other patients were having to day with one of the atten-
" 18 -dants. May 18/93. Conduct & behavior by day about as usual. Quite frequently is quarrelsome & gets
into fights with other patients. Does not so often complain of feeling ill; now is less faultfinding.
Has made quite a decided gain in flesh during the past 2 months. Eats ably, rests & sleeps
well at night. No definite Convulsions have been reported, though he states he has such.
Is still in C[3]. Dates his return to responsibility as Feb 13th. Says he was "kind of insane like"
" 29 before that time. —— May 29/93. Has been quiet & well-behaved for some days. Was today moved to A[3].
" 31 May 31/93. Had trouble with a fellow-patient (Adams). Appetite continues good; bowels regular. No
cough has been noticed. Inclined to be quarrelsome & ugly; also given to fault-finding. Goes walking regularly.
No definite convulsions have been reported, though he claims himself still subject to them.
June 1 June 1/93. Became violent, today & was put back upon C[3]. Had a convulsion, and, as soon as he
" 21 came out of it, he again became violent. June 21/93. Appetite very good; bowels normal. At times,
complains of numerous pains & aches; of "the noise bothering him & causing him to have these fits."
Behaves, sometimes, very well. Again, has "spells," when he uses bad language & fights often, without the
slightest provocation. Whenever attendants are having any trouble with a patient, he (C) is always on
their side & attacks the attendants. Noted for making a great many complaints. Manifests halluc-
-inations. On coming to this ward, his eye was discolored, ear bruised & there was a slight cut
" 23 in back of head. Had a fight with a fellow patient today. Was, today, transferred to C[4]. June 23/93
" 30 Had a fight & bit a fellow-patient's nose, today. June 30/93. Since last note, has been quite well-
-behaved. Makes no complaints. Talks quite sensibly. Personal habits clean.
July 3 July 3/93. Does not vary much in weight. Is in quite fair physical health. Appetite keeps good.
" 31 July 31/93. Since being on this ward, he has continued quite well-behaved; less inclined to be
irritable & ugly. Complained some of being sick & was given medicine, which, he says, did him
much good. He helps some on the ward. No fits have been reported, since the one above mentioned.
Aug 7 Aug 7/93. Has been losing slightly in weight, the past 3 months. — No known cause.

(carried to page 292)

Personal and Medical History of Robert Ebling

Whole No. 3160

Residence, Bridgewater, Rice County, Minnesota

Date Admission, 25th October 1892

Admitted by, Dr. Phelps Hour, 2.15 P.M.

How Sent, R. A. Stott, Jof P, Rice County

Sex, male

Age, 19

Civil Condition, Single

Children, none

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Not a church member

Habits, Good

Nativity, Wisconsin

Physicians Committing, D. McCook and G. W. Wood

Correspondents,

No. for Year, '92

Insane Relatives, — ; (Insanity not hereditary)

Cause Exciting, fever with brain Complication

Cause Predisposing, probably brain fever

Form, Mania - Chronic

Accompanying Bodily Disorder, Insomnia & Constipation

Suicidal or Not, Not

Date of this Attack, about a year ago

Duration, about a year?

No. of Attack, 1st

No. of Admissions,

Age First Attack, 18

Time of Leaving, Nov. 9. 93

Time in Hospital, 1y 14d.

Result, Recovered

EXAMINATION ON ADMISSION.

Evidly Dr Baker Nov 2/92 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, probably Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, } Will not talk

Recent Events, }

Special Subjects, }

PERCEPTIVITY:

Alert or Dull, } Will not talk

Correct or Illusive, }

REASONING POWER:

Ordinary Subjects, } Will not talk

Own Mental State, }

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

When questioned, seems on the point of answering, but scarcely makes an audible sound. Has a foolish smile when talked to.

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Seems

Exalted,

Depressed,

DELUSIONS: None detected

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Cannot be learned

ILLUSIONS:

CONVERSATION: Will not talk

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Robert Ebling

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 3/4 in. WEIGHT, 162 pounds NUTRITION, Fair; somewhat anaemic

WOUNDS OR ABNORMALITIES, (?) (?)

TONGUE, Tremors, markedly tremulous Coatings, Considerable; Foot marks Promptness Movement, somewhat sluggish

PUPILS, Equality, Equal Size, dilated

Response Light, None Accommodation, None

SIGHT, probably fair

HEARING, probably fair

COORDINATION, Arms,

Legs, Standing, one foot, fairly good. Standing, Eyes shut, sways slightly.

TREMORS, Hands, Tongue, markedly tremulous

Facial Muscles, General,

REFLEXES, Patellar, Equal; markedly exaggerated; 9-10 Dr. P's Scale

Other Reflexes,

ARTICULATION, Hesitating, Will not speak Slurred,

FACIAL EXPRESSION, dull

SENSIBILITY,

HEART, Seems fair.

LUNGS, Seem fairly Good.

D. M. Nov 10/92

EXAM. URINE, Color, yellow; reaction acid; Sp. gr. 1022; albumen none; Urea 1.8%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Yes Clean, Careless,

BOWELS, Normal, (?) Constipated, Irregular,

APPETITE, Good, fairly, probably but has ~~Medium~~, to be looked after in order to ~~Poor~~ get him to eat.

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Slow

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1892

This man was brought here by Mr. Stewart, Sheriff and brother-in-law Miller; the following is his history. Habits are good. Supposed cause of attack is fever with brain complication; form is chronic and depressed, accompanied by insomnia and constipation. First symptoms were manifested about a year ago when he was attacked with (brain) fever. This is first attack. Insanity is now manifested by general apathy. Not disposed to injure others; not suicidal; not filthy or destructive; no peculiarities of temper &c previously shown; not subject to any bodily disease; has not been restrained or confined. Has been treated by Dr. Phillips of Dundas for fever and head troubles the details of which we are not informed.

Oct 27 Oct 27/92. Has been perfectly quiet the past 2 nights, apparently resting and sleeping well. Was, today, visited by his brother-in-law. Was put upon B1. on admission.

" 29 Oct 29/92. Has daily wet his clothing, sitting quietly and passing his urine in his pants. Was, today, transferred to A4.

Nov 2 Nov 2/92. Wt 153 pds. Pulse 80. Nov 25/92. Has been perfectly quiet at night and has seemed to rest and sleep well, ever since admission. By day, has been quite uniform in conduct, sitting immovable in one place for hours together, unless disturbed by some one, looking in one direction, paying very little attention to what is going on around him. Says nothing to anyone. When approached and addressed, will look up with a silly smile upon his face, but will say not a word; lifting his arm hands slowly to take the proffered hand of his addressor. Gets and sits himself, quite often. Pupils are widely dilated and facial expression is vacant. There is little or no resistance. Has to be led to the dining-room. Has lost in flesh, and is rather pale. The case is a stubborn one, and seems now to be one of dementia.

Dec 5/28 Dec 5/92 Wt 143 pds. Pulse 60. Dec 28/92. Visited to day by his father. Smiled but said nothing.

" 29 Dec 29/92. Is about as usual. Does not say a word. Smiles rather sillily. Looks rather pale & has lost some in weight.

1893

Jan 3/10 Jan 3/93. Wt 149 pds. Pulse 60. Has lost steadily in weight. Jan 10/93. Visited to day by a friend.

" 24 Jan 24/93. Seemingly quiet at night. Said absolutely nothing until recently. Has talked a little, by spells; Has lost in weight. Has been visited several times by relatives.

Feb 3 Feb 3/93. Wt 142 pds. Pulse 68. Is still losing steadily in weight. Cause not apparent.

" 13 Feb 13/93. To day visited by a friend. —

" 25 Feb 25/93. Continues uniformly quiet & restful at night. By day, conduct & behavior are about as usual. Is silent & inactive — dull.

Mar 4/25 March 4/93. Wt 148 pds. Pulse 60. March 25/93. For some time past, has been troubled with obstinate constipation.

" 25 Eats well, but has to be helped. March 25/93. Patient had a passage from the bowels last night, the first

" 29 for some time. Discharge was black & thin. March 29/93. Is quiet at night. Inactive, physically & mentally, sitting around, idle and silent. Is rather pale & not very strong.

April 4 April 4/93. Wt 138 pds. Pulse 78. Loses in weight, but does not complain of feeling ill & there are no objective signs, except pallor & constipation. April 25/93. Obstinate constipation persists. Passages obtained

" 27 at rather long intervals. April 27/93. Lungs examined to day; results negative. Is decidedly anaemic.

" 29 Has put on medicine. April 29/93. Visited by father to day.

May 3/6 May 3/93. Wt 140 pds. Pulse 84. May 6/93. Took a chill this morning. Has put to bed.

1893

May 12 May 12/93. Remained in bed only part of a day, after last note. Patient is failing in health. Is pale. Eyes

" 18 White; cold extremities; does not seem to feel badly, however. May 18/93. To day was visited by a friend.

" 22 May 22/93. Apparently rests & sleeps well at night; but continues to fail in health; appetite continues poor.

" 24/27 bowels are persistently constipated. Never talks, even when spoken to. Eats well, however, if urged. —

" 31 May 24/93. Bowels, by aid of cathartics, (croton oil), moved freely to day. May 27/93. Visited by aunt and cousin to day. May 31/93. Appetite is not very good; still requires urging to get him to eat well. Bowels are persistently constipated; passages only obtained by aid of cathartics. Has some cough, at times. Is quiet & well-behaved. Depressed & melancholy, at times; talks none. Is dirty in habits, Especially at night. Health, not very good.

June 5/7 June 5/93. Wt 137½ pounds. June 17/93. Was visited by father & brother to day. Was very quiet. Scarcely

" 18 seemed to notice his father; but, his brother, some. June 18/93. They & some other friends again visited him to day.

" 21 June 21/93. Bowels moved, by aid of Croton oil, to day. —

July 5/31 July 5/93. Wt 148 pounds (a gain of 10½ pounds). Pulse 68. July 31/93. Patient seems a good deal better, in many ways. He now feeds himself & attends to his own personal wants & has become cleaner in his habits. Is very quiet; does not talk. Appears depressed, and dull.

Aug 1 Aug 1/93. His ward being about to undergo reconstruction, patient was, with several others, to day moved to

" 5/19 B4 East. Aug 5/93. Wt 151 pds. (Still gaining). Pulse 71. Aug 19/93. Appetite fair; bowels not very regular. Has not soiled his bed since coming in this ward & rarely wets it. No cough has been noticed. Is well-behaved. Talks very little & only when spoken to, but answers intelligently. Is cleanly in habits.

" 31 Aug 31/93. No change, further than patient now appears to take more interest in what is passing in around him & has begun to work a little inward. Seems improving steadily.

Sep 4/11 Sep 4/93. Wt 157 pds. (Is still gaining greatly in flesh). Pulse 76. Sep 11/93. Patient is in good bodily health. He appears also to be gaining in mental power; more interested in his surroundings.

" 27 Talks more than formerly & is, altogether, brighter during past 2 weeks. Sep 27/93. Health good;

" 30 mental condition still improving. Sept 30/93. Is steadily improving. —

Oct 3 Oct 3/93. Wt 168½ pds (a gain of 11½ pounds in past month). Pulse 88. —

" 5 Oct 5/93. Appetite good; bowels now regular; no cough noticed. Is quiet & well-behaved

" 12/31 Talks now much more freely & sensibly, than formerly. Is cleanly in his habits. —

Oct 12/93. Mental condition seems steadily to improve. Oct 31/93. Patient continues in good bodily health. His mental condition, also, is still progressing. Was, to day, visited by his father. —

Nov 7/14 Nov 7/93. Wt 171 pounds (a further gain). Pulse 86. Nov 14/93. Visited by Aunt & sister, to day.

" 8/9 Nov 8/93. Was, this afternoon, visited by his father. Nov 9/93. Appetite & general health good. No bodily ailment noted. Is well-behaved, quiet & inoffensive. Has become much more active of late. Attends dances quite regularly, also taking part in them. Talks sensibly & coherently, though a trifle sillily.

Left for home, accompanied by his father, to day.

Discharged

Personal and Medical History of James O'Brien

Whole No. 3161

Residence, 1218 – 4th Ave. N. Minneapolis

Date Admission, 27th October 1892

Admitted by, Dr. Phelps Hour, 7 P.M.

How Sent, J. R. Corrigan, Jo. P. Hennepin County

Sex, male

Age, 45

Civil Condition, Married

Children, 6

Age Youngest Child,

Occupation, Laborer

Degree Education,

Profession Religion, Methodist

Habits, Fair

Nativity, Tennessee (Negro; born in slavery)

Physicians Committing, E. J. Gibson, A. G. Fairbairn & W. A. Jones

Correspondents, Mrs James O'Brien, 1218 – 4th ave N.

No. for Year, 73.

Insane Relatives, unknown; heredity unknown

Cause Exciting, unknown

Cause Predisposing, unknown

Form, Mania – Acute

Accompanying Bodily Disorder, —

Suicidal or Not, Not

Date of this Attack, about 3 weeks ago

Duration, about 3 weeks

No. of Attack, 1st

No. of Admissions,

Age First Attack, 45

Time of Leaving, Dec. 28" 92.

Time in Hospital, 1 mo. 26 ds.

Result, Recovered

EXAMINATION ON ADMISSION.

Exd by Dr Baker; Nov 11/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, probably somewhat confused.

Quick or Sluggish, quite active

MEMORY:

Past Events, Probably Good

Recent Events, Seems good

Special Subjects,

PERCEPTIVITY: Ordinary observation rather limited; does not know what institution this is.

Alert or Dull, answers questions fairly well.—

Correct or Illusive, Does not realize our Condition.

REASONING POWER:

Ordinary Subjects,

Own Mental State, Impaired

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, at present, quite happy

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, of fears persecution – of being poisoned &c

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

~~Coherent~~ or Incoherent, at times especially

Voluble or Reticent, quite voluble

GENERAL DESCRIPTIVE REMARKS:

Drinks Some; Tells, at considerable length, the story of his troubles. That certain parties threatened to send a man to his house to make him crazy before morning – That this man visited his house 3 nights in succession, invoking the "Spirits" – that he heard voices in the crowd threatening to make a "corpse" of him; that he locked up the house & wandered away into the woods, with his wife & children, people following them; "led by a black cloud"; finally arrested and put in jail; that "he was poisoned"; "poison being put in his whiskey."

Personal and Medical History of James O'Brien

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 in WEIGHT, 152 pounds NUTRITION, Fairly Good

WOUNDS OR ABNORMALITIES, Scar on right hand; has bad hemorrhoids.

TONGUE, Tremors, Slight Coatings, Slight; tooth marked Promptness Movement, fairly prompt

PUPILS, Equality, Equal Size, about normal

Response Light, Slight Accommodation, Yes

SIGHT, Seems somewhat impaired

HEARING, Good

COORDINATION, Arms, Fingers to nose, Eyes shut, good.

Legs, Standing, one foot, quite well; Standing Eyes shut, some slight swaying.

TREMORS, Hands, Tongue, Slight

Facial Muscles, very slight of face General,

REFLEXES, Patellar, unequal; right big, slight response on re-inforcement; left absent even on reinforcement

Other Reflexes,

ARTICULATION, Hesitating, not Slurred, does not seem so pathologically

FACIAL EXPRESSION, Seems normal

SENSIBILITY,

HEART, 2

LUNGS, 2

EXAM. URINE, Color yellow; reaction acid; Sp. gr. 1032; albumen, none; urea 2.3%.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Fairly	Careless,
BOWELS, Normal,	Constipated,	Irregular, yes
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; claims good health;

Father or Pat. Relations, Father died; about 60.

Brothers or Sisters, 2 brothers; both living; good health; never in hospital: 3 sisters; all living; healthy.

Personal and Medical History of James O'Brien

1892

This man was brought here, with the following history, by Alex. Johnson, deputy Sheriff. Has been of fair habits; cause of attack unknown; form of attack is acute; first symptoms were manifested about 3 weeks ago. Imagines some one is trying to steal his daughter, watches &c; delusions, fear of poison; thinks some one put it in whiskey. This is first attack; insanity is now manifested by general incoherence, delusions of fear, suspicion; thinks imaginary objects and people trying to injure him. Not disposed to injure others; not suicidal; no filthy or destructive habits. Not subject to any bodily disease, has not been restrained or confined, nor under medical treatment.

Oct 28 On admission was put to bed 1 3. Oct 29/92. Was quiet last night, sleeping 7 hours. Am. Pulse 72
" 29 small & soft. Ate well. Oct 29/92. Was out of bed a couple of times last night, and restless and quite
" 30 noisy for 2 hours, sleeping 8 hours. Asked to have his head cut off." Am. Pulse 68. 2nd P88 Oct 30/92. Was
quiet, rested well, and slept 8 hours last night. 830 am. Pulse 76. Tem 99.8. Has "spells" of preaching
" 31 quite noisily. Oct 31/92. Was somewhat restless and quite noisy for an hours last night; sleep-
Nov 1 ing 7 hours. Nov 1/92. Was quiet and rested well, sleeping 8 hours, last night. 9 am. P72
T (ax) 99.1. Pm Pulse 68. R21. Has internal piles which are down in quite large buch and
are ulcerating and painful. Patient was ordered to bed. Attempt at reduction was so
painful that the patient resisted so strongly that piles were not reduced. Given morphine
" 2 to relieve the pain. Nov 2/92. Rested well and slept 8 hours last night. 930 Am. P 60
" 3 T (ax) 99. Height (in underclothing alone.) 141½ pds. Pulse 60. Nov 3/92. Was restless and slightly
" 4 noisy for an hour, sleeping 7 hours last night. 8 Am. Pulse 56. T 98.6. Nov 4/92. Was quiet
" 6 and slept well last night. Nov 6/92. Has been slightly restless & noisy the past two nights,
sleeping about 7 hours each. Has been kept in bed on account of his piles until to day when
" 24 he was permitted to get up. Nov 24/92. Was to day visited by his daughters.
" 26 Nov 26/92. Since the 6th inst; has been uniformly quiet, resting and sleeping well at-
night. Has also been up daily since the 6th inst. Has been clean in habits and fairly tidy in dress,
uniformly good-natured & well-behaved. For a time after coming here had "spells" of ex-
citement during which he talked noisily and preached &c. Has lately not had these spells
so markedly. Talks very freely indeed, even loquaciously; laughing & joking very good-
naturedly; his talk is occasionally upon religious subjects and he shows a strong tendency
towards religious ideas. Has, for some time, been working quite actively & very willingly.
Piles are better and general health has improved.

Dec 5 Dec 5/92. Wt 165½ pds. Pulse 84. Has gained 11½ pounds since admission.
" 23 Dec 23/92. Has continued uniformly quiet, resting and sleeping well at night. Has continued
up daily; of very good conduct and of good habits; Good natured & talkative, cheerful. Anxious
to go home, but willing to abide by the Dr's opinion. Is an excellent worker. Has grown more
stable & rational in mind. ——

Was to day, permitted to go home alone.

Discharged May 3rd '93

Personal and Medical History of George B. Tatge

(From page 164)

1894 May 8 Acute — Lately, has been reading a good deal, out aloud. Answers questions more than he used to do. At 4 Pm yesterday patient had a very bad "spell" - Had appeared not much changed up to 2 days of his death. Failed quite rapidly at the last, and died at 4.15 this morning. (see attached clinical records) —

Relatives were kept advised, from time to time, of patients condition. Brother came and removed the remains.

Died.

From 288.

Edward Robbins

Acute
Oct 31 Quiet and well-behaved. Melancholy. Reads some, but does not play games &c. Goes out
Nov 1/10 walking. Works on C2. Physical condition seems good. Nov 1 93 Wt 120½ P 70. Nov 10 93 Works
" 30 on C2 & exposed. Talks but little. Appetite good. Nov 30 93 No change. Dec 1 93 Wt 129½ P 72
Dec 31 93 No change. Jany 2. 94 Wt 128. P 72. Jany 31. 94 Same. Always quiet & well-behaved
1894 Feb 2/94 Wt 127½ pds Pulse 68. Feb 28/94. Always well-behaved; quiet; talks but little; seems much
depressed; reads some; goes out walking. Habits and neat and clean. Helps with work on C2 ward
Mar 2/31 March 2/94 Wt 129 pds. Pulse 92. March 31/94. No noticeable change; keeps about the same from month to month.
Apr 2/30 April 2/94. Wt 133 " " 90 - April 30/94. No special remark to make beyond what is noted for some months past.
May 1/31 May 1/94. Wt 135 " " 76. May 31/94. Does not seem to change any. Seems, however, less depressed.
June 1/30 June 1/94. Wt 135 " " 78 - June 30/94. No change - Behaves well - Talks but little - Works on C2 -
July 2/31 July 1/94 Wt 133½ pds at present writing. Bowels regular. Very quiet; talks but little. Walks out daily. -
Aug 31 During these 3 months, there has been no very noticeable change. He is in good physical condition (Wt 132½-133½ pds. P 90.
Sept 30 Wt 131½ pds. Pulse 88: Wt 131-133 pds. Pulse 88). He is very quiet; seems melancholy & depressed much of the time
Oct 31 inclined to keep by himself - never talks unless addressed. Reads considerably. Goes out walking. Works on C2 Hall.
Nov 1 Nov 1/94. Wt 134 pds. Pulse 76. Dec 1/94. Wt 133 pds. Pulse 76. Jany 1/95. Wt 133 pds. Pulse 74
Dec 1894 Jan 31/95. Appetite good; bowels regular & free; Talks but little; is depressed; makes no complaints; reads
Jany 31 some; clean & tidy; works on "Infirmary Ward". Feb. March & to April 30/95. During this
Feb 1 to quarter, no change noticeable. He has been quiet & well-behaved. Is melancholy & depress-
Apr 30 talks but very little. Reads some. Works on Infirmary. On the whole, no improvement to be noted.
May 1 During these 3 months, patients condition does not seem to have changed any. He is melancholy. Talks
June July 31 but little; makes no complaints. Clean & tidy in habits. Works on Infirmary ward. Seems contented here.
Aug 1 During this period, patient has remained about same, both mentally & physically. Melancholy. Seems
Sept Oct 31 Even talks. Eats & sleeps well. Remains on T.W., helping to take care of pt. Sleeps on B 2. Bowels normal.
Nov Dec Jan 31/96 Nov Dec & to Jany 31/96. Patient condition does not seem to change, from month to month.
He is quiet & melancholy - Helps on T.W., in dry time. (Transferred to B 3 Jany 1/96 in ac-
count of a general change in the wards). Feb 29/96. Patient remains as "Infirmary"
Feb 28 Continually during day. No change apparent in his condition. Mar 10/96. Keeps about as usual.
Mar 10 to 21 Mar 21/96. Not feeling well. went to bed. Transferred to T.W. ——

Carried to Transfer Book "A" page 261.

Personal and Medical History of George Bostwick

Whole No. 3162.

Residence, 14 E 26th St Minneapolis

Date Admission, 27th October 1892

Admitted by, Dr Phelps Hour, 7 P.M.

How Sent, J.K. Corrigan, Jo P., Hennepin County

Sex, male

Age, 36

Civil Condition, married

Children, 2

Age Youngest Child,

Occupation, Livery-man (laborer)

Degree Education,

Profession Religion, Not a church member

Habits, Good, as far as known

Nativity, Wisconsin

Physicians Committing, H. Fairbairn & W.A. Jones

Correspondents, Mrs Alice Bostwick

No. for Year, 74

Insane Relatives, unknown (as to heredity, unknown)

Cause Exciting, Some acute brain trouble, caused deafness of right ear

Cause Predisposing, probably bad injury, when abroad

Form, General Paresis

Accompanying Bodily Disorder, scar on forehead - some injury to testicle; Swollen testicle

Suicidal or Not, not

Date of this Attack, about 3 months ago.

Duration, Some 3 months

No. of Attack, 1st

No. of Admissions,

Age First Attack, 36 about

Time of Leaving, February 27th 1893

Time in Hospital, 4 months

Result, Died - General Paresis

EXAMINATION ON ADMISSION.

Exd by Dr Baker Nov 1/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Probably Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events,

Recent Events, Poor

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Does not know what place this is. Answers questions poorly & after much hesitation —

Correct or Illusive, he does not realize own condition —

REASONING POWER:

Ordinary Subjects, Poor

Own Mental State, Poor

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Incoordination of legs is quite marked. Cannot draw face either side, so he claims. Has difficulty in answering questions.

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Yes

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, None definite detected; denies fears of injury

Transitory or Not,

HALLUCINATIONS: (?)

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Incoherent

Voluble or Reticent, In answer to questions responds poorly & hesitatingly

Personal and Medical History of George Bostwick

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 141 pounds. NUTRITION, Not very Good; somewhat anaemic

WOUNDS OR ABNORMALITIES, Scar on left forehead; others (?); has a swollen testicle

TONGUE, Tremors, slight Coatings, slight; moist. Promptness Movement, fairly prompt

PUPILS, Equality, unequal, left larger; inequality seems present in all light Size, about normal

Response Light, Some Accommodation, yes

SIGHT, Seems impaired

HEARING, right ear deaf; left ear much impaired

COORDINATION, Arms, finger to nose, Eyes shut, fair

Legs, Standing, on foot, with difficulty; Standing Eyes shut, very unsteady.

TREMORS, Hands, not much of; Tongue, slight

Facial Muscles, General,

REFLEXES, Patellar, equal, much exaggerated; 9-10 Dr P's Scale

Other Reflexes,

ARTICULATION, Hesitating, very Slurred, Indistinct

FACIAL EXPRESSION, dull

SENSIBILITY,

HEART, Sounds normal

LUNGS, Probably Normal

EXAM. URINE, Color, Dark yellow; reaction acid; Sp-g. 1025; albumen none; urea 1.4%

Nov 11/92

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Yes	Clean,	Careless,
BOWELS, Normal, ?	Constipated,	Irregular,
APPETITE, Good, Voracious	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

A deputy Sheriff, Alex. Johnson, brought this patient here with the following history. Habits have been good, as far as known; Exciting cause, some acute brain trouble; caused deafness of right ear; has scar on forehead; some injury to testicle; swollen testicle; about 3 months ago, some acute brain trouble; Sleepless, swearing and has genual delusions. Thinks the devil is strained, character and disposition changed. Thinks he is mutilated. Eats voraciously. This is first attack. Insanity is now manifested by delusions of fear of injury, change in character; has been disposed to injure his wife and children, from passion. Is not suicidal. Spits around, not otherwise filthy or destructive; had injury to head when a boy; now has some localized symptoms; has been restrained or confined only at home. Has been under medical treatment; negative. His wife states that, when a boy, had an injury to his head and was trephined over left frontal region; bone said to have been replaced by silver [?]. ——

Oct 27 On admission, put on B^2. ——

" 28 Oct 28/92. Was quite restless, quite frequently out of bed, talking, and coughing some. Sleeping

" 29 but 3 hours. Am. Pulse 105. Tongue coated. Oct 29/92. Was restless & out of bed some, sleeping

" 30 5 hours last night. Am. Pulse 92. R 22. Te 99. Pm. Pulse 96. R 23. Te 99.8. Oct 30/92. Slightly noisy and restless last night, sleeping 4 hours. Am. " 80 " 22 " 99.2. Pm. P 90. R 23. Te 100.2

" 31 Oct 31/92. Restless, out of bed & quite noisy last night, sleeping 3 hours. Am. Pulse 88. R 22. Te 99.2

Pm. Pulse 74. R 21. Left testicle is much enlarged; not red nor painful.

Nov 1 Nov 1/92. Was very often out of bed last night, wanting to dress, striking at night-nurse when he interferes, being quite noisy, sleeping but 2 hours. Am. Pulse 82. R 20. Pm. Pulse 64. R 20. Te 99.6.

" 2 Nov 2/92. Again was somewhat noisy and restless, sleeping but 3 hours, last night. Am. Pulse 53. R 20. Te 98. Has been so dirty in habits that he was transferred from B^2 to B^3. Wt. 130½ pounds

" 3/4 Pulse 83. Nov 3/92. Am. Pulse 68. Nov 4/92. Am. Pulse 98. Nov 10/92. Has had some very hard

" 11 spells of Coughing, Especially at night. Am. Pulse 92. Te 99.4. Nov 11/92. Am. Pulse 78. Te 99.1

" 14 Looks pale. Was, for a time, somewhat cleanly; is again getting dirty. Nov 14/92. 6 am. Pulse 80

" 15/16 Te 98.8. Nov 15/92. Pulse 78. Te 99. Nov 16/92. 8 am. Pulse 88. Te 99.6.

" 17/18 Nov 17/92. 830 am. Pulse 76. Te 99.6. Nov 18/92 Am " 74 " 99.

" 19/20 Nov 19/92 830 am " 78 " 99.4. Nov 20/92 9 am " 80 " 99.6.

" 21/22 Nov 21/92. 930 am " 84 " 99.8. Nov 22/92. 930 am " 76 " 100.2

" 23/24 Nov 23/92. 930 am " 70. Nov 24/92 930 am. Pulse 96.

" 28 Nov 28/92. Has usually been somewhat restless & occasionally slightly noisy at night, sleeping from 4 to 8 hours. Has been up daily. Has been able to dress himself. Has been dirty at times & rather careless in dress. Does not seem to have the slightest conception of where he is or the nature of the institution. Wanders about the ward aimlessly; pays no attention to any one, unless he is first spoken to; then startles & hesitates, as one aroused. Has done no work. Talks in a quiet, feeble-minded way, limiting himself to commonplaces; claims that he feels well. Gait is rather unsteady. Does not read or write or otherwise occupy himself.

Dec 5/9 Dec 5/92. Wt 138½. Pulse 98. Dec 9/92. Has been growing apparently weaker; gait very ataxic, falling when walking about the hall; was transferred to C^2 & put to bed today.

" 14/16 Dec 14/92. Wt (in underclothes) 111 lbs. Dec 26/92. Wt (in underclothes) 107 lbs.

1892 Dec 27/92. Visited today by his wife & sister in law. Dec 31/92.

DETAILED HISTORY OF SICKNESS OF MR. George Bostwick
DIAGNOSIS. Feb 1 93

DATE:	PULSE: AM:	PULSE: PM:	RESP.: AM:	RESP.: PM:	TEMP.: AM:	TEMP.: PM:	OTHER DATA.
Feb 1	120		17		98.8		11 a m Bowels moved
							Bad cough growing
2	120	78	15		98.6	99.6	7.30 a m Bowels moved
		80		14		98.6	4.30 Bowels moved / 7 pm Bowels Moved
3	130	98	14		99.4	100.8	7.30 a m Bowels moved
		100		15		100.8	12 m Had a slight passage
4	120	90	15		99.4	100	
		96		15			
5	130	106	16		99.2	100.8	11 a m Had passage 1 pm Had passage
		110		16		100.8	7 pm Bowels moved
6	130	114	16		100		
		110		16		100.8	
7	130	92	15		99.5	100.8	11.30 a m Bowels moved
		106		15		100.8	At times has slight coughing spells
8	130	98	14		98.6		10 a m Bowels moved
		100		15		100	
9	130	118	18		100.8		Has coughing considerable of late
		102		18		99.8	
10	130	100	18		99.8	100	Appears to be growing weaker
11	130	112	18		100.6	100.4	Bowels moved.
		106		17		100.4	1 am Had passage
12	130	108	17		100.4	100.6	
		106		18		100.6	
13	130	120	19		100.2	101	Has frequent spells of coughing
		122		24		101	at times are very hard
14	130	122	22		101.4	101	Bowels moved a number of
		118		22		101	times during the day.
15	130	102	19		100.8	101	9.30 a m
		128		19		100.8	Coughing and restless last night.
16	130	108	20		100.8	101	Bowels moved a number
		108		21		101	of times during the day.
17	130	98	21		101	101	Coughing considerable. Bowels moved a number
		114		21		101	of times during the day. Has a spell of coughing
18	130	108	20		100.8	101	Bowels moved freely. Bad spells of coughing
		108		20		101	Bed sore very bad.
19	130	114	21		101	101	Appears most stupid. Then yesterday
		108		21		101	Bowels move freely. Bad spells of coughing
20	130	108	19		100	101	Bed sore about the same.
		111		22		101	Bowels moved freely. Stupid all day
21	130	118	20		100.6	102	9 a m Bowels moved freely
		100		20		102	Stupid - Some stupid - Little flush on cheeks
22	130	102	21		101	102	Feb 22 Bowels moved freely
		102		23		102	6.30 p m Respiration very hard & raising
23	130	118	21		102.4	103.4	Considerable phlegm.
		120		22		103.4	8 am Bowels moved.
24	130	126	20		102.6	104.8	Stupidness deep
		160		46		104.8	9 am Bowels moved (involuntary) Unconscious profusely & had a number of
25	130	132	26		102.4	102	Coughing spells during the day and appears to be failing.
		152		42		102	Stupid.
26	130	144	38		102.4	102	9 am Bowels Moved. 5 P.M. feet Cold Sweating
		176		50		104	Pustules distributed in breathing Rapidly
							Failing
27							12.40 A.M. Expired.

Dec 27/92. Visited today by his wife & sister in law. Dec 31/92. Since the 9th Inst. has been confined to bed

DETAILED HISTORY OF SICKNESS OF MR. Geo Bostwick
DIAGNOSIS. January 1893.

DATE	HOUR	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
Jan 1	7	100	92			99.6		8 AM Gave Bath
	5		80		14		99.2	
2	7	78		14		98.8		9.30 PM. Bowels moved
	5		96		14		98	
3	7	94		18		99.4		
	5		82		14		99	Diet. 1 egg 1 tab spn bovinine to 1 Pt milk, warm; with occasional intermediate glass of milk.
4	7	100		18		99.2		
	5		92		16		99.4	
5	7	120		19		100		Diet same, & AM. fur cold: apples & sand bag.
	5		108		18		99.4	
6	7	102		18		99.8		Diet same.
	5		104		20		99.4	
7	7	96		17		98.8		Appears weary, sleeps apparently growing weaker
	5		98		16		99	
8	7	96		15		99		
	5		102		18		99.4	9.30 P. Bowels moved
9	7	102		15		99.4		8.30 Bowels moved
	5		100		20		99	
10	7	96		17		98.4		7.30 Bostwicks Bowels moved slightly
	5		92		18		97	
11	7	90		15		99		6.30 PM. Bowels moved.
	5		94		18		99	
12	7	102		17		99.4		
	5		90		17		99.6	
13	7	90		15		98.6		
	5		90		15		98.4	
14	7	98		16		99		7.30 PM Bowels moved
	5		98		17		99	
15	7	102		15		99.4		6.30 PM Bowels moved freely
	5		94		15		99.4	
16	7	106		16		99.4		Bowels moved
	5		104		15		99.8	2 PM bowels moved freely
17	7	90		14		99.4		
	5		78		14		99.6	
18	7	102		16		99		Very restless
	6		94		16		99.6	
19	7	80		15		98		Bowels moved freely 7.30 AM
	5		80		15			
20	7	89		16		99.2		
	5		76		15		99	
21	7	96		15		99.4		Bowels moved
	5							
22	7	92		16		99.2		4 PM Bowels moved
	5		80		14		99	
23	7	94		15		99		
	5		100		15		100.2	
24	7	102		16		98.8		
	5		90		15		99	
25	7	108		16		100		
	5		84		15		99	
26	7	100		15		99.6		8.30 AM Bowels moved 12.30 PM Bowels moved
	5		88		16		99.2	
27	7	100		16		99		
	5		88		17		99.8	
28	7	102		16		99.8		Very quietly in bed - appearance dull - inactive in every way - Weight decreasing -
	5		86		15		99	
29	7	106		18		99		
	5		100		15		99.2	
30	7	110		16		99.4		Brighten up a trifle 8 30 AM Bowels moved
	5		102		16		99.8	
31	7	102		18		99.6		
	5		104		18		99.8	

...leeping
...sleeping
...92. Slightly
...P 90. R 23. Tm 100.2
...88. R 22. Tm 99.2

...g at night - nurse when
...20. Pm. Pulse 64. R 20. Tm 99.6.
..., last night. Am. Pulse 53.
...from B3 to B3. Wt. 130½ pounds
NOV 10/92. Has had some very hard
NOV 11/92. Am. Pulse 78. Tm 99.1
...dung dirty. NOV 14/92. 6 Am. Pulse 80
...m. Pulse 88. Tm 99.6.
...Am " 74 " 99.
...9 Am " 80 " 99.6.
...92. 930 Am " 78 " 100.2
...Pulse 96.

" 15/16 Nov 14/92.
" 17/18 Nov 17/92.
" 19/20 Nov 19/92.
" 21/22 Nov 21/92. 930 Am
" 23/24 Nov 23/92. 930 Am
" 28 Nov 28/92. Has usually ... occasionally slightly noisy at night, sleeping from 4 to 6 hours. Has been up daily. Has been a... himself. Has been dirty at times rather careless in dress. Does not seem to have the slightest concep... where he is or the nature of the institution. Wanders about the ward aimlessly; pays no attention to any one, unless he is first spoken to; then startles & hesitates, as one aroused. Has done no work. Talk in a quiet, feeble-minded way, limiting himself to com-mon places; claims that he feels well. Gait is rather unsteady. Does not read or write or otherwise occupy himself.

Dec 5/6 Dec 5/92. Wt 138 lbs. Pulse 98. Dec 9/92. Has been growing apparently weaker; gait very ataxic, falling when walking about the hall; was transferred to C2 & put to bed today.
" 19/20 Dec 19/92 Wt (in underclothes) 111 lbs. Dec 26/92. Wt (in underclothes) 107 lbs.

Dec 27/92. Visited today by his wife & sister in law. Dec 31/92. Since the 9th Inst, has been confined to bed

DETAILED HISTORY OF SICKNESS OF MR. Geo. Bostwick
DIAGNOSIS:

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA.
189-									
Dec 9			60	62		20	99	99.8	
" 10			70	60	20	18	99.4	98.8	
" 11			80	74	18	18	99.4	99.8	
" 12			70	72	18	18	99.2	99.4	
" 13			70		18		99.6		
" 14			74	72	18	18	99.4	99.8	
" 15			80	72	19	20	100.	100.4	Is constipated
" 16			78	80	18	20	98.6	100.8	
" 17			70	68	18	16	99.4	99.6	
" 18			86	90	20	16	100.4	100.4	
" 19			96	80	16	17	99.	100.2	
" 20			92	92	18	18	99.	100.2	
" 21			98	97	18		101.2	100.	
" 22			100	92	18	18	100.4	100.4	Is constipated - Refusing
" 23			94	96	18	18	99.6	100.4	
" 24			102	100	18	18	98.8	99.4	
" 25			104	100	18	18	99.2	98.8	
" 26			106	102	18	18	98.4	98.6	
" 27			95	104	18	18	98.8	100.	
" 28			78	92	18	18	98.4	99.2	
" 29			90	90	16	18	100.2	99.4	
" 30			102	94	20	18	98.6	99.4	
" 31			104		18		99.		

at various
03 p.m.
what
he seemed
ble to
. Inactive

each night.
D. (also
Pulse 112;
night,
1074.
ights.
9 PM P112
disturbed
Pulse 96;
se 120;
4 hours,
sick
m P 154

102;
Pulse 178.
Am.
ntally,
details

Dec 5/9

" 14/
" 15/15 2/9
" 17/18 Nov 17/9
" 19/20 Nov 19/92 8a.
" 21/22 Nov 21/92 930 Am
" 23/24 Nov 23/92 930 Am
" 28

. Sleeping
oom, Sleeping
30/92. Slightly
PM. P90. R23. T 100.2
Pulse 86. R 22. T 99.2

aking at night - nurse wh
8a. R20. PM. Pulse 64. R20. T 99.6.
showers, last night. Am. Pulse 53.
ferred from B2 to B3. Wt 130 1/2 pounds
18. Nov 10/92. Has had some very hard
99.9. Nov 11/92. Am. Pulse 78. T 99.1
ins getting dirty. Nov 14/92. 6 Am. Pulse 80
. 8 Am. Pulse 88. T 99.6.
/92 Am " 74 " 99.
20/92 9 Am " 80 " 99.6.
Nov 22/92. 930 Am " 75 " 100.2
= 930 Am. Pulse 96.

Nov 28/92. Has usually s what restless, & occasionally slightly noisy at night, sleeping from 4 to 8 hours. Has been up daily. Has been able to dress himself. Has been dirty at times rather careless in dress. Does not seem to have the slightest conception of where he is or of the nature of the institution. Wanders about the ward aimlessly; pays no attention to any one, unless he is first spoken to; then startles & hesitates, as one aroused. Has done no work. Talks in a quiet, feeble-minded way, limiting himself to commonplaces; claims that he feels well. Gait is rather unsteady. Does not read or write or otherwise occupy himself.

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" 19/20 Dec 19/92 Wt (in underclothes) 111 lbs. Dec 26/92. Wt (in underclothes) 107 lbs.

laced

...w. Sleeping
...sound, sleeping
...30/92. Slightly
...Rm. P90. R23. Tm 100.2
...ulse 85. R 22. Tm 99.2

...king at night - nurse wha
...r. R 20. Rm. Pulse 64. R 20. Tm 99.6.
...ours, last night. Am. Pulse 53.
...ved from B[2] to B[3]. Wt. 130½ pounds
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Getting dirty. Nov 14/92. 6 Am. Pulse 60
Am. Pulse 88. Tm 99.6.
Am " 74 " 99.
12 9 Am " 80 " 99.6
2/92. 930 Am " 78 " 100.2
...m. Pulse 96.

" 17/
" 17/18
" 19/20 Nov 19/92
" 21/22 Nov 21/92. 9a
" 23/24 Nov 23/92. 930 Am
" 28 Nov 28/92. Has remain
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ward aimlessly; pays no attention to any one, unless he is first spoken to; then startles & hesitates, as one aroused. Has done no work. Talks in a quiet, feeble-minded way, limiting himself to commonplaces; claims that he feels well. Gait is rather unsteady. Does not read or write or otherwise occupy himself.

Dec 27/92. Visited today by his wife & sister in law. Dec 31/92. Since the 9th inst, has been confined to bed day & night. Has been, nightly, more or less restless, getting out of bed & throwing bedding around the room; sleeping from 1 to 6 ½ hours. By day, stays in bed usually only when watched. Is confused mentally & aimless and helpless in manner. Has lost very much in weight, although an effort has been made to feed him well & on nourishing diet. Has lost in strength, circulation becoming more rapid and remarkably feeble. This probably he will not last long. (See attached clinical record.)
1893 Jan 3/94 Jan 3/93. Wt 105 pounds. Jan 10/93. Wt 105 pds. Has been dull. Pulse rapid & weak, at various
" 17 times during the past 10 days and seemed to be failing quite rapidly. Jan 17/93 Wt 103 pds.
" 24/25 Jan 24/93. Wt 100½ lbs. Jan 25/93. Has been decidedly less restless and has slept better at night during the last 3 weeks & a half. Keeps his bed constantly. Too feeble to stand. Has seemed to be on the point of dissolution at various times, but rallies each time. Scarcely able to talk at all. Mind steadily failing. Jan 28/93. Am. Lies quietly in bed; appearance dull. Inactive
" 30 in every way. Weight decreasing. Jan 30/93. Am. Seems a trifle brighter.
Feb 1/2 Feb 1/93. Wt (in underclothes) 98 pds (loss 2½ pds). Feb 9/93. Wt (in underclothing) 98 pds.
" 16 Feb 16/93. Since 25th ult, has been more or less restless at night, sleeping from 4 to 6 or 7 hours each night. Pulse, taken at regular intervals last night, ranged from 106 to 124. Wt today (in underclothing) 82½ pds. (a loss of 15½ pds). Feb 17/93. Slept but 3 hours last night. At 9 Pm. Pulse 108: at 11 Pm. Pulse 104: at 2 Am Pulse 112;
" 18 at 4 Am. Pulse 104. Feb 18/93. Restless 3 hours, sleeping 4 hours, last night. Pulse, during the night,
" 19 104 to 80 - Coughed some. Feb 19/93. Restless for 2 hours, sleeping 4 hours, last night. Pulse 110 to 104.
" 20 Passed, however, a fairly good night. Feb 20/93. Slept 4 hours, being restless for 3 hours, last night.
" 21 Pulse 110 to 102, during night. Feb 21/93. Restless for 2 hours, sleeping 5 hours, last night. At 9 Pm P 112.
" 22 at 11 Pm. Pulse 114. At 2 Am. Pulse 118. at 4 Am. Pulse 102. Feb 22/93. Last night, was restless & disturbed for 3 hours, sleeping 4 hours. At 9 Pm Pulse 106; at 11 Pm. Pulse 110; at 2 Am Pulse 116; at 4 Am Pulse 96;
" 23 Feb 23/93. Restless for 5 hours, sleeping but 2 hours, last night. at 9 Pm Pulse 120; at 11 Pm Pulse 120;
" 24 at 2 Am. Pulse 122; at 4 Am Pulse 122; Feb 24/93. Rested fairly well, though sleeping but 4 hours, last night. Pulse, taken at regular intervals, ranged from 120 to 128 during the night. Is too sick
" 25 today to permit of being weighed. Feb 25/93. Restless, dull & stupid, all last night. At 9 Pm P 134
at 11 Pm. Pulse 138; at 2 Am Pulse 151; at 4 Am Pulse 144; at 5 Am, seemed some brighter.
" 26 Feb 26/93 very dull, stupid restless; slept none last night. At 9 Pm Pulse 161; at 11 Pm Pulse 162;
" 27 at 2 Am Pulse 158; at 4 Am Pulse 158; Feb 27/93. slept none at all last night: at 9 Pm Pulse 178.
at 10 Pm Pulse 182. R 62. at 11 Pm Pulse could not be feel. Sank rapidly & died at 12 45 Am.

Patient kept his bed daily, growing more & more feeble, physically & mentally, until the end came today. For several days there has been quite decided fever. For details of condition see attached clinical records. Remains were removed by friends.

Died

Personal and Medical History of Martin Madden
(alias Martin Mead)

Whole No. 3164
Residence, Hasnone
Date Admission, 28th October 1894.
Admitted by, Dr Phelps Hour, 7 Pm.
How Sent, Jno B Olivier Jr P., Ramsey County
Sex, male
Age, 46 years
Civil Condition, do not know
Children, do not know
Age Youngest Child,
Occupation, Laborer
Degree Education,
Profession Religion, Catholic
Habits, Drinks some
Nativity, Ireland
Physicians Committing, J.F. Baker and Geo J Hanley
Correspondents,

No. for Year, 76
Insane Relatives, Mother ; (Insanity hereditary)
Cause Exciting, unknown
Cause Predisposing, heredity probably
Form, Mania - Chronic
Accompanying Bodily Disorder, No
Suicidal or Not, not
Date of this Attack, not stated
Duration, has been twice in Insane asylums
No. of Attack, 3rd (?)
No. of Admissions, 2nd
Age First Attack, about 30
Time of Leaving, March 17" 94
Time in Hospital, 14 - 4 mo 19 d.
Result, Improved.

EXAMINATION ON ADMISSION.
MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish,
MEMORY:
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

Has not spoken to the Examiner during stay

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Martin Madden
(alias Martin Mead)

EXAMINATION ON ADMISSION—(Continued.)
PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION,
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Size,
Response Light, Accommodation,
SIGHT,
HEARING,
COORDINATION, Arms,
Legs,
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE, Color yellow; reaction acid; Sp gr. 1024; albumen, none; urea 1%

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Martin Madden
(alias Martin Mead)

1892

This man was brought here by Deputy Sheriff Courtean (in wristlets and anklets), with the following history; drinks some; insanity is hereditary; do not know cause of this attack; form is depressed; no accompanying bodily disorder; first symptoms manifested by melancholia, with periods of excitation; not 1st attack, probably 3rd; has been twice in Insane asylums; insanity is now manifested in religious subjects; has shown a disposition to injure others from sudden passion. Is not suicidal; not filthy or destructive; as to peculiarities, previously, or as to bodily disease, do not know; has been restrained & confined, as above, in asylums; and has also been under medical treatment there. About noon yesterday, started in suddenly to hit, kick &c.

Note. This patient was at this Hospital before, (under the name of Martin Mead) from May 23d '90 to May 4th '91, when he was sent to Brooklyn, NY. During his stay in this Hospital, was continually complaining of mind; was very violent at times, and showing outbursts of rage, attacking the attendants and fellow-patients viciously; unruly; frequently stirring up trouble among patients. (See Vol 14. page 62. No. 1102. for previous history.)

Oct 29 — Oct 29/92. On admission yesterday afternoon, put on C. 3 & went to bed. Was quiet, rested well & slept 8 hours last night. Remains in bed today. Complains of head-ache & pains; tongue is coated & is constipated.
" 30 — Pulse 60. Oct 30/92. Rested & slept well last night. Is up today. Bowels have not yet moved.
Nov 1 — Nov 1/92. Has been quiet, resting and sleeping well, the past 2 nights. Has general bad feeling & has Chronic Constipation. Nov 2/92. Ht 148 pds. Pulse 66. Nov 19/92. Has been uniformly quiet, resting
" 2/9 " 30 and sleeping well at night, since admission. Has today transferred to B3. Nov 30/92. Continues to rest & sleep well at night. Has been up & around daily, dressing & caring for himself. Soon after admission, began working with the painters & continued to do so until recently. At first, complained of general physical ill-feeling, as he formerly was wont to do. Has lately, however, claimed that he is feeling quite well. Has talked freely, as usual, fairly coherent; does not seem to feel very badly that he is returned here. Had some slight trouble one day in the dining-room with an attendant & made his complaints in his old-time irritable, surly way; complaining of not having enough time to eat and also of the scant supply of butter. Says that he has almost no remembrance of what occurred just before his arrest & being brought back here.
Dec 5/31 — Dec 5/92. Ht 150 pds. Pulse 76. Dec 31/92. Uniformly quiet, resting and sleeping well at night. Has very little today to the Drs & officers. Has parole & is out doors a good deal of the time. Is in rather better physical health.
1893 Jan 3/25 — Jan 3/93. Ht 153 pds. Pulse 88. Jan 25/93. Has remained in on the ward for several days; has resumed his fault finding with several things. Salt was spoiled so that they did not have any effect — his room-mate wants the window open when he wants it closed &c. Has been complaining the last few days of general ill-feeling, more especially last evening & today —
Feb 3 — Feb 3/93. Ht 151½ pds. Pulse 96. Has been losing slightly in weight the past 2 months, without apparent cause.
" 25 — Feb 25/93. Still has a grumbling, complaining way about him. Has parole & walks about occasionally outside. Does no work. Complains of his knee & leg still causing him pain. In other respects, continues about the same.
Mar 3/30 — March 2/93. Ht 149½ pds. Pulse 84. March 3/93. Appeared to try to pick a quarrel with an attendant today.
" 30 — March 30/93. Has parole & spends the greater part of the time out of doors.

Personal and Medical History of Martin Madden
(alias Martin Mead)

1893

Apr 1 — April 1/93. Remained in-doors today & in his room, lying on his bed. Feels tired all over & sick, and has
" 4 — some gastro-intestinal disturbance. Put on salol. April 4/93. Ht 148 pds. Pulse 72.
" 28 — April 28/93. Lay around his room a few days after the 1st inst when he got about as well as usual and went out again. Recently showed his manic-atory spirit & irritable temper in complaining of his roommate who was slightly restless, declaring he would not sleep with him again.
May 3 — May 3/93. Ht 144½ pds. Pulse 74.
" 8 — May 8/93. No change to note. Still keeps up his grumbling, faultfinding ways. Did not come in for supper this evening, and it was found he had eloped.
Oct 7 — Oct 7/93. Patient was returned this evening, from St Paul. Had been in workhouse there; required guarding; showed an enfeebled mental condition; was unable to take care of himself; heard voices at night; showed delusions of persecution; &c. Had been without food for a day, until taken in charge. On admission, pulse 74. T 98. Bodily condition clean: no injuries or peculiarities noted. Oct 8/93. Slept 8 hours last night & was quiet. Is now on B3. Appetite good; bowels
" 8 — seem regular. AM. Pulse 74. T 98.8. Is quietly behaved. Walks about the hall. Talks pleasantly with
" 9 — his fellow-patients. PM. " 72 " 98. Oct 9/93. Was very quiet last night, sleeping 8 hours &c.
" 10 — AM. Pulse 74. T 99. Talks a little. Appetite continues good: bowels normal. Oct 10/93. Slept 8 hours last night. Was quiet. Is quiet & well behaved by day. Pulse & temperature about normal.
" 11/14 — Oct 11/93. Again rested & slept well, last night. Oct 12/93. Slept only 4 hours last night, but was quiet, when awake. Talks about all the time. Not violent today. He became involved in a quarrel
" 15 — with the Attendants. Declined & refused to get out of bed, this morning. Oct 15/93. Has been sleeping well, the past 3 nights. Appetite good. Is cranky & again getting into his old grumbling, faultfinding way, so common in the past. Nothing seems to please him. Is on medicine. In quite fair health.
" 22 — Oct 22/93. During this second week, there is little or no change to note. Patient apparently rests & sleeps well at night. Appetite continues good & bowels regular. Pulse has been normal. He reads some; talks freely; goes out walking. Disagreeable in manner; overbearing & indifferent, always trying to find something to find fault with; grumbling; seems to be troubled with some
" 30 — Eruption of the Skin. Habits are clean. Oct 30/93. Is still quite cranky. Usually sits away in a room, by himself. Talks freely but mostly in a grumbling, faultfinding way. Health good.
Nov 1 — Nov 1/93. Ht 151½ pds. (Has gained some, in flesh, since coming back). Pulse 74.
" 30 — Nov 30/93. Sits in his room, most of the time. Is cranky, overbearing and faultfinding. Does just as he pleases & requires to be humored a good deal. Appetite good. Health good.
Dec 4/28 — Dec 4/93. Ht 158 pds. Pulse 72. Dec 28/93. Refused to go to bed this evening. Supervision kept for.
" 29 — Dec 29/93. Is very mean & disagreeable in manner, this morning. Was transferred to B3.
" 31 — Dec 31/93. Appetite is not very good, at present. Bowels are regular. Still sits in his room, most
1894 — of the time, writing. Mean & disagreeable in disposition. Almost impossible to please him.
Jan 2 — Jan 2/94. Ht 146 pds (quite a loss in flesh during the past month, without known cause, as he does not complain of any ill feeling). Pulse 84. Jan 31/94. Is very well behaved at
" 31 — present and does not cause any trouble. Has been painting the bed room floors, of late & is willing to do anything asked of him. Habits are neat and clean.
Feb 1/24 — Feb 1/94. Ht 144½ pds. Pulse 76. Feb 24/94. Appetite rather poor. Bowels apparently regular.

(carried to page 3014)

Personal and Medical History of Joseph Winkelmann

Whole No. 3167

Residence, 130 West 6th St. St Paul, Minn

Date Admission, 2nd November 189

Admitted by, Dr. Phelps Hour, 7 P.

How Sent, John B. Olivier Jeff. C

Sex, male

Age, 43 years

Civil Condition, married

Children, Two

Age Youngest Child,

Occupation, Dry goods clerk

Degree Education,

Profession Religion, Is a church mem

Habits, always temperate & of good

Nativity, St Louis, Mo.

Physicians Committing, A.W. Dunning and James C. Mackey

Correspondents, wife's address, 130 W 6th St St Paul Minn



No. for Year, 79

Relatives, — (Insanity not hereditary)

Exciting, Cold & business worry

Predisposing,

General Paresis

Coexisting Bodily Disorder, None

Alcohol or Not, Not

This Attack, March 17th 1891

, about 1 year & 8 mo.

Attack, 1st

Admissions,

Attack, about 41

Leaving, 13th November 1894

Hospital, 2 years & 11 Days

Result, Died; exhaustion in general paresis

EXAMINATION ON ADMISSION.

Exd by Dr Baker Nov 11/94

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, somewhat sluggish

MEMORY:

Past Events,

Recent Events, seems impaired; "is short"

Special Subjects,

PERCEPTIVITY:

Alert or Dull, medium

Correct or Illusive, fairly correct on ordinary subjects

REASONING POWER:

Ordinary Subjects, } Thinking is hard work for him, he says.

Own Mental State, }

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has had sores on his penis. Has had feeling of numbness or deadness in right knee.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, and Emotional

DELUSIONS:

Systematized or Not,

Special Subjects, None detected

Transitory or Not,

HALLUCINATIONS: None detected

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, and coherent

Voluble or Reticent, seems quite free

Personal and Medical History of Joseph Winkelmann

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2 3/4 in usually 139 lbs. WEIGHT, 128 lbs (with overcoat) NUTRITION, below normal

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, - quite tremulous - Coatings, Considerable; somewhat Promptness Movement, slightly sluggish & irreg. (marked)

PUPILS, Equality, Equal Size, about normal

Response Light, Some Accommodation, yes

SIGHT, fairly good; right pupil slightly defective

HEARING, Good

COORDINATION, Arms, fingers nose, Eyes Shut, Considerable inaccuracy-

Legs, Standing on foot, slightly unsteady. Standing Eyes Shut, slight swaying } hesitation on turning turning quickly, slight

TREMORS, Hands, slight Tongue, quite tremulous

Facial Muscles, Some General,

REFLEXES, Patellar, unequal; left slightly diminished 4 or 5 - Right absent

Other Reflexes,

ARTICULATION, Hesitating, Considerable Slurred, markedly -

FACIAL EXPRESSION, dull

SENSIBILITY, Sensation of touch, seems normal

HEART, Sounds seem clear & strong

LUNGS, Normal

Dun Nov 11/94 EXAM. URINE, Color yellow; reaction, acid; Sp. gr. 1012; albumen none; urea - 5%

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, yes	Careless,
BOWELS, Normal, probably	Constipated,	Irregular,
APPETITE, Good, very	Medium,	Poor,
SLEEP, Good,	Poor, less than normal	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, See history ONSET GRADUAL OR SUDDEN, See history

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother dead; of typhoid fever

Father or Pat. Relations, Father died of typhoid fever right after war

Brothers or Sisters, 2 brothers living; claims healthy; 1 sister living; claims very healthy.

Personal and Medical History of Joseph Winkelmann

1892 This man was brought here by deputy Sheriff Courteau, with the following history. Has been always temperate and of good moral habits; supposed cause of attack is cold and business worry. Form is chronic; no accompanying bodily disorder; first symptoms of disease were manifested about 17th March 1891, by agitation, intense excitement, an apparent "faint spell", thickness of speech. This is first attack. Insanity is now manifested in religion, by uncertainty of thought & expression, occasional incoherence. Not disposed to injure others; not suicidal; no filthy or destructive habits; no peculiarities to be shown before symptoms of insanity appeared. No restraint or confinement has been employed. Under medical treatment, none regularly. Exd by Dr Phelps. Got his sickness 2 years ago, right behind Counter; was waiting on ladies; had a "spell". (rambles off from subject on irrelevant topics). Had a "spell"; couldn't speak; beckoned to some one. A few weeks before, had a "spell"; couldn't seem to catch ahold of boxes. Hand would go right by the handle. Dropped pencil & couldn't seem to pick it up. Had these "spells" up to March — upto August, but not many during summer — have since August.

Nov 2 Nov 2/92. On admission was put on C2. Quiet, neatly dressed, converses willingly.

" 7 Nov 7/92. Has been somewhat restless each night, since admission, sleeping 6 to 7 hours. Has been up daily, dressing and caring for himself; clean and tidy. Has talked freely with nurses, and patients. Has been emotional and sympathetic. Had a spell this morning, in which he claimed that he could not rise from his seat; and did so, and stood with apparent difficulty. Was assisted to his bed. Was quite Emotional, moaning and crying. Speech thick & indistinct. Attempt to write his name resulted in an illegible scrawl. No definite paralysis or convulsion.

" 9 Got up at about the end of 2 hours & remained up the rest of the day. Nov 9/92. Has a "spell" now (in Drs presence). He says "can't rise" but does so when asked to do so, but rather slowly.

" 20 Nov 20/92. Fecal passage quite hard & stained with blood but evidently from hemorrhoids.

" 21/23 Nov 21/92. Passages fairly free but contain considerable blood. Nov 23/92. Is quite often restless at night, sometimes somewhat noisy, sleeping from 4 to 7 or 8 hours per night. Pulse, Respiration and temperature have been taken twice daily up to the present. There has been a slight irregular rise of temperature and some acceleration of pulse. (See chart).

Dec 5 Dec 5/92. Wt 119½ pds. Pulse 86. Dec 6/92. Was transferred to B1 on 23d ulto. Complains quite often of restlessness & sleeplessness at night. Is given occasional hypnotics. Is also troubled some with (his) constipation and hemorrhage from his piles (bowels). Is up & around daily. Is clean, tidy & well-behaved. Dresses & takes care of his own person. Writes very frequently to his wife. Goes out walking. Talks a good deal, beginning conversation; speech markedly hesitating & slurred. Memory very poor, patient starting to say things & forgetting what he was going to say. Letter are incoherent and show many omissions in wrds. Hand-writing irregular. Is emotional and inclined to be hypochondriacal. Knows where his home is and wishes to go home. Takes food regularly & in fair quantities. Has been

" 9 visited once by his wife. Dec 9/92. Has complained a good deal of various ill-feelings and of being restless at night & of being lonesome on B1 and was today transferred to C2.

1893 Jan 3/4 Jan 3/93. Wt 134 lbs. Pulse 100. Jan 6/93. Usually claims that he is feeling good, at times is very much depressed and "feels bad"; being hypochondriacal in his complaints. Shows much marked hesitancy of speech, shortness of memory & confusion of mind.

1893

DETAILED HISTORY OF SICKNESS OF MR. Joseph Winkelmann

DIAGNOSIS.

NAME. Jos. Winkelman

DATE, 1893	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	134	100	4½	
Feby 3d	131	—		3
Mar 3d	132½	96	1½	
Apl 4th	135	83	2½	
May 3d	138	94	3	
June 5th	143	64	5	
July 5th	139½	64		3½
Aug. 5th	138	89		1½
Sept 4th	136	90		2
Oct 3d	136	100	—	

OTHER DATA

admitted Nov. 2nd 730 PM by Con Horse
Converses freely with Nurses and patients on usual
Some what emotional and sympathetic for others
ls and occupations in following the rules or customs
ntancy of speech. interested in topics of the day.
nmercial.
Bowels moved 7.30. of fæcal fæces
Complains much of room heat. is afraid of fire
Bowels moved 6.30 am very hard & full better than before
ne time past. had spell this morning, commenced
s difficulty very emotional tried to write
ed but writes his own name removed in bed two
rs of rest of day.
ages this morning having one of his spells record taken
ring this time am
ightier and in better spirits
Dumpish & Balky
Very busy asks foolish questions
els moved 7.30 but somewhat dossive
ently going to have a spell.
PM. Bowels moved
M. Bowels moved. (freely)
ite good.
wels moved, 2 P.M.
e moved 7 PM. very hard and containing blood
M. Bowels moved (partly blood).

Nov 2, 93 Was struck by Hans Hoff with his open hand & knocked down. Skin on right cheek was slightly broken
" 30. Appetite good Bowels reg: Talk very little pronouncing his words with difficulty. Mental power
nearly gone No complaints Habits tidy 3 days duty during month. Dec 2 93 47, 34th P 74
Dec 23. 93 Was cut on forehead, which though slightly - bled considerably. Supposed Hans Hoff cut him
ords & p 284.

1892 This man was brought here by deputy Sheriff Cou
been always temperate and of good moral habits; Suppo
form is chronic; no accompanying bodily disorder
abmt 17th March 1891, by exaltation, intense
This is first attack. Insanity is now in
occasional incoherence. Not disposed to
peculiarities to show before dep
been employed. Under medical
ago, right behind Commte
to prics). Had a "spell"
to catch ahold of bars.
Had these "spells" up to
Nov 2 Nov 2/92. On admission w
" 7 Nov 7/92. Has been somewhat
up daily, dressing and caring
patients. Has been emotional an
that he cried not rise from his sea
assisted to his bed. Was quite Emotiona
Attempt to write his name resulted in
" 9 Got up at about the end of 2 hours + remaine
now (in Drs' presence). He says "Can't rise" but does do when asked to do so, but rather slowly.
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" 21/23 Nov 21/92. Passages fairly free but contain considerable blood. Nov 23/92. Is quite often
restless at night, sometimes somewhat noisy, sleeping from 4 to 7 or 8 hours per night. Pulse,
Respiration and temperature have been taken twice daily up to the present. There has been
a slight irregular rise of temperature and some acceleration of pulse. (See chart).
Dec 5 Dec 5/92. Wt 124½ pds. Pulse 86. Dec 6/92. Was transferred to B1 on 23d ult. Complains
quite often of restlessness + sleeplessness at night. Is given occasional hypnotics. Is also
troubled some with (his) constipation and hemorrhage from his piles (bowels). Is up + around
daily. Is clean, tidy + well-behaved. Dresses + takes care of his own person. Writes very
frequently to his wife. Goes out walking. Talks a good deal, beginning conversation;
speech markedly hesitating + slurred. Memory very poor, patient starting to say things +
forgetting what he was going to say. Letters are incoherent and show many omissions in words.
Hand-writing irregular. Is emotional and inclined to be hypochondriacal. Knows
where he is and is anxious to go home. Takes food regularly + in fair quantities. Has been
" 9 visited once by his wife. Dec 9/92. Has complained a good deal of various ill-feelings
and of being restless at night + of being lonesome on B1 and was today transferred to C2.
1893 Jan 3/93 Jan 3/93. Wt 134 pds. Pulse 100. Jan 4/93. Usually claims that he is feeling good. At times
Jan 4 is very much depressed and "feels bad"; being hypochondriacal in his Complaints.
Shows much marked hesitancy of speech, shortness of memory + confusion of mind.

1893

DETAILED HISTORY OF SICKNESS OF MR. Joseph Winkelmann
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
									admitted Nov. 2nd 730 PM by Mr Howe
3rd		6		84		18		98.4	Converses freely with Nurses and patients on ball
4	7		88		18		98.8		Some what emotional and sympathetic for others
		6		72		18		97.4	ails and accompanies in following the rules or customs
5	7		82		17		98.6		Hesitancy of speech intensified in Tones of the day.
		6		82		17		100	Remunerit.
6	7		90		18		100.4		Bowels moved 730. offensive fæces
		5		76		17		98.8	Complains much of room mate. is afraid of him
7	7		86		18		98.8		Bowels moved 630 am Says he feels better than before
		5		74		18		98.8	some time past. had spell this morning, spoke
									with difficulty very emotional tried to write
									could not write his own name removed to bed two
8	7		90		20		100.2		hours of rest of day.
		5		72		18		98.6	
9	7		102		18		98.8		Says he is having one of his spells recollects taken
10	7		86		20		100.2		during this time out
		5		78		18		100	Brighter and in better spirits
11	7		86		18		100		Dumpish & Sulkey
		5		70		18		98.6	
12	7		88		19		100		Very busy asks foolish questions
		5		88			100.4		
13	7		78				100		
		5		82			100.4		
14	7		88				100		
		5		80			99.8		
15	7		84				99.6		
		5		80			99.6		
16	7		88				99.2		Bowels moved 730 but some what costive
		5		88			99.4		
17	7		88				99.4		Apparently going to have a spell.
		5		74			98.6		2 PM. Bowels moved
18	7		92				98.4		9 AM. Bowels moved. (freely)
		5		80			98.6		
19	7		92				99.4		Appetite good.
		5		80			98.2		Bowels moved, 2 P.M.
20	7		98				100		
		6		84			98.8		Bowels moved 7 PM very hard and containing blood
21	7		98				98.8		
		5		96			100		2 PM. Bowels moved (partly blood)
22	7		92				100		

Nov 2 '93 Was struck by Hans Hoff with his open hand + knocked down. Skin on right cheek was slightly broken
'30. Appetite good. Bowels reg: Talk very little pronouncing his words with difficulty. Mental power
greatly gone. No complaints. Habit tidy 3 days dirty during month. Dec 2 93 Wt 134 lb P 74
Dec 23. 93 Was cut on forehead, which though slightly - bled considerably. Supposed Hans Hoff cut him
on b p 284.

1894

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been ab
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troubled
daily. Is clean, tra
frequently to his wife. Spee
speech markedly hesitating & slurred.
forgetting what he was going to say. Letters on
Hand-writing irregular. Is emotional and sickne
where he is and is anxious to go home. Takes food regularly & in fair quantities. Has been
" 9 visited once by his wife. Dec 9/92. Has complained a good deal of various ill-feelings
and of being restless at night & of being lonesome on B'. and was today transferred to C'.
1893
Jan 3/14 Jan 3/93. Wt 134 lbs. Pulse 100. Jan 6/93. Usually claims that he is "feeling good", at times
is very much depressed and "feels bad"; being hypochondriacal in his complaints.
Shows much marked hesitancy of speech, shortness of memory & confusion of mind.

1893
Loses himself on the ward at times. Continues in fair physical health.
Jan 5/14 Jan 15/93. Is constipated; given laxative Jan 24/93. For the past 3 weeks, has been restless, on the ave-
rage, a couple of hours each night sleeping, however, from 6 to 7 hours; on one night was very restless,
getting out of bed often, sleeping only 3 hours; last night has restless for 8 hours, & somewhat noisy,
" 30/31 sleeping only one hour. Jan 30/93. Has abscess on his finger; probably from a burn. Jan 31/93. For
the past week, with the exception of last night, Has been sleeping quite well at night. By day, is
Feb 4 quiet & fairly well-behaved. Works some on the ward. In other respects continues about as described
" 27 in note of January 4th ult. Physical health fairly good. Feb 27/93. There is a slow progression
of dementia. Has vague delusions.
Mar 15 Mar 15/93. Quite often slightly restless at night. Sits rather stupidly in one place the greater part
" 17 of the day. Growing feebler mentally. Mar 17/93. Visited yesterday & today by his wife.
Apr 6 April 6/93. Quite often more or less restless at night. Is never noisy. Habits have grown more & more
" 9 slouchy & careless & also dirty. Was recently moved to C'. April 9/93. Is constipated.
" 22 April 22/93. Lay awake last night, chewing, Is said, soap, probably producing only a flow of saliva. Kept
spitting on the floor; spat some blood.
May 2 May 2/93. Quite often restless at night, as usual. Seems more cheerful at present, saying that he feels good.
" 3/11 May 3/93. Is steadily gaining in weight. May 11/93. Had a "crying spell" this morning.
" 18 May 18/93. Seems to be resting & sleeping better, of late. Is only occasionally restless at night. By day,
is up & about, as usual. Has a sad & gloomy look. Nearly always says that he feels well. Has odd
" 31 delusions, persisting for a little time, and then passing away. May 31/93. Appetite good; bowels
regular. Has piles. Is very dirty in habits. Is fairly quiet & well-behaved. Seldom talks, except
merely to answer questions. Says "he feels all right" though he appears very depressed.
June 5/30 June 5/93. Has been steadily gaining in flesh, the past few months. June 30/93. No material
change in patient's condition.
July 3/31 July 3/93. Maintains his weight quite well. July 31/93. Was recently visited by his wife. Appetite
still good & bowels regular. Quiet & dull. Seldom speaks. Appears very gloomy & depressed. Dirty
in personal habit. Hesitancy in speech & confusion of mind are more marked, of late.
Aug 4/17 Aug 4/93. Transferred, today, to B'. East. Aug 17/93. Appetite good; bowels regular. No cough or other
physical ailment noticed. Talks very little. Power is almost gone. Growing very weak & demented.
" 31 Is very dirty in his habits. Aug 31/93. Patient is gradually losing in flesh, also growing weaker.
Sep 4/9 Sep 4/93. Continues to lose in weight. Aug 9/93. Was struck by a fellow patient (Wm Rose) with a
" 30 spoon, while at dinner, today, & received a slight cut over the left eye. Sep 30/93. No change.
Oct 10 Oct 10/93. Was struck by some one, this afternoon or evening, over the left eye. Appetite con-
" 15 -tinues good. Bowels regular. Well-behaved, though still very dirty in habits. Oct 14/93. Had
"haematoma Auris", which did not progress very far & has subsided quite completely. —
" 31 Oct 31/93. No very material change in patient's condition. Nov 2 93 Wt 138 lbs P. 82. Nov 2 5 93
Nov 2 5/30 Was struck by Hans Hoff with his open hand & knocked down. Skin on right cheek was slightly broken
" 30. Appetite good. Bowels reg: Talks very little, pronouncing his words with difficulty. Mental power
nearly gone. No complaints. Habits dirty 3 days daily during month. Dec 2 93 Wt 134 lbs P. 74
Dec 23 93 Was cut on forehead, which though slightly-bled considerably. Supposed Hans Hoff cut him
over to p 284.

Personal and Medical History of David Lawton

Whole No. 3168

Residence, St Paul, Minn

Date Admission, 4th November 1892.

Admitted by, Dr Phelps Hour, 7 PM

How Sent, John B. Olivier, Jr., Ramsey County

Sex, male

Age, 61 yrs, 1 month

Civil Condition, Single

Children, Yes; one child

Age Youngest Child,

Occupation, Retired from business

Degree Education,

Profession Religion, Is a church member

Habits, Excellent

Nativity, New York

Physicians Committing, Chas. Griswold & W.S. Kelly

Correspondents,

No. for Year, 50

Insane Relatives, (a sister?) partially demented; (Insanity not hereditary)?

Cause Exciting, Epilepsy probably

Cause Predisposing, probably epilepsy & heredity

Form, Dementia Epileptica

Accompanying Bodily Disorder, Epilepsy & spinal irritation

Suicidal or Not, not

Date of this Attack, not stated in history

Duration, probably of some years

No. of Attack, not the 1st

No. of Admissions,

Age First Attack, not stated

Time of Leaving, March 11th '93

Time in Hospital, 4 mos. 7 ds.

Result, Recovered

EXAMINATION ON ADMISSION.

Exd by Dr Baker Nov 17/92 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear on certain things; confused on others

Quick or Sluggish, quite active

MEMORY:

Past Events, probably good (5 or 6 years)

Recent Events, rather inaccurate, uncertain

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, fairly Correct

REASONING POWER:

Ordinary Subjects, Seems fair

Own Mental State, realizes failure of memory

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not, not systematized - fears of being killed

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none detected

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, fairly coherent

Voluble or Reticent, Voluble.

GENERAL DESCRIPTIVE REMARKS:

*Wounds &c. At 9½ years of age, while working in the woods, probably in Chilly, damp weather, was attacked with a pain in the right tibia; this was followed evidently by inflammation & swelling, later, extending up the whole length of the tibia, suppurating and opening externally, finally. The site is now occupied by a large scar, over almost the entire inner and anterior surface of tibia; skin adherent. It seems, probably, that this was a case of acute osteo-myelitis. Consecutive trouble broke out in the left knee, the left elbow & left wrist. Left knee & left elbow are now badly deformed & drawn out of shape. Scars & adhesions over the left wrist. Contraction & deformity of middle finger of left hand & loss of first phalanx of index finger. Has also atrophy of muscles between the thumb & index finger of left hand. Is somewhat troubled with spinal irritation - For a time, some time ago, used to pass considerable water - sometimes 2 or 3 times at night - Has what he calls "dizzy spells"

Personal and Medical History of David Lawton

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 3in (about) WEIGHT, 106 pounds; usually, 124 pds in winter & 115 to 118 pds in Summer NUTRITION, rather below normal

WOUNDS OR ABNORMALITIES, *See below

TONGUE, Tremors, Marked, Coarse Coatings, Moderate

PUPILS, Equality, Yes; Promptness Movement, Quick; Jerky

Size, dilated; right pupil somewhat elliptical; rt. diam. vertical; rt slightly larger in State of contraction for accommodation

Response Light, Yes Accommodation, Yes

SIGHT, Is far sighted; wears glasses.

HEARING, both ears considerably impaired.

COORDINATION, Arms, finger to nose, eyes shut, quite good.

Legs, Standing, eyes shut, some swaying.

TREMORS, Hands, very marked Tongue, Marked, Coarse.

Facial Muscles, Yes General, Some

REFLEXES, Patellar, right knee somewhat exaggerated; left, cannot find tendon.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, Good

FACIAL EXPRESSION, Quite expressive; Somewhat sad.

SENSIBILITY, Seems to be acute

HEART,

LUNGS,

EXAM. URINE, Color, Dark yellow; reaction acid; Sp. gr. 1020; albumen, Yes; urea 1.6%

12 M Nov 17/92 — 11/19/92 Dr. S — Urine. Mucus. Crystals uric acid & urates, amorphous salts. Squamous epithelial cells. Hyaline casts. Quite numerous.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, tendency to be	Irregular,
APPETITE, Good,	Medium, Yes	Poor,
SLEEP, Good, usually	Poor,	Irregular, Somewhat
PULSE, See record	RESP.,	TEMP.,
CRANIAL MEASUREMENTS,	not taken	

HISTORICAL.

LENGTH OF INVASION, Quite a while ONSET GRADUAL OR SUDDEN, Gradual

Has, what he calls, "Dizzy Spells" —

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother died at 82; possibly Consumption

Father or Pat. Relations, Father died at 86; suffered all his life from rheumatism

Brothers or Sisters, 4 brothers dead; 1 of rupture; contracted in army; 1 died in hospital, time of war;

4 sisters dead; 1 of consumption —

Personal and Medical History of David Lawton

NAME. David Lawton

DATE, 189	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3rd	113	64	19	
Feby 3.	115	68	2	
March 3d	118	60	3	

1892

This patient was brought here by Deputy Sheriff [illegible]. Habits are excellent. Insanity is probably hereditary; Epil[eptic] is chronic, depressed, Epileptic Insanity; has also spe[cial]-fested by Epileptic attacks; this is not the first; probab[ly] is now manifested in religious subjects. Is not dis[posed] or destructive habit. Has shown peculiarities of temp[er]. Has been under medical treatment for nervous disorder of

Nov 5 — Nov 5/92. On admission, was put in 4th. Nov 5/92. So[mnolent] and very tremulous this morning; very rambling in [speech]
" 6 — apparent effort. Nov 6/92. Has restless the greater pa[rt]
" 18 — that he has a cold. PM. Pulse 72. Nov 18/92. Puls[e] on the past 10 and present mornings, and has been 74. afternoons respectively. Has been troubled quite de[al] is taking pills of aloin, belladonna, strychnia & ca[ffeine]

Dec 5 — Dec 5/92. Wt 110 pds. Pulse 60. Has gained 4 pound
" 7 — Dec 7/92. For some time after coming here, was quite poorly. Has been, however, for some time more res[tless] of days, too, was very tremulous in body and in [speech] rambling in his speech, in attempting to give [account] one subject, soon forgetting, and rambling off in very far from his original topic, wholly un[able] tell his story, frequently recalling the Dr to tell highly emotional and showing religious delusions, h[as] gradually improved, becoming less restless, nervous & and calm and can carry on a better & more coherent conversation. Has written quite a number of letters to his daughter. No fit or convulsion has been seen. Patient is troubled some with constipation & frontal headaches.

1893
Jan 3/ — Jan 3/93. Wt 113 pds. Pulse 64. Jan 5/93. Usually restful and sleeps well at night. No definite fits or convulsions have been seen. Has few attacks of petit-mal, probably. Still troubled with con-stipation and an occasional cold. Feels well and is far more composed & restful than at
" 16/ — time of admission. Jan 16/93. Appears to have caught a slight cold. Given quinine. Jan 21/93, Is
" 27 — again constipated; given medicine. Jan 27/93. Wants the Dr to give him the prescription for his trouble
Feb 4 — and the little black pills". Feby 4/93. Apparently restful & sleeping well at night. Is clean, tidy and well-behaved. Continues quite composed. Says "he now feels first-rate & would like to know when he can go home" In good bodily health.
Mar 11 — March 11/93. Continued to improve in physical health, and slightly so, mentally. Fit have not been noted. Was today sent home alone.

Discharged May 3. 93.

Vol 20

DETAILED HISTORY OF SICKNESS OF MR. Hing Kee
DIAGNOSIS.

1893 Oct 21

DATE	HOUR	PULSE		RESP.		TEMP		
Nov	AM.	PM.	AM.	PM.	AM.	PM.	AM.	PM.
27	7	5	130	120	34	30	103.4	102.4
28	7	5	126	140	36	38	103	102
29	7	5	138	130	42	44	101.6	102
30	12							

Appears to be failing. Appetite very poor. Eyes bloodshot & discharging. Continues to have frontal headaches. Constant vomiting. Is very weak. Has had no food. Fast. Bowels move to free. Continually getting turned. Head is very much swollen. Has had coughing spell. Very weak. Has had coughing spell. Died

1892

This patient was brought here by Deputy Sheriff Courteau. The following is his history. His habits are excellent. Insanity is probably hereditary, Epilepsy the probable cause of this attack; form is chronic, depressed, Epileptic Insanity; has also spinal irritation; first symptoms first manifested by Epileptic attacks; this is not the first; probably are of 2 or 3 years duration; Insanity is now manifested in religious subjects. Is not disposed to injure others; not suicidal; no filthy or destructive habits. Has shown peculiarities of temperance. Has not been restrained or confined. Has been under medical treatment for nervous disorder of various types.

Nov 15 Nov 14/92. On admission, was put in At. Nov 15/92. Somewhat restless last night. Is quite nervous and very tremulous this morning; very rambling + incoherent in speech; quiet + calm with
" 16 apparent effort. Nov 16/92. Was restless the greater part of last night. Nov 17/92. Complains
" 18 that he has a cold. Tm. Pulse 72. Nov 18/92. Pulse has been 80.? 70. 76. 62. 72. 63. 68. 70. 60 + 66 on the past 10 and present mornings, and has been 74. 75. 75. 72. 68. 63. 74. 60 4/6 64. on the past 9 afternoons respectively. Has been troubled quite decidedly with constipation for which he is taking pills of aloin, belladonna, Strychnine + cascara sagrada.

Dec 5 Dec 5/92. Wt 110 pds. Pulse 60. Has gained 4 pounds in weight.

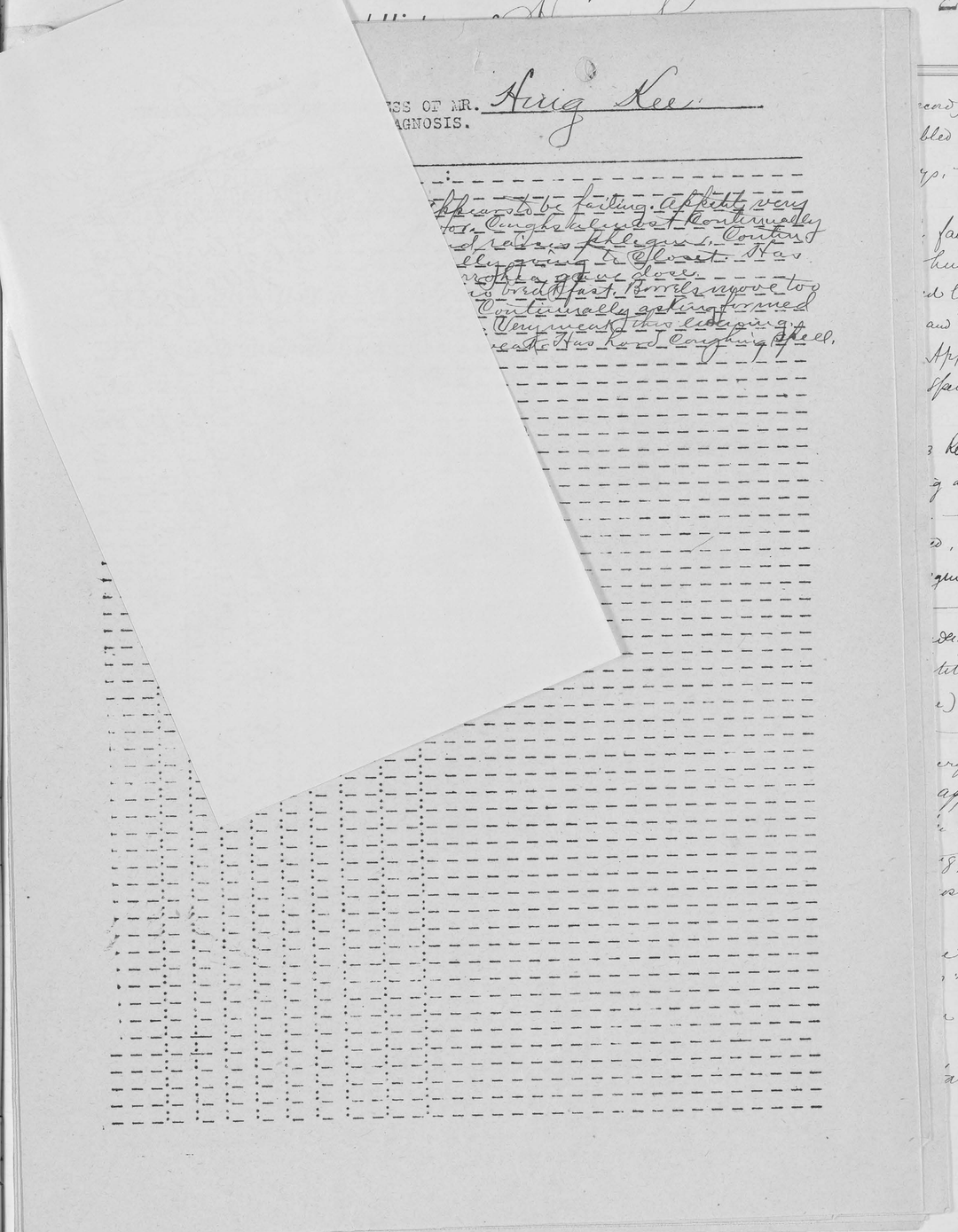
" 7 Dec 7/92. For some time after coming here, was quite frequently restless at night, sleeping poorly. Has been, however, for some time more restful + has slept better. For quite a number of days, too, was very tremulous in body and in speech; nervous; was very incoherent and rambling in his speech. In attempting to give an account of his past, starting upon one subject, soon forgetting, and rambling off into related matters, and soon getting very far from his original topic, wholly unable to recall it. Was very anxious to tell his story, frequently recalling the Dr to tell him something he had forgotten. Also highly emotional and showing religious delusions, talking religion to his fellow-patients. He gradually improved, becoming less restless, nervous + emotional until he is now fairly cheerful and calm and can carry on a better + more coherent conversation. Does not mention religion. Has written quite a number of letters to his daughter. No fit or convulsion has been seen. Patient is troubled some with constipation + frontal headaches.

1893
Jan 3 Jan 3/93. Wt 113 pds. Pulse 74. Jan 5/93. Usually restful and sleeps well at night. No definite fits or convulsions have been seen. Has few attacks of petit-mal, probably still troubled with con-
- 16 stipation some + an occasional cold. Feels well and is far more composed + restful than at-
- 21 time of admission. Jan 16/93. Appears to have caught a slight cold. Given quinine. Jan 21/93. Is
- 27 again constipated; given medicine. Jan 27/93. Wants the Dr "to give him the prescription for his trouble
Feb 4 and the little black pills". Feby 4/93. apparently restful + sleeping well at night. Is clean, tidy and well-behaved. Continues quite composed. Says he now feels first-rate + would like to know when he can go home. In good bodily health.

Mar 11 March 11/93. Continued to improve in physical health, and slightly so, mentally. Fits have not been noted. Was today sent home alone.

Discharged May 3, '93.

...SS OF MR. Hrig Kee.
...AGNOSIS.



1893

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Nov 15

Has been seen. Patient

1893
Jan 3/ Jan 3/94.
or convulsions "
-etispation some pain
- 16/ time of admission Jan 16/93 Ord
- 27 again constipated; Given medicine. Ju
Febt and the little black pills". Feby 4/93. apparently
well-behaved. Continues quite composed. Says he now feels
In good bodily health.

at night. No definite fit
y. Still trembles with co
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given quinine. Mch 11/93. Di
ues the prescription for his trouble
well at night. Is clean, tidy and
would like to know when he can go home"

Mar 11 March 11/93. Continues to improve in physical health, and slightly so, mentally. Fits have not been noted. Was today sent home alone.

Discharged May 3. 93.

Vol. 20

DETAILED HISTORY OF SICKNESS OF MR. Hung Kee
DIAGNOSIS.

November — 93.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
									Weight 92
Nov 1	7	6	112	106	30	30	1044 / 1033	1024	Appetite not very good. Bowels regular. Coughs constantly.
2	7	6	108	104	32	32	1029 / 1014	1016	
3	7	6	118	102	32	30	1038 / 1017	1012	Has some very bad coughing spells
4	7	6	128	110	32	30	1036	1046	Howe Tate
5	7	3	116	108	32	30	1042	1038	Appetite improving. Bowels regular
6	7	3	120	106	32	30	1031	1022	
7	7	3	122	110	32	30	1036	1026	He is polite when he talks and seems very much excited
8	7	3	114	108	34	32	1024	1016	
9	7	3	116	116	32	30	1018	1018	Still continues to cough. Appetite fairly good. Bowels regular
10	7	3	112	108	32	32	1032	1022	
11	7	3	120	110	34	34	1044	1018	Talks sense of late
12	7	3	114	112	32	32	1028	1017	Appetite not very good. Bowels regular
13	7	5	118	110	34	32	1028	1018	
14	7	5	120	110	34	32	1012	1017	Has usual sore appearing on back
15	7	5	120	112	32	32	1033	1013	Appetite not very good
16	7	5	124	124	34	34	1033		
17	7	5	106	118	36	36	1024	1033	Has very bad coughing spells
18	7	5	126	112	38	36	1028	1022	
19	7		138		38		1023		Cough bad very little appearing weak daily
20	7		106		36		1022		
21	7	5	124	118	33	24	1038	1034	
22	7	5	118	128	28	31	1028	1005	Is talking some of late suspects evil spirits about
23	7	5	120	108	30	31	1032	1014	
24	7	5	126	108	33	30	1038	1012	Appetite poor. Bowels move freely.
25	7	5	120	120	36	36	1017	996	
26	7	5	138	132	30	32	1032	1025	Ate nothing for dinner or tea last night

Vol 20

RECORD HISTORY OF SICKNESS OF MR. Hung Kee
DIAGNOSIS.

1893 — C, 2,

	HOUR	PULSE		RESP.		TEMP		
	AM	PM	AM	PM	AM	PM	AM	PM
25	7	5	116	128		30		101.2
26	7	5	114	106	30	30	104	101.4
							103.2	
27	7	5	118	108	32	32	104.6	102.4
28	7	5	122	106	36	34	104	104.8
29	7		120		34		104.2	
30	7	5	126	110	32	32	104	102.2
							102.8	
31	7	5	122	108	32	34	103.4	101.8
							102.4	

Coughs a considerable amount — Rales phlegmous

has been seen. Patient

at night. No definite fits. Still troubled with con- composed & restful than at given quinine. Jan 21/93. 25 w this prescription for his trouble well at night. Is clean, tidy and med like to know when he can go home"

1893
Jan 3/ Jan 3/4
or convulsions
- constipation some pain
- 16/ time of admission Jan 16/93 C 1/
- 27 again constipated; Given medicine.
Febt and the little black pills". Feby 4/93. apparently
well-behaved. Contains quite composed. Says he now feels
In good bodily health.
Mar 11 March 11/93. Continued to improve in physical health, and slightly so, mentally. Fits have not been noted. Was today sent home alone.

Discharged May 8. 93.

1893

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Nov

has been seen. Patient

1893
Jan 3/ Jan - 17
or convulsions
- constipation some pain
- 16/ time of admission Jan 16/93 (1)
- 17 again constipated; Given medicine.
Febr and the little black pills". Feby 4/93. apparently
well-behaved. Continues quite composed. Says he now feels,
In good bodily health.
Mar 11 March 11/93. Continued to improve in physical health, and slightly so, mentally. Fit, have not been noted. Was today sent home alone.

Discharged May 8. 93.

120

DETAILED HISTORY OF SICKNESS OF MR. Hung Kee
DIAGNOSIS.

1893

DAY	HOUR	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Jan 30	7 5		80		30		102	Bowels regular
31	7		110		30		103	
Feb 1	7		104		36		105.6	Loss of flesh steadily as a rule
2	7							very quiet
3	7	5	106	108	30	32	103.2	106.6 Appetite not very good of late
4	7		104		30		102.8	Weight 95 lbs.
5	7	5	92	90	30	30	103.2	102 Coughs some
6	7	5	100	96	30	30	101.8	102
7	7	5	108	110	30	30	103.4	102.2 Gave bath
8	7		116		32		102	Had coughing spell 8 a.m.
9	7	5	104	104	30	30	103	101
10	7	5	107	82	39	40	104	104
11	7	5	100	80	34	34	104	107
12	7	5	104	98	34	34	103	100 Gums drawn
13	7	5	100	88	36	30		103.8
14	7	5	112	100	32	30	104	103.8 Slept from Oct 15 8 1/4 to from 4 8 5 hours nightly
15	7	5	106	90	30	30	103.8	100
16	7	5	110	88	30	30	105	101
17	7	5	108	86	30	30	103.2	101.8 Coughs a great deal
18	7	5	112	102	30	32	104.4	103 Appears to be growing weak
				106		32		
19	7	5	106	92	30	30	103	101.8
20	7	5	114	106	36	34	103.6	102.2 Appears very weak - Eats but little
21	7	5	108	100	32	30	102.2	100.8
22	7	5	106	100	30	32	103.4	101.6
23	7	5	112	92	32	30	103.8	102 Slept from Oct 15 8 1/4 to from 2 3 3 hours nightly
24	7	5	118	104	32		104.2	Coughs considerable, are drawn nightly
								Left eye very much excited
								Left side of body paralyzed to
								right and affects patients voice
								to a good

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1894

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1893
Jan 3/p Jan 3/4
or convulsions
- constipation some pain
- 16/p time of admission Jan 16/93 C/1,
- 27 again constipated; Given medicine.
Febt and the little black pills". Feby 4/93. apparently
well-behaved. Contains quite composed. Says "he never feels
In good bodily health.
Mar 11 March 11/93. Continues to improve in physical health, and slightly so, mentally. Fits have not been noted. Was today sent home alone.

Discharged May 3. 93.

has been seen. Patient

at night. No definite ph
y. Still troubled with con-
composed restful than at
Given quinine. June 21/93. Co
ues the prescription for his trouble
well at night. Is clean, tidy and
urred like to know when he can go home

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CLINICAL NOTES IN THE CASE OF Hang Kee

1893

MO:	DA:	T.	P.	R.	TEMP:	NOTES BY NURSE:	NOTES BY PHYSICIAN.
Sept	9	7	96	26	99.8		
		5	88	28	99.6		
	10	7	96	28	100.6	Appetite good	
		5	90	30	100.8	Bowels regular	
	11	7	98	28	100.2		
		5	90	30	102.2		
	12	7	96	30	102		
	13	7	86	28	100	Has spells when he takes it himself	
		5	90	30	102	and seems very much excited	
	14	7	94	30	102		
	15	7	80	28	100.4		
		5	86	30	101.6		
	16	7	92	28	100		
	17	7	96	28	100.2		
	18	7	94	28	100.2	V.S. Slept from 9 Sept 9th to 8 18th from 4 8.5 hours night	
	19	7	102	30	103	appetite fairly good Bowels regular	
	20	7	102	30	103		
		5	100	30	102.8		
	21	7	92	28	100		
	22	7	100	30	102		
		5	88	30	102.4	Coughs a great deal	
	23	7	100	30	101.6	+ refuses Phlegm	
	24	7	108	32	103.4		
		5	110	30	103		
	25	7	104	30	102.4		
	26	7	100	30	102.6		
		5	102	30	102		
	27	5	76	28	—	Does not cough much of late, appetite good	
	28	7	102	28	102.2		
	29	7	102	30	102		
		5	100	30	101.6	V.S. Slept from 9 Sept 29th to 8 30th from 4 8.5 hours night	
	30	7	110	30	102.6	Appetite fairly good	

1893

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1893
Jan 3/93

Jan 3/93.
or convulsions "ha
- Stipation bowels ran a
- 16/93 time of admission Jan 16/93 O.H.
- 27 again constipated; Given medicine. Ja
Febt and the little black pills". Feby 4/93. apparently
well-behaved. Continues quite composed. Says he now feels
in good bodily health.

Mar 11 March 11/93. Continues to improve in physical health, and slightly so, mentally. Fits have not been noted. Was today sent home alone.

Discharged May 3', 93.

...n has been seen. Patient

...e at night. No definite fits
...ably still troubled with con-
...e composed restful than at
... Given quinine. Jan 21/93. Ds
... him the prescription for his trouble
...g well at night. Is clean, tidy and
...e seemed like to know when he can go home"

Personal and Medical History of Hung Kee

CLINICAL NOTES IN THE CASE OF Hung Kee

1893

	DATE.	PULS.	TEMP.	TEMP.	NOTES BY NURSE	NOTES BY PHYSICIAN.
Aug	22	92	30	100.5	Had some very ha	d coughing spells today
		84	22	100.6		
	23	100	26	102	Coughs considerable	
		72	32	102	and raises phlegm	
					Shake Tenth Dose	
					Appetite fairly good	
					Bowels regular	
	24	94	26	100		
		88	24	101		
	25	100	30	101.4		
		86	26	101.2	Coughs continually	
	26	106	30	102.8		
		96	30	101.6		
	27	90	30	99.8	Has a small portion	
		94	30	100	mucK	
	28	100	28	101.4		
		96	26	102		
	29	102	30	101.7	Coughing spells still	
		72	32	102	continues. Some	
					very hard.	
	30	96	30	101.2		
		86	30	102		
	31	80	28	100.2	Slept from Aug 22nd to 31st from 4 to 5 hours nightly	
		78	27	100.2		
Sep.	1	96	26	100	Gave bath.	
		84	26	100.2		
	2	84	26	100.6		
		72	26	99.4		
	3	82	24	101	Appetite not very	
					good.	
	4	90	26	99.8		
		88	26	100.1		
	5	96	26	100.2	Bowels regular	
		92	26	101.4		
	6	80	26	99.8	Lies quietly in bed.	
		82	26	101	appetite good. Bowels	
					regular.	
	7	80	30	99.2		
		84	28	101	Slept from 3rd to 6th from 3 to 4 hours nightly	
	8	88	28	100	Weight 97 lbs	
		82	28	101.6	Gave Bath.	

1893

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Has been seen. Patient

1893
Jan 3/93 Jan 3/93.
or convulsions ha
- etipation some ran
- 16/93 time of admission Jan 16/93 CH
- 27 again constipated; Given medicine. Jan
Febr and the little black pills". Feby 4/93. apparently
well-behaved. Countenance quite composed. Says he now feels
In good bodily health.
Mar 11 March 11/93. Continued to improve in physical health, and slightly so, mentally. Fits have
not been noted. Was today sent home alone.

at night. No definite fits
ably. Still troubled with con-
composed & restful than at
Given quinine. Jan 21/93. Dr
him the prescription for his trouble
g well at night. Is clean, tidy and
& seemed like to know when he can go home"

Discharged May 8. 93.

Personal and Medical History of Hung Kee

MEDICAL NOTS IN THE CASE OF Hung Kee.

1893

MO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
Aug	1	7	88	22	100.4	Gave bath	
		5	86	24	100.6		
	2	7	92	22	99.6	Has gone to bed.	
		5	76	22		Coughs considerably	
						raises phlegm freely	
	3	7	88	24	99.8	yellow color	
		5	80	24	100	weight 101½ lbs	
	4	7	80	22	99.8	Bowels move	
		5	78	20	100.2	regular	
	5	7	76	24	100.2	appetite fairly	
		5	84	22	100.2	good	
	6	7	80	20	99.8	Sputa clear	
		5	86	22			
			76				
	7	7	76	20	100	Ate his breakfast	
		5	80	22	101	Gave bath	
	8	7	90	24	100	Coughing and	
		5	108	34	103	raising blood	
	9	7	102	28	100.2	Has been coughing	
		5	86	26	102	fierce and raising	
						blood of a bright	
						red color	
	10	7	106	30	101.2	Slept from 2 to 10	
		5	92	28	102.2	on average 4 to 5 hours	
						nightly	
	11	7	84	28	100	Quite well not much	
		5	84	26		but very little and	
						does not seem to	
						understand anything	
	12	7	96	26	100.2		
		5					
	13	7	88		100.4		
	14	7	98	22	100.4	Gave bath	
		5	80	23	100.6		
	15	7	90	22	100	Spat coughing much	
		5	80	22	100.4	of late.	
	16	7	84	22	99.4	Some days appears	
		5	72	23	100.2	very dark, will not talk	
	17	7	86	24	100.2	Sleeps some during	
		5	88	24	101.2	the day	
	18	7	88	22	100.2		
		5	80	23	101		
	19	7	90	24	99.2	Bowels regular.	
		5	80	24	101	appetite fairly good	
	20	7	76	24	100.6	Gave bath.	
	21	7	86	22	100	Slept fr 9 p.m. to 2 a.m.	
		5	84	24	101	Sputum 10 c.c.	

Personal and Medical History of Ning Kee

from page 9v

dull. Bowels have been regular & appetite fairly good. Sleeps sound during the day. (See attached record) —
Aug 31/93. For past 9 nights, patient has slept only from 4 to 5 hours, nightly. Has been troubled a good deal by coughing. By day also, coughs considerably, at times raising blood. At times, he coughs continually. Still confined to his bed, in the "Sick ward". Lies there quietly.
Sep 8/93. Has been sleeping only from 3 to 4 hours, nightly, during past week. Is rapidly failing in flesh. Sep 10/93. Appetite quite good. Bowels regular. Sep 13/93. Has spells when he talks to himself and seems very much excited. Sep 18/93. Sleep, for past 10 nights, has been much disturbed by his coughing; has slept but 4 or 5 hours, each night. Sep 23/93. Still coughs a great deal and raises phlegm, sometimes blood. Sep 27/93. Has not been coughing so much, the past few days. Appetite continues good. Bowels regular. Sep 30/93. Still lies quietly in bed day & night. Coughing spells have not been so frequent of late. Sleep and rest at night are still very poor.
Oct 4/93. Still losing in flesh. Oct 8/93. Had a bad "coughing-spell" this morning. Oct 12/93 Refused his quinine, today. Oct 15/93. Still sleeps very poorly, the past 2 weeks. Oct 18/93. Is coughing a good deal today & appears to be growing weak. Oct 20/93. Eats but little - seems very weak, today. —
Oct 24/93. For past 9 nights, sleep & rest at night have been much now broken & disturbed, and he has been sleeping only 2 to 3 hours, nightly. Today, is coughing considerably & raising phlegm. Is also very much excited. Got out of bed & wanted to fight one of the patients, in the ward. —
Oct 31/93. Is still confined to his bed. Lies there, as a rule, very quietly. Still coughs considerably, from time to time & occasionally has "spells" of talking to himself & becoming excited. Appetite continues good, though he is, each month, losing in flesh. (See attached records of nurse). —
Nov 1/93. Is fast losing in flesh. Appetite poor. Bowels regular. Coughs considerably. —
Nov 7/93. Has spells when he talks, & seems very much excited. Nov 10/93. Has some very hard "coughing spells", at times. Talks some, of late. Nov 14/93. Has a small sore, appearing on back. Nov 19/93. His severe "Coughing spells" continue. Eats but very little. Losing weaker daily. Nov 23/93. Is talking some, again, of late. Says "he will get better". Nov 26/93. Ate nothing for breakfast or dinner, today. Nov 27/93. Continues to fail. Appetite very poor; coughs almost continually & raises phlegm. Continually going to closet. Has some diarrhoea.
Nov 28/93. Ate no breakfast. Diarrhoea persists. Is continually asking for medicine.
Nov 29/93. Is very weak this evening. Nov 29/93. Is very weak. Has hard "coughing spells". —
P.M. Is sinking rapidly. Continued to fail during the night & died at 12.10 PM.
— (See attached Clinical Records). —

Efforts were made to find some relatives or friends, but so far, without avail. Remains, in meantime, have been placed in Vault.

— Died —

from page 1v

1893
Jan 3/93 Jan 3/93. Wt 115 lbs. ... well at night. No definite fits or convulsions have been ... probably still troubled with con- ... stipation. Gave an occa- ... more composed & restful than at time of admission. Jan 16/93. Appears ... cold. Given quinine. Jan 21/93. Is again constipated; Given medicine. Jan ... to give him the prescription for his trouble and the little black pills". Feby 4/93. Apparently ... sleeping well at night. Is clean, tidy and well-behaved. Continues quite composed. Says "he now feels that rate & turned like to know when he can go home" In good bodily health.
Mar 11 March 11/93. Continued to improve in physical health, and slightly so, mentally. Fits have not been noted. Was today sent home alone.

Discharged May 8. 93.

Personal and Medical History of Edward St. Pierre

Whole No. 3177

Residence, Langdon, Washington County, Minn.

Date Admission, 14th November 1892

Admitted by, Dr. Phelps Hour, 7 Pm.

How Sent, Rudolph Schmicke, Jof P., Washington County

Sex, male

Age, 33

Civil Condition, single

Children, none

Age Youngest Child,

Occupation, has none

Degree Education,

Profession Religion, not a church member

Habits, Good

Nativity, Owego, N.Y.

Physicians Committing, H. H. Caine and E. V. B. Freligh

Correspondents,

No. for Year, 89

Insane Relatives, history of family unknown, Insanity not hereditary

Cause Exciting, probably recurrence of old disease

Cause Predisposing,

Form, Mania Chronica

Accompanying Bodily Disorder, none

Suicidal or Not, Not

Date of this Attack, 5 years ago; probably continuous

Duration, 5 years?

No. of Attack, not the first

No. of Admissions, (Seen before from Dec '89 to Aug '91)

Age First Attack, 28, about.

Time of Leaving, Sept. 18 93

Time in Hospital, 10 months 4 Ds.

Result, Impr

EXAMINATION ON ADMISSION.

Exd by Dr. Baker Nov 15/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, much confused

Quick or Sluggish, fairly active

MEMORY:

Past Events, ? probably good, where attention

Recent Events, is given —

Special Subjects,

PERCEPTIVITY:

Alert or Dull, does not observe

Correct or Illusive, Illusive, very.

REASONING POWER:

Ordinary Subjects, much perverted

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, somewhat

Depressed,

DELUSIONS:

Systematized or Not, unsystematized & various

Special Subjects,

Transitory or Not,

HALLUCINATIONS: not detected

ILLUSIONS: " "

CONVERSATION:

~~Coherent or~~ Incoherent, Excessively

Voluble or Reticent, Voluble—talks to himself much of the time

GENERAL DESCRIPTIVE REMARKS:

Answers questions with a string of totally irrelevant incoherent words, very rarely making correct answer. Talks much to himself. Mind seems to dwell more on religious subjects than on others, about his having committed sin" — Says, among other things, that we should go to Church, right today; Conversation carried on in low, quite rapid tones.

Personal and Medical History of Edward St. Pierre

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 3/4 in. WEIGHT, 142 pds. NUTRITION, Not very good

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, slight Coatings, slight Promptness Movement, prompt

PUPILS, Equality, Equal Size, dilated

Response Light, some slight Accommodation, none

SIGHT, good

HEARING, probably good

COORDINATION, Arms, Finger to nose, Eyes shut, good.

Legs, Standing on foot, good; Standing, Eyes shut, slight swaying.

TREMORS, Hands, none Tongue, slight

Facial Muscles, almost none General,

REFLEXES, Patellar, equal; slightly exaggerated.

Other Reflexes,

ARTICULATION, Hesitating, rapid Slurred,

FACIAL EXPRESSION, about normal.

SENSIBILITY,

HEART, seems good

LUNGS, seem good

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, yes Careless,

BOWELS, Normal, probably Constipated, Irregular,

APPETITE, Good, probably Medium, Poor,

SLEEP, Good, fairly Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Chronic ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1892

This patient was here before, from Dec 24/89 to Aug 9/91 when he eloped (See Vol 13. fol 84. No 2244). He is now brought back by Chas. Shubacker, Deputy Sheriff, with the following history. Habits are good. Family history unknown. Has been in this Asylum before, as above stated, and this is probably a recurrence of old disease. Form is Chronic. No accompanying bodily disorder. First symptoms were manifested about 5 years ago; this is not 1st attack; insanity is now manifested in acl subjects. Imagines that he is a Christian and is very much inclined to pray, as an evidence. Is not disposed to injure others; not suicidal; no filthy or destructive habit.

Nov 13/17 Nov 15/92. Slightly noisy & restless last night, sleeping but about 6 hours. Nov 17/92. Slightly restless
" 18 and noisy the past 2 nights, sleeping about 7 hours each. Am. Pulse 70. T. 99.5. Nov 18/92. Slightly
" 19 noisy and restless, sleeping 7 hours last night. Am. Pulse 70. T. 99.8. Nov 19/92. Slept 7 hours
" 20 last night; was slightly noisy restless. Am. Pulse 80. T. 99.8. Nov 20/92. Rested & slept 8 hours
" 21 last night. Am. Pulse 74. T. 99.4. Nov 21/92. Was quiet, rested well & slept 8 hours last night. Am. P. 72
" 22/23 T. 99.6. Nov 22/92. Slept 8 hours last night. Am. Pulse 82. T. 100. Nov 23/92. Has been quiet
at night, resting and sleeping well, the past 3 nights. Pulse has been 80. 72. & 104 on the past 2
present mornings.

Dec 5/12 Dec 5/92. Att 145 pds. Pulse 92. Dec 12/92. Has been uniformly quiet at night, resting and sleeping well, since the 25th ulto: by day, has been slightly noisy, through much talking to himself; has been restlessly active, moving about much; usually found on his feet. Has been clean and fairly tidy in habits and good-natured. Talk is incoherent, as, at times, it is almost unintelligible. Concerns, quite largely, religious matters. Always claims that he feels well, and is in fair physical health, although rather thin and pale. Has taken food regularly.

1893
Jan 3/10 Jan 3/93. Att 143½ pds. Pulse 80. Jan 12/93. Occasionally somewhat restless at night. Talks a great deal to himself, praying & talking incoherently. Works well. Is good natured and apparently is good natured.

Feb 1/7 Feb 1/93. Usually, apparently resting & sleeping well at night; has, on 3 nights during the past four weeks, been somewhat restless & noisy for from 2 to 3 hours, occasionally getting out of bed. Still talks a good deal to himself, incoherently, prays &c. Works well on the ward. Continues in fair physical health.

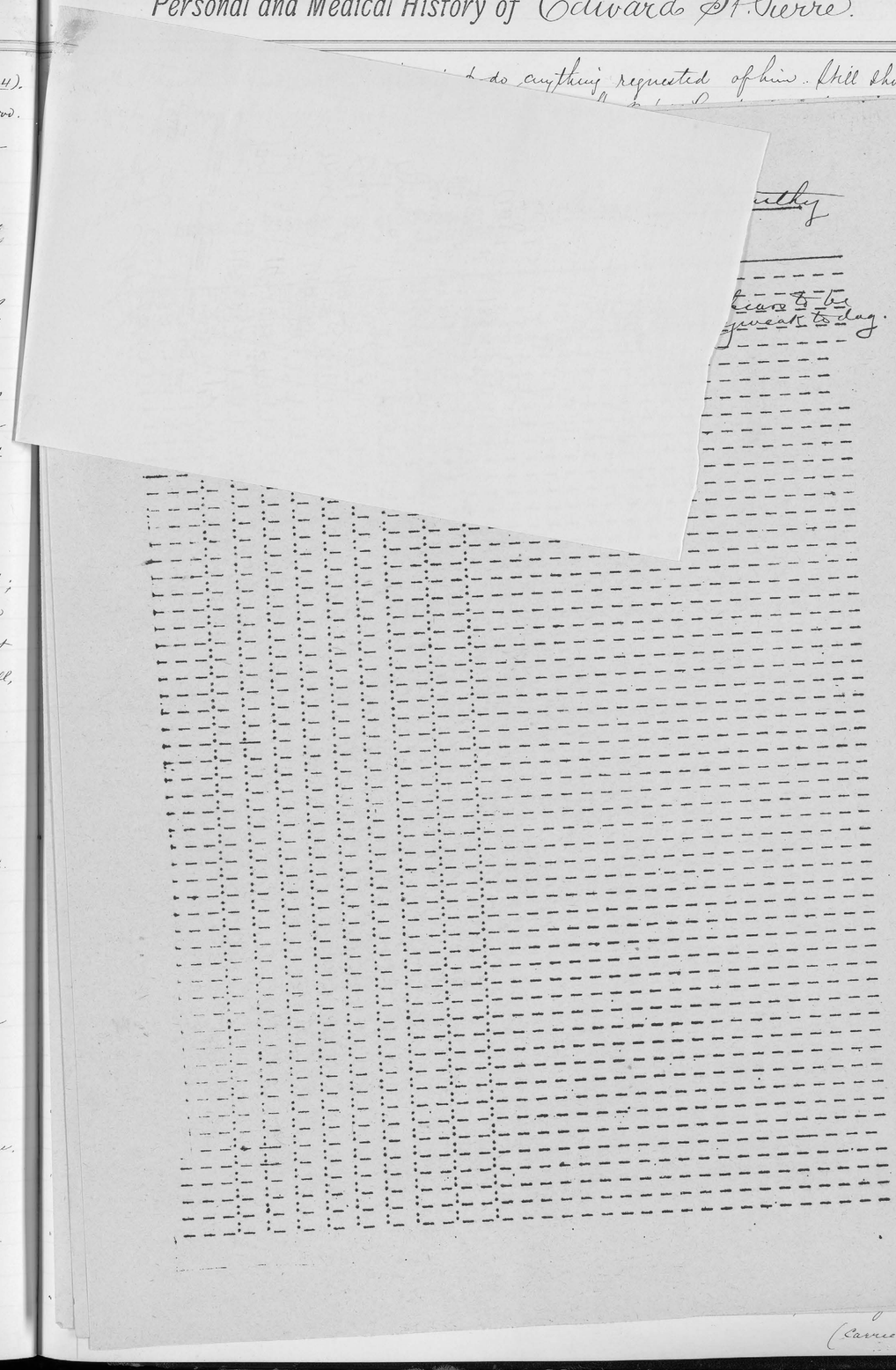
Mar 23 March 23/93. Quiet at night. A quiet active worker. Talks a good deal to himself.

Apl 13 Apl 13/93. Talks to himself and is, at times, slightly noisy.

May 18 May 18/93. Continues about as usual. Appetite good. Is gaining in flesh. Still is inclined to be noisily talkative and prays a good deal in a way peculiar to himself. Is an industrious & willing
" 31 worker on the ward & also when outside. May 31/93. Appetite good; bowels regular. Talks incoherently. Is of good personal habits. A good & willing worker.

June 3/30 June 3/93. Might fluctuates. Is in apparently good physical health. June 30/93. Little if any change.
July 31 July 31/93. Behaves fairly well: is of a rather noisy disposition; singing a good deal. Seems happy and contented. Goes into bed room & prays a good deal. Has a peculiar form of his own, in which he mixes up the Lord's Prayer with the Michigan Central & other Railways, Railroad Depots, freight cars, merchandize, bandbreste &c. Is a good worker on the ward. Personal habits are good.

Aug 1/17 Aug 1/93. Att 136 pds. Pulse 72. Aug 17/93. Appetite good; bowels regular. Is fairly



(carried to page 403)

NAME. Ed. St. Pierre

DATE. 1893	WEIGHT.	PULSE.	DAILY LOSS.
Jany 3d	143½	80	1½
Sept 3d	147	84	3½
Mar 3d	143	84	4
April 4th	144	82	1
May 3d	149	96	5
June 3d	144½	70	5
July 4th	149½	64	5½
Augt 4th	136	72	(13)
Sept 2d	137	108	

1892

This patient was seen by
He is now brought back by
Family history unknown
currence of old disease
were manifested about 5
subjects. Imagines that he
not disposed to injure othe

Nov 13/17 Nov 15/92. Slightly noisy &
" 18 and noisy the past 2 nights
" 19 noisy and restless, sleeping
" 20 last night; was slightly n
" 21 last night. Am. Pulse 74. Te
" 22/25 To 99.6. Nov 22/92. Slept 8 hours last night. Am. Pulse 82. Te 100. Nov 25/92. Has been quiet at night, resting and sleeping well, the past 3 nights. Pulse has been 80. 72. & 104 on the past 2 present mornings.

Dec 5/12 Dec 5/92. Att 145 lbs. Pulse 92. Dec 12/92. Has been uniformly quiet at night, resting and sleeping well, since the 25th ulto: by day, has been slightly noisy, through much talking to himself; has been restlessly active, moving about much; usually found on his feet. Has been clean and fairly tidy in habits and good-natured. Talk is so incoherent, as, at times, to be almost unintelligible. Concerns, quite largely, religious matters. Always claims that he feels well, and is in fair physical health, although rather thin and pale. Has taken food regularly.

1893
Jan 3/9 Jan 3/93. Att 143½ lbs. Pulse 80. Jan 12/93. Occasionally somewhat restless at night. Talks a great deal to himself, praying & talking incoherently. Works well. Is good natured and apparently is good natured.

Feb 1/7 Feby 1/93. Usually, apparently resting & sleeping well at night; has, on 3 nights during the past few weeks, been somewhat restless & noisy for from 2 to 3 hours, occasionally getting out of bed. Still talks a good deal to himself, incoherently, prays &c. Works well on the ward. Continues in fair physical health.

Mar 23 March 23/93. Quiet at night. A quite active worker. Talks a good deal to himself.

Apl 13 Apl 13/93. Talks to himself and is, at times, slightly noisy.

May 18 May 18/93. Continues about as usual. Appetite good. Is gaining in flesh. Still is inclined to be noisily talkative and prays a good deal in a way peculiar to himself. Is an industrious & willing worker on the ward & also when outside. " 31 May 31/93. Appetite good; bowels regular. Talks incoherently. Is of good personal habits. A good & willing worker.

June 3/20 June 3/93. Weight fluctuates. Is in apparently good physical health. June 30/93. Little if any change.

July 31 July 31/93. Behaves fairly well: is of a rather noisy disposition; singing a good deal. Seems happy and contented. Goes into bed room & prays a good deal. Has a peculiar form of his own, in which he mixes up the Lord's Prayer with the Michigan Central & other Railways, Railroad Depot, freight cars, merchandize, boardwalk &c. Is a good worker on the ward. Personal habits are good.

Augt 1/17 Augt 1/93. Att 136 lbs. Pulse 72. Augt 7/93. Appetite good; bowels regular. Is fairly

1893 Sept 30 well-behaved. A good worker; willing to do anything requested of him. Still shows delusions
Speech jabbering & talk incoherent. Habits cl[illegible]

8 of 20
31 44

DETAILED HISTORY OF SICKNESS OF MR. Edward McCarthy
DIAGNOSIS.

1894 C. 9.

DATE	HOUR	PULSE		RESP.		TEMP	
	AM.	PM.	AM.	PM.	AM.	PM.	AM.	PM.
March	7	5	76	120		34	101.6	

Ejected by Mother to appear to be failing Family to write weak to day.

(carried to page 403)

1894 This patient
He is now be
Family hi
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Nov 17 Nov
" 18 and
" 19 no
" 20 l
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June 3/93 June 3/93. Might fluctua
July 31/93 July 31/93. Behaves fairly well: s
and contented. Goes into bed room & prays a
she mixes up the Lord's Prayer with the Ruckgau
cars, merchandize, baggage. Is a good worker at the wa

Aug 1/93 Aug 1/93. Wt 136 lbs. Pulse 72. Aug 17/93. Appetite good; bowels regular. So fairly

1894 well-behaved. A good worker; willing to do anything requested of him. Still shows delusions
Dec 31 Speech jabbering & talk incoherent. Habits

DETAILED HISTORY OF SICKNESS OF MR. Edward. McCarthy
DIAGNOSIS.

1894 Oct 2.

DATE	HOUR	PULSE	RESP.	TEMP	
	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M.	P.M.
Oct					
13	7 5	96 116	34	104	Appetite not very good & Bowels irregular.
12	7 5	88 110	28	98.6	103 Appears to be perspiring quite a little daily.
13	7 5	100 90		100	Talks fairly rational at times.
14	7 5	100 110			Has hard cough spells
15	7 5	98 118	28	99.6	99.6 Bowels regular. Three days
16	7 5	100 120			well. Eats fairly well & other days will eat scarcely anything
17	7 5	90 112	28	99.4	Slept nightly on an average of 5 hours
18	7 5	100 118			Coughs at intervals during the day
19	7 5	88 114			
20	7 5	92 104	30	99.2	Has severe hard cough spells.
21	7 5	94 108	30	97	
22	7 5	108 112	30	98.6 100.6	103.6
23	7 5	92 120	36	104	Complains of pain in stomach
24	7 5	104 96	30 32	100.4	102.4
25	5	120			Severe coughing spells at intervals during day.
26	7 5	106 108	30	99.8	Visited by friends.
27	5	92 124	36	104	Complains of pain in lungs at times
28	7 5	104 112	32		Slept nightly on an average of 3 3/4 hrs from the 16th to 28th inst.
Mar 1	7 5	108 108	30	98.6	
2	5	116	24	102.4	Weight 120 lbs.
3	7 5	96 120	30	103.6	
4	7 5	106 108	30 30	99.2	102 Coughs Continued & severe pain in lungs
5	7 5	100 104			
6	7	120	30	98	Visited by mother. Appetite poor. Sleeps a great deal during the day and has cold sweats.
7	7 5				
8	7 5	104 116	32 36	101.8	103 Visited by Mother & P.M. Complains of
9	7 5	92 120	20	103	pain in stomach

(Carried to page 403)

1894 Nov 19 This patien
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June 7/93. Weight ...
July 31/93. Behaves fairly well ...
and contented. Goes into bed room & prays ...
she mixes up the Lord's Prayer with the Michigan ...
cars, merchandize, baud bresse. Is a good worker at the wan ... habits are good. -
Aug 1/93. Abt 136 lbs. Pulse 72. Aug 7/93. Appetite good; bowels regular. Is fairly

1893 Aug 31 well-behaved. A good worker; willing to do anything requested of him. Still shows Delusions
Speech Jabbering & talk incoherent. Habits clean. Aug 31/93 Continue about as usual.

1894 Jan 16 Came on ward from B. 5
Put to bed. Drinks a great deal
and raises phlegm. Also
Complains of pain in left lung.

DETAILED HISTORY OF SICKNESS OF MR. Edward McCarthy
DIAGNOSIS.

1894 C 2

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
Jan 16		5	106	112	28		101		Came on ward from B. 5
									Put to bed. Drinks a great deal
									and raises phlegm. Also
									Complains of pain in left lung.
17	7	5	96	110	32	34	100.2	104.2	
18	7	5	98	104	28		101.2		Sleeps a great deal during the day
									Ate buttered toast for breakfast
19	7	5	96	110	28		100		Complains of stomach bothering him.
20	7	5	96	98			100		
21	7		92		26		100.4		
22	7	5	92	112	32		98.2		
23	7	5	96	116	30		100		Visited by mother
24	7	5	106	106	28		100.6		Appetite not very good
25	7	5	96	116	30		99.4		
26	7	5	102	118	34		99.2		Visited by Father Riordon
27	7	5	98		30		100.2		
28	7	5	108	108	30		100		Has some quite bad coughing
									spells
29	7	5	110	114	32		101		
30	7	5	116	106	34		101		Appetite fairly good. Bowels regular
31	7	5	104	100	32	30	101.2		Slept on an average 5 1/2 hrs nightly
									from Jan 16.
Feb 1	7	5	102	100	30		101		Coughs and raises phlegm
2	7	5	100	116	30		100		Weight 104 lbs
3	7	5	96	116	30		99.2		
4									
5	7	5	96	116	30		100.2		Slept a great deal during
									the day. Coughs fairly constant at times
6	7	5	106	108	30		100.4		
7	7	5	86	140	30		99.2		
8	7	5	96	114	30		99		
9	7	5	96	116	30		100.4		Coughing a good deal during
									the day
10	7	5	98	120	28		99.6		

(carried to page 403)

1894

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Nov 1

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ually getting out of bed.
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May 18 —
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" 31 works in the ward
of good personal habits
June 3/93. Might fluctuate.
July 31/93. Behaves fairly well: is of a
and contented. Goes into bed-room & prays a go
he mixes up the Lord's Prayer with the Michigan Cen
cars, merchandize, baud bresse. Is a good worker in the ward. Personal habits are good. —
Aug 1/93. Wt 136 lbs. Pulse 72. Aug 17/93. Appetite good; bowels regular. Is fairly

1893 well-behaved. A good worker; willing to do anything requested of him. Still shows delusions
" Speech jabbering & talk incoherent. Habits clean. Aug 31/93. Continue about as usual.
Sept 18/93. There has been no change to note in patient's condition. Unlocked a screen in the
wash room, this evening; also pulled out a nail by which screen was fastened & closed.
Another fellow patient (W. Moses) escaped at same time & by same means. Diligent search
was made for patient but without results.

Discharged

From 132 **Edward McCarthy**

1894 Feb 28 Mar 1 a night have continued very much broken, sleeping, in the average, about 4 hours nightly. Still coughs
a great deal & raises considerable phlegm. Complains quite frequently of pains in his lungs. —
March 2/94. Wt 100 lbs. (a marked loss of flesh in the past month) March 4/94. Coughs
continually, now. Appetite poor. Has "cold sweats" — Sleeps quite a good deal in the daytime —
" 6/8 Mar 5/94. Visited by mother today. March 5/94. 5 P.M. Complains of pain in his stomach —
He is daily visited by his mother — (see attached nurses' record). — Appears to be failing, Daily.
" 9/10 March 9/94. Again visited by his mother, today. Mar 10/94. Seems a little brighter, today; bowels
" 11 moved freely; passage a light yellow color & thin. Mar 11/94. Had a severe coughing spell during
" 12 this afternoon and evening. Mar 13/94. Lies in bed, daily, very quietly; coughs but little today, tho'
" 14 he raises a great deal of phlegm; takes but little nourishment. Mar 14/94. Coughing & raising
" 15 phlegm; eat but little. Mar 15/94. Fairly bright during morning. P.M. Does not appear so well.
" 16 Has coughed a great deal. Mar 16/94. During past week, has been sleeping, nightly, in the average
" 17 only about 3 hours. Mar 17/94. Coughing a great deal today, & having "cold sweats". Bowels quite
" 18 free. Takes considerable nourishment. Mar 18/94. Coughed considerably during the evening. Rest fairly
" 19/20 well; coughs a little, at times. Mar 19/94. Resting Easily, today. Mar 20/94. Has been resting easily
" 21 all day. Coughs very little, yet seems to be very low. Mar 21/94. Complains of pains in stomach & lungs.
" 22/23 Mar 22/94. Very weak today; takes no nourishment but milk. Mar 23/94. Is taking a reasonable
" 24 amount of nourishment today. Has had some very hard "coughing spells". Mar 24/94. Is not as
" 25 bright as usual, today. Mar 25/94. Has been sleeping poorly, during past week; in the average only
" 26 2 or 3 hours, nightly. Mar 26/94. Bowels have moved. Patient appears very dull today; has been sleeping
" 27 almost all day — 6 P.M. Complains of pain in stomach. Mar 27/94. Had slight passages quite
frequently, during the night. Has been very quiet, all day. Coughed but little. Perspired a great deal. Had
" 28 a slight movements of the bowels today. Drank about 2 quarts of hot milk. Mar 28/94. Very restless & disturbed
last night; did not sleep at all. Appears some brighter today; has taken about a quart of milk &
" 29 some solid food — 10.30 and 12, bowels moved a little. Mar 29/94. Has taken about the same amount
of nourishment today, as yesterday. Appears very bright & talking more than usual. Bowels moved twice
" 30 Mar 30/94. at 12.15 last night, had some severe "coughing spells". Has also coughed a great deal today.
Vomits and soils his bed, of late: has a beginning bed-sore on back. Appetite about as yesterday.
" 31 Mar 31/94. Has worse last night & more helpless than ever before — 7. Am. Is perspiring profusely.

(carried to page 403)

Personal and Medical History of Albert A. Soutter

Whole No. 3180.

Residence, Waverly, Wright County (last two weeks)

Date Admission, 15th November 1892

Admitted by, D. Phelps Hour, 1.30. Pm

How Sent, J. J. Alley, Jof P, Wright County

Sex, Male

Age, 48

Civil Condition, Single

Children, None

Age Youngest Child,

Occupation, Tailor

Degree Education,

Profession Religion, Is a Church member (Catholic).

Habits, Cant find out. (Intemperate probably)

Nativity, Switzerland

Physicians Committing, L. O. Cody & L. W. Jenkins (Allegan)

Correspondents, Cannot learn anything from him

No. for Year, 92.

Insane Relatives, Cannot be learned

Cause Exciting, Cannot learn from him (probably exposure & Drinking)

Cause Predisposing,

Form, Mania - Chronic

Accompanying Bodily Disorder, No sores on body

Suicidal or Not, Cannot say

Date of this Attack, not stated; probably Continuous

Duration, not stated

No. of Attack, Not 1st

No. of Admissions,

Age First Attack, not stated

Time of Leaving, Nov. 26th 94

Time in Hospital, 2 yr. 5 da

Result, Impd

Eddy D. Baker Nov/92.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Fairly Clear

Quick or Sluggish, Active

MEMORY:

Past Events,

Recent Events, Seems good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, ? Correct

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, probably Somewhat

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, (See notes)

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Somewhat rambling

Voluble or Reticent, very voluble r

GENERAL DESCRIPTIVE REMARKS:

Has had "spells" of Cramping sensations about heart; feels that this will kill him - keeps himself prepared. Claims that his "boss" told him, he (patient) was going to be elected Mayor of Buffalo, Wright County, Minn, and it was best for patient to go there. - Patient believed "Boss's" Statement. Claims that a fellow-countryman abused him - "Called him names & abused him" -

Personal and Medical History of Albert A. Soutter

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in (about) WEIGHT, 128 pounds. NUTRITION, ?

WOUNDS OR ABNORMALITIES, (See preceding Examination) —

TONGUE, Tremors, Fairly Steady Coatings, Considerable, moist Promptness Movement, quick

PUPILS, Equality, about equal, the left slightly larger in certain light Size, about normal

Response Light, Some Accommodation, Yes

SIGHT, Somewhat impaired — (uses spectacles) —

HEARING, Much impaired — deaf —

COORDINATION, Arms, Finger to nose, Eyes shut, good.

Legs, Standing or Foot, Fairly Steady. Standing, Eyes shut, Some unsteady.

TREMORS, Hands, None Tongue, very slight

Facial Muscles, Irregular; Jerky. General,

REFLEXES, Patellar, Equal; diminished; 1 - 2 Dr. Ps Scale.

Other Reflexes,

ARTICULATION, Hesitating, Rapid Slurred, Somewhat broken

FACIAL EXPRESSION, about normal

SENSIBILITY,

HEART, Sounds not loud; murmurs ?

LUNGS, Has a cough; Girth 35 1/2 in; Expansion 3 in

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Yes Constipated, Irregular,

APPETITE, Good, Yes Medium, Poor,

SLEEP, Good, Yes Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Chronic ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Albert N. Soutter

189[illegible]

This man was brought here by Deputy Sheriff H. Anderson. Has been before from May 26/92 to Aug 1/92, when he Eloped (See Vol. 19. Pg 209. No. 3026). He now comes back with the following history. Has only been in the County about 2 weeks and all that can be found out is from his answers, to various questions, and he is so rambling in all his statements that no intelligent examination can be had. Cannot learn from him cause of attack; form is chronic. This is probably a continuation of his former attack. He now seems to be simply wandering in his mind; thought he was Mayor of Buffalo, when he came here. As to disposition to injure others, suicidal attempts, filthy or destructive habits, cannot find out by questioning. Bodily disease or disorder(?).

Nov 15/92 Nov 15/92 On admission was put on B[3]. Nov 16/92. Was restless for a couple of hours last night, sleeping 6 hours. Says that he coughs & makes out that he is quite severely sick. Nov 17/92. Rested well and
" 17 slept 8 hours last night. Nov 20/92. Has been only slightly restless, usually restful and sleeps from
" 20 7 to 8 hours each night. Pulse has been 80. 88. 78. 92. 78. 80. 76. [illegible]74 on the past 7 am present
" 30 mornings. Nov 30/92. Has been resting and sleeping well since last note.
Dec 5 Dec 5/92. Has been slightly more restless at night, since last note. Wt 121 pounds. Pulse 76.
" 6 Dec 6/92. Complains of having severe pain over the heart; that he had it last night and has to
" 7 sit up. Feels as if he were about to die. Wt to be taken today. Dec 7/92. Restless for a couple
of hours, sleeping 6 hours last night. Sup this morning and feels "all right."—
" 12 Dec 12/92. Transferred from B[2] to B[1]; (See attached letter written on the 6th inst, in which
are expressed some strange ideas. E.g. "I was regular stunned; I could not speak; not think;
I have seen too much, what makes me awful afraid; I have seen the Sheriff & the Conducta
as new with 2 heads and many eyes, and the Conducta ran the train awful wild - fast
we went, over hill & valley, over trees & houses, & every moment I thought the all train
would "trow over & schmash everything into splinters"—
" 15 Dec 15/92. Is uniformly quiet; at times, somewhat restless; on the whole sleeps
quite well, at night. Has been quiet, clean, tidy and well-behaved by day. Converses very
freely; has a suave, and almost fawning manner in conversation. Works quite willingly
and well. Is nervously active and quick in movement. Bodily health only fair.
" 28 Dec 28/92. Calls for salts. On the 20th ult. on account of refusing to take any more food if left
in B[1], was transferred to B[2].

1893
Jan 3/93 Jan 3/93. Wt 126½ pds. Pulse 86. Jan 13/93. Uniformly restful and quiet, sleeping well at night.
" 14 Uniformly responds that he is feeling well. Works. Jan 14/93. The following is an extract from a
letter written recently by him; "I will come to you some night & will shake hands with you all in my spirit".
Feb 1/93 Feby 1/93. Has a sore on his finger; same poultices. Feby 11/93. Am. Is full of delusions. Imagines the at-
tendants have told him to kill another fellow-patient & that, because he was told so, others have
been told to kill him (S); had a quarrel with a fellow patient today, imagining he had been saying
" 14 bad things about him (S). Feby 21/93. Continues quiet & restful at night, apparently sleeping
well. Works some. Is willing & obliging. Still retains his suave manner in conversation. Is
steadily gaining in bodyweight.
Mar 17 Mar 17/93. Asked the D. who had just returned from some absence, if he sent boxes here, by express,
while away[2]. Saying that the boxes had been sent by express, Containg yellow-packets, mosquitos

NAME. A. N. Soutter

DATE. 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	126½	86	5½	
Feby 3d	129	98	2½	
Mar 2d	128	94	/	1
April 1st	129½	76	1½	
May 3d	131	74	1½	
June 5th	138¾	—	7¾	
July 1st	133½			5¼
Aug 1st	129	—		4½
Sept 8th	132	—	3	
Oct 3d	131	76	3	
Nov 1st	133	76		n
Dec 1st	134½	72	1½	
1894 Jany 2nd	128	78		6½
Feby 2d	123½	—		4½

spital for the Insane, Rochester, Minn.
5-1-93.

verly, Wright Co., Minn.
are you and how are your brother Hans?
ow are your health? I promised you a
but I hope you answer this letter so soon
rite right away, then I will go to Chicag
Say, John, we all pray the Lord's prayer
s Lord as follows;- "And give us this day
randser, we get good bread to eat, and we
in our Hospital. We get our haly and goo
Lord; from our worthy and noble Officers
ple of this State. Honor, praise and
ts forever. Honor whomever honor is

d health just now/ but I am just so deaf
for you. You know my ears are sick,
my ears give me lots of trouble; for the
r all kinds of sounds day and night;
and ciiee-bee-bee-bee-e-e- like the
mes I hear ~~hear~~ heavy storms and thunder,
of spirits telling me impossible and
d what I have to stand sometimes. I
e to the last day of Judgment. I do
he sounds of my ears would give away and
pital life are awful hard to me; you
upon the Alps of Switzerland, and now
toomuch like a prisoner. Oh! my dear
an not go out; I am as a old fellow not
w what that mean? And then, another
is Hospital are a hell of a lot of crazy
now it yourself. How I dislike the
tter, my best regards to Mr. Kelley the
el keeper.
address is,
Albert Napolian Suter,
Hospital for the Insane,
Rochester, Minn.

" 19 Oct 19/93. Has remained in bed until today, when he got up. Oct 19/93. Apt about as
" 31 usual: working again. Oct 31/93. Appetite good no complaints. Does not walking,
with the rest; Reads some. Plays games. Works on C[2]. Is quite deluded. Talks very
abusively of Mr Kessler, a patient, as a "Jew". Has good physical health.
Nov 1 Nov 1/93. Wt 133 pds. Has lost some in flesh. Nov 10/93. Is cranky at times. Works on C[2]—
10 (carried to page 20)

189?
This man was brought here by Deputy Sheri
& Aug 1/92, when he Eloped (See Vol. 19. p. 209
history. Has only been in the County abut 2, v
to various questions, and he is so rambli
can be had. Cannot learn from him c
of his former attack. He now seems
of Buffalo, when he came here.
destructive habits, cannot f

Nov 15/92. On admission was p
Nov 16 6 hours. Says that he Coughs
" 17 slept 8 hours last night.
" 18 7 to 8 hours each night. Ou
" 30 mornings. Nov 30/92. Has been r
Dec 5 Dec 5/92. Has been slightly more ra
" 6 Dec 6/92. Complains of having severe
" 7 sit up. Feels as if he were about to die. Was
of hours, sleeping 6 hours last night. Is up m
" 12 Dec 12/92. Transferred from B3 to B1; (See atta
are expressed some strange ideas. E.g. "I was regular examined; I could not speak; not think;
I have seen too much, what makes me awful afraid; I have seen the sheriff & the Conducta
as men with 2 heads and many eyes, and the Conductor ran the train awful wild - fast
we went, over hill & valley, over trees & houses, & every moment I thought the all train
would "trow over & schmash everything into splinters".
" 15 Dec 15/92. Is uniformly quiet; at times, somewhat restless; on the whole sleeps
quite well, at night. Has been quiet, clean, tidy and well-behaved by day. Converses very
freely; has a suave, and almost fawning manner in conversation. Works quite willingly
and well. Is nervously active and quick in movement. Bodily health only fair.
" 28 Dec 28/92. Calls for salts. On the 20th ult. on account of refusing to take any more food if Off. in B1, was transferred to B2.
1893
Jan 3/93 Jan 3/93. Wt 126½ pds. Pulse 86. Jan 13/93. Uniformly restful and quiet, sleeping well at night.
" 14 Uniformly responds that he is feeling well. Works. Jan 14/93. The following is an extract from a
letter written recently by him; "I will come to you some night & will shake hand with you all in my spirit".
Feb 1/93 Feby 1/93. Has a sore on his finger; same poultices. Feb 11/93. Am. Is full of delusions. Imagines the at-
tendants have told him to kill another fellow-patient & that, because he was told so, others have
been told to kill him (S); had a quarrel with a fellow patient today, imagining he had been saying
" 12 bad things about him (S). Feby 12/93. Continues quiet & restful at night, apparently sleeping
well. Works some. Is willing & obliging. Still retains his suave manner in conversation. Is
steadily gaining in bodyweight.
Mar 17 Mar 17/93. Asked the D. who had just returned from some absence, if he dont know here, by express,
while away?. Saying that the boxes had been sent by express, containg yellow-packets, mosquitos

Hospital for the Insane, Rochester, Minn.
5-1-93.

Mr. John Brandser,
Merchant Tailor, Waverly, Wright Co., Minn.

Dear Sir :- How do you do? How are you and how are your brother Hans? How is tailoring in your shop? How are your health? I promised you a letter and I will write one now, but I hope you ahswer this letter so soon as possible you can. please do write right away, then I will go to Chicag so soon as we get fine weather. Say, John, we all pray the Lord's prayer and the Lord Himself prayed to his Lord as follows;- "And give us this day our daily bread." Yes, Mr. John Brandser, we get good bread to eat, and we get pleanty of bread to eat here in our Hospital. We get our haly and goo d bread from the servants of our Lord; from our worthy and noble Officers and Doctors, and all American people of this State. Honor, praise and thanks to the Lord and His servants forever. Honor whomever honor is due.

Say John, I am in very good health just now/ but I am just so deaf as ever, I was the time I worked for you. You know my ears are sick, yellow stuff runs out of my ears, my ears give me lots of trouble; for the last two or three months I do hear all kinds of sounds day and night; hum, hum, hum, like a bee-bumble and ciiee-bee-bee-bee-e-e- like the sound of many mosquetoes. Sometimes I hear ~~hear~~ heavy storms and thunder, and sometimes hear talks at night of spirits telling me impossible and unnatural things. Oh! it is awful what I have to stand sometimes. I wish myself down in the cold grave to the last day of Judgment. I do think if I am at liberty again, the sounds of my ears would give away and keep still. In one way this Hospital life are awful hard to me; you see I am a free-born Swiss, born upon the Alps of Switzerland, and now I do miss liberty. I feel myself toomuch like a prisoner. Oh! my dear friend, the doors are locked; I can not go out; I am as a old fellow not my own boss any more. Do you know what that mean? And then, another thing I will tell you, here in this Hospital are a hell of a lot of crazy dutch jews and Germans; and you know it yourself. How I dislike the Dutch! Now, I will close this letter, my best regards to Mr. Kelley the storekeeper, to Mr. Marnum the Hotel keeper.

Good bye to your all, My address is,

Albert Napolian Suter,
Hospital for the Insane,
Rochester, Minn.

Cf 131
+

Oct 19/93. Was removed in bed ward today, when he got up. Oct 19/93. Appt about as
" 31 usual; working again. Oct 31/93. Appetite good. No complaint. Does not walking,
with the rest; Reads some. Plays games. Works on C2. Is quite deluded. Talks very
abusively of Mr. Kaiser, a patient, as a "Jew". Has good physical health.
Nov 1/93. Wt 133 pds. Has lost some in flesh. Nov 10/93. Is cranky at times. Works on C2.
(carried to page 28)

Second Hospital for the Insane,
Rochester 6th Nov. 1892.

Postmaster of Postoffice —
Waverly,
Wrigth, County. Minn.

Dear Sir Postmaster.

Sometimes ago I wrote a Letter in the Town Waverly too my Native home of Schweitzerland in Europa. Sir, I doe Expect to gete a Letter from the City Bern in Schweitzerland of my Sister & Brother in Law, adressed too Postoffice Waverly white my name: Albert N. Soutter.
If you gete such Letter, please send the Letter, too the Second States Hospital for the Insane, Rochester. In the time, I wrote the Letter to Schweitzerland, I have worked in the Town of Waverly in the Tailorshop for Merchant-Tailor Brandser.

1892
Nov 15/16 " 17 " 25 " 30 Dec 5 " 6 " 7 " 12 " 15 " 28 1893 Jan 3/13 " 14 Feb 1/11 " 12

[illegible] bad things about him (S). Febr 12/93. Continues quiet & restful at night, apparently sleeping well. Works round. Dawdling & oblidging. Still retains his suave manner in conversation — Is steadily gaining in bodyweight.

Mar 17 Mar 17/93. Asked the D. who had just returned from some absence, if he dont loves here, by express, while away?. Saying that the loves had been sent by express, Containing yellow-packets, mosquitos

night, over his bed, & the insects let loose around him, & singing about him. He hears them & sees them. Hears them in his right Ear only. He would [illegible] new which was. Mar 24/93. Has grown even worse day, that all patients had been instructed & restless & uneasy. Mar 28/93. Restless and [illegible] now of his ears.

[illegible] sleeps with cap drawn tightly over his head, hands in the past 4 meals. Apl 21/93. ate no breakfast yesterday takes but little. Apl 25/93. Resumed eating today.

[illegible] to a friend. May 18/93. Conduct & behavior as usual. [illegible] in flesh. Occasionally, does some work at tailoring [illegible] time good. May 31/93. Appetite good; bowels [illegible] ward work. Does not speak of his delusions as [illegible] regularly. Does some odd jobs at tailoring occasionally. [illegible] during past 2 weeks. Physical health quite good [illegible] we. Has recently been deprived of the privileges he [illegible] to work at the tailor Shop & has been very industrious [illegible] more work. Still helps with ward work on C2 — good. Bowels regular. Is easily agitated & is free in conversation. Remarked, that he suffered as he came here a year before, and said, now, that he suffered so much that time that he would never run away again. Has resumed work, this time at the Tailor-Shop at the Annex. Seems quite happy & contented here. Clean tidy & of good personal habits. In good bodily health.

Aug 3 Aug 3/93. Has lost considerably in flesh the past 2 months, without any apparent cause.
" 31 Aug 31/93. No change to note, in past month, except as per last note.
Sep 8 Sep 8/93. Is regaining some of his lost flesh. Works well; seems in good humor. Appetite and rest " 30 at night are good. Helps with work on C2. Sep 30/93. Appetite good. Quiet & well behaved. Assists willingly with ward work. Occasionally has one of his "peculiar spells" similar to those previously noted. Is in good physical condition. —
Oct 3/9 Oct 3/93. Has made another slight gain in weight. Oct 9/93. Has been allowed a few small " 10 privileges, such as smoking outside &c. While so doing today, he Eloped. Oct 10/93. Was traced to " 11 Elgin & brought back. Oct 11/93. Not feeling well, went to bed today. Given medicine. — " 16/19 Oct 16/93. Has remained in bed until today, when he got up. Oct 19/93. Ept about as " 31 usual; working again. Oct 31/93. Appetite good. No complaint. Does not walking with the rest; Reads some. Plays games. Works on C2. Is quite deluded. Talks very abusively of Mr Kessler, a patient, as a "Jew". Is in good physical health.
Nov 1/10 Nov 1/93. Wt 133 lbs. Has lost some in flesh. Nov 10/93. Is cranky at times. Works on C2 —

(carried to page 25)

I wase taken away at ones fram the tailarshop, by the tawn — Officeer of Waverly, braught too Judgment of the Cawnty Seat Buffalo of Wrigth Cawnty. I tell yaur, I hade a afull wild Ride on the Carr fram Buffalo to this tawn of Rochester, I wase regular stunned, I Cauld not Speak, nat think, I have seen too much what made me awfull afraid, I have seen the Sheriff & the Conduckter as Men whit twoo Heads & many Eyes & the Conduckter rann the train awfull wild, fast wee went over Hills & Valleys, over trees & hauses, every Moment I thaught the all train wauld traw over & Shmass everything intoo Smal Splinters.

I wase awfull sick when the Sheriff & I came here, but naw I feel a great deal better again, I dont Knaw yet when I Cane go again, wauld like to come again to Waverly to wark for Merchant Tailar — Brandser, I cane came to Waverly again, so saon I gete Liberty. Postmaster! I tell yaur one thing & I tell yaur the real thrut fram my heart, this Hospital here in Rochester, are a very good Place & hame for the Insane, Every Inmate gete used & threated rigth & good, wee gete plenty to eat, Many Thanks too aur Lord in Haven. Many Thanks too aur warthy & good Doctors, Oh, they warking hard!

well. Wark sound. Lawelling & oblidging. Still retains his suave manner in Conversation. Is steadily gaining in bodyweight.

Mar 17/93. Asked the W. who had just returned from some absence, if he dent loves here, by express, while away?. Saying that the loves had been sent by express, Containg yellow-packets, mosquitos

night, over his bed, & the insects let loose around & singing about him. He hears them & sees them. Hears them in his right Ear only. He would new who it was. Mar 21/93. Has ground even more day, that all patients had been instructed & restless & uneasy. Mar 28/93. Restless and pain of his ears.

sleeps with cap drawn tightly over his head, hands in- & fast & meals. Apl 21/93. ate no breakfast yes- takes but little. Apl 22/93. Resumed eating & day.

to a friend. May 18/93. Conduct & behavior as usual. in flesh. Occasionally, does some work at tailoring times good. May 31/93. Appetite good; bowels ward work. Does not speak of his delusions as regularly. Does some odd jobs at tailoring occasionally during last 2 weeks. Physical health quite good ve. Has recently been deprived of the privilege he to work at the tailor Shop & has had very in- some work. Still helps with ward work on Cr — good. Bowels regular. Is easily agitated & is ree in conversation. Remarked, that he suffered s because he ran away once before, and said, now, that he suffered so much that time that he would never run away again. Has resumed work, this time at the Tailor-Shop at the Annex. Seems quite happy & contented here. Clean tidy & of good personal habits. In good bodily health.

Aug 3 — Aug 3/93. Has lost considerably in flesh the past 2 month, without any apparent cause.
" 31 — Aug 31/93. No change to note, in past month, except as per last note.
Sep 8 — Sep 8/93. Is regaining some of his lost flesh. Works well; seems in good humor. Appetite and rest
" 30 — at night are good. Helps with work on Cr. Sep 30/93. Appetite good. Quiet & well behaved. Assists willingly with ward work. Occasionally learns of his "peculiar spells" similar to those previously noted. In good physical condition. —
Oct 3/9 — Oct 3/93. Has made another slight gain in weight. Oct 9/93. Has been allowed a few small
" 10 — privileges, such as smoking outside &c. While so doing to day, he Eloped. Oct 10/93. Was traced to
" 11 — Elgin & brought back. Oct 11/93. Not feeling well, went to bed to day. Given medicine. —
" 16/19 — Oct 16/93. Has remained in bed until to day, when he got up. Oct 19/93. Appetite about as
" 31 — usual; working again. Oct 31/93. Appetite good. No complaint. Does not walking with the rest; Reads some. Plays games. Works on Cr. Is quite deluded. Talks very abusively of Mr. Lawier, a patient, as a "Jew". In good physical health.
Nov 1/10 — Nov 1/93. Wt 133 pds. Has lost some in flesh. Nov 10/93. Is cranky at times. Works on Cr —

(carried to page 28)

Many Thanks too all the Officers & our worthy Visitors, good Attendents & Visitors,

Many Thanks too all the People of this State of Maine.

Many Thanks too all the American People of this Land.

From James Peck, spare a Penniless & Dying Pauper

Amerikan, threatening me with all manner of Deaths, Thanks, Thanks, Thanks, but all agen, threatening me well, better, than I have served it. Thanks, Thanks, Thanks, too agen all. Postmaster, Please give my best regards to my Boss Mr. Braudson & Mrs. Braudson the Hotel Keeper Bar Mr. Moorman the Postmaster, I hope soon again see Waverly, but dont threaten me Albert N. Soutter. Inmate in the Insane Asylum at Rochester Minn.

1892

Nov 15/10 " 17 " 23 " 30 Dec 5 " 6 " 7 " 12 " 15 " 28

1893 Jan 3 " 14 Feb 1

Nov 17 heavily gaining in corpulency.

Mar 17/93. Asked the D^r. who had just returned from some absence, if he sent boxes here, by express, while away?. Saying that the boxes had been sent by express, containg yellow-packets, mosquitos

Mar 17 bumble-bees &c & that the boxes were opened at night, over his bed, & the insects let loose around him. These insects bother him greatly, buzzing & singing about him. He hears them & sees them in his sleep only; if he awakes they are gone. Hears them in his right Ear only. He would shoot the man who sent them Live, if he knew who it was. Mar 24/93. Has grown even more disturbed since the last note, thinking, today, that all patients had been instructed to kill him by one of the Attendants. Is quite restless & uneasy. Mar 28/93. Is restless and excited today. Apl 7/93. Has a discharge from one of his ears.

Apl 7 " 13 Apl 13/93. Has seemed less disturbed lately. Sleeps with cap drawn tightly over his head, hands encased in black mitts. Apl 17/93. Has refused the past 4 meals. Apl 21/93. ate no breakfast yesterday, & refused food today. When he does eat, he takes but little. Apl 22/93. Resumed eating today.

" 17/24 " 22 " 24 Apl 24/93. Complains, today, of diarrhoea.

May 1/93. See attached copy of letter of this date, to a friend. May 18/93. Conduct & behavior as usual. Seems now to be eating quite well. Is gaining slightly in flesh. Occasionally, does some work at tailoring

May 1/18 " 31 and seems to be less disturbed of late. Habits continue good. May 31/93. Appetite good; bowels regular. No cough noticed. Works on C^r, at ward work. Does not speak of his delusions as he did a month or so ago. Goes out walking regularly. Does some odd jobs at tailoring occasionally.

June 5 " 30 June 5/93. Has made a great gain in flesh during past 4 weeks. Physical health quite good. June 30/93. Manner is very polite, even suave. Has recently been deprived of the privilege he has had for some time of going by himself out to work at the Tailor Shop & has been very indignant about the matter, refusing to do any more work. Still helps with ward work on C^r.

July 31. July 31/93. Appetite, sleep at night and work good. Bowels regular. Is easily agitated & is inclined to be cranky, at times. Quite free in conversation. Remarked, that he suppose the reason he was deprived of the above privilege was because he ran away once before, and said, now, that he suffered so much that time that he would never run away again. Has resumed work, this time at the Tailor-Shop at the Annex. Seems quite happy & contented here. Clean tidy & of good personal habits. In good bodily health.

Aug 3 " 31 Aug 3/93. Has lost considerably in flesh the past 2 months, without any apparent cause. Aug 31/93. No change to note, in past month, except as per last note.

Sep 8 " 30 Sep 8/93. Is regaining some of his lost flesh. Works well; seems in good humor. Appetite and rest at night are good. Helps with work on C^r. Sep 30/93. Appetite good. Quiet & well behaved. Assists willingly with ward work. Occasionally has one of his "peculiar spells" similar to those previously noted. Is in good physical condition.

Oct 3/9 " 10 " 11 " 16/19 " 31 Oct 3/93. Has made another slight gain in weight. Oct 9/93. Has been allowed a few small privileges, such as smoking outside &c. while so doing today, he Eloped. Oct 10/93. Was traced to Elgin & brought back. Oct 11/93. Not feeling well, went to bed today. Given medicine. Oct 16/93. Has remained in bed until today, when he got up. Oct 19/93. Up & about as usual; working again. Oct 31/93. Appetite good. No complaints. Goes out walking, with the rest; Reads some. Plays games. Works on C^r. Is quite deluded. Talks very abusively of Mr. Lozier, a patient, as a "Jew". In good physical health.

Nov 1/10 Nov 1/93. Wt 133 pds. Has lost some in flesh. Nov 10/93. Is cranky at times. Works on C^r.

(carried to page 20)

Whole No. 3181

Residence, Redwing Minn

Date Admission, 16th November 1892

Admitted by, D. Phelps Hour, 7 P.M.

How Sent, O. D. Anderson, Jo. Co. Goodhue County

Sex, Male

Age, 20

Civil Condition, Single

Children, None

Age Youngest Child,

Occupation, Jeweller

Degree Education,

Profession Religion, Is a church member

Habits, Good, as far as known

Nativity, Redwing, Minn

Physicians Committing, C. N. Hewett & B. Jaehning

Correspondents, E. R. Hendel
Redwing, Minn

No. for Year, 93.

Insane Relatives, Insanity not hereditary

Cause Exciting, not known; reputation has been good.

Cause Predisposing, Sexual excesses probably.

Form, Mania - Acute

Accompanying Bodily Disorder, None

Suicidal or Not, Has threatened to do so.

Date of this Attack, Saturday, Nov 12th

Duration, about 4 days.

No. of Attack, 1st

No. of Admissions,

Age First Attack, 20 Years

Time of Leaving, Aug. 7th '93

Time in Hospital, 7 mos, 21 ds.

Result, Improved.

Letter Rec'd from Chas Sederberg Sarnia Park Ont June 24/27/93 relative to his present condition. Says he is pleasantly situated, has employment, is well, has not had a threatened attack since he left here, is gaining in flesh, has not had any trouble with his heart since he left here, has not had any pain in the region of the heart, has not had any shortness of breath, has not had any dizziness, has not had any swelling of the feet or ankles, has not had any trouble with his kidneys, has not had any trouble with his bowels, has not had any trouble with his stomach, has not had any trouble with his liver, has not had any trouble with his spleen, has not had any trouble with his pancreas, has not had any trouble with his gall bladder, has not had any trouble with his urinary bladder, has not had any trouble with his prostate gland, has not had any trouble with his testicles, has not had any trouble with his penis, has not had any trouble with his scrotum, has not had any trouble with his anus, has not had any trouble with his rectum, has not had any trouble with his sigmoid flexure, has not had any trouble with his descending colon, has not had any trouble with his transverse colon, has not had any trouble with his ascending colon, has not had any trouble with his cecum, has not had any trouble with his appendix, has not had any trouble with his small intestine, has not had any trouble with his duodenum, has not had any trouble with his jejunum, has not had any trouble with his ileum, has not had any trouble with his stomach, has not had any trouble with his esophagus, has not had any trouble with his pharynx, has not had any trouble with his larynx, has not had any trouble with his trachea, has not had any trouble with his bronchi, has not had any trouble with his lungs, has not had any trouble with his pleura, has not had any trouble with his mediastinum, has not had any trouble with his pericardium, has not had any trouble with his heart, has not had any trouble with his aorta, has not had any trouble with his pulmonary artery, has not had any trouble with his pulmonary veins, has not had any trouble with his left atrium, has not had any trouble with his left ventricle, has not had any trouble with his right atrium, has not had any trouble with his right ventricle, has not had any trouble with his interventricular septum, has not had any trouble with his interatrial septum, has not had any trouble with his coronary arteries, has not had any trouble with his coronary veins, has not had any trouble with his coronary sinus, has not had any trouble with his coronary ostium, has not had any trouble with his coronary valve, has not had any trouble with his coronary sinus, has not had any trouble with his coronary ostium, has not had any trouble with his coronary valve.

EXAMINATION ON ADMISSION.

Exd by D. Baker Nov 19/92

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, at times much Confused; again Clear

Quick or Sluggish, active

MEMORY:

Past Events, Seems good

Recent Events, "

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Fairly Correct

REASONING POWER:

Ordinary Subjects, Somewhat perverted

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes

Depressed,

DELUSIONS:

Systematized or Not, General; Not Systematized

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None detected

ILLUSIONS:

CONVERSATION:

~~Coherent or~~ Incoherent, at times

Voluble or Reticent, Voluble

GENERAL DESCRIPTIVE REMARKS:

Says, had impulse to kill himself, which he resisted.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9½ inches WEIGHT, 150 lbs (Has weighed 157 lbs (Greatest) NUTRITION, Fair

WOUNDS OR ABNORMALITIES, Scar on left scapula; Dandruff

TONGUE, Tremors, Coarse, irregular Coatings, Slight, moist Promptness Movement, Fairly prompt

PUPILS, Equality, Slightly unequal; right larger Size, Slightly dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Finger to nose, eyes shut, good.

Legs, Standing on foot, Fairly good; Standing Eyes shut, Fairly good.

TREMORS, Hands, None Tongue, Coarse, irregular

Facial Muscles, None General,

REFLEXES, Patellar, Equal; Slightly exaggerated

Other Reflexes,

ARTICULATION, Hesitating, Slurred, Good

FACIAL EXPRESSION, About normal

SENSIBILITY, Seems good.

HEART, No murmurs; 2nd Sound accentuated

LUNGS, Seem good; Girth 35in. Expansion 3½ in.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, About	Constipated,	Irregular,
APPETITE, Good, Very	Medium,	Poor,
SLEEP, Good, Now, Has been	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short ONSET GRADUAL OR SUDDEN, Sudden

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; has had apoplectic stroke; is paralyzed partly.

Father or Pat. Relations, Father dead; in 1877; thinks rheumatism of heart.

Brothers or Sisters, 1 brother; thinks not in good health; 2 sisters living; both healthy.

1892

This man was brought by Deputy Batton and Mr Stendel. The following is the history of case. Habits are good as far as known, though he says he has been visiting houses of ill fame - drinking beer. Cause of attack not known; form is acute, agitated; no accompanying bodily disorder. First symptoms manifested Saturday Nov 12th (about 4 days ago) - This is first attack. Charges himself with sexual excesses. Has written letters showing he has disposition to injure others. Threatened to kill his step-father. Has also threatened suicide. Has no disposition to filthy or destructive habits. Has been confined to his room since Sunday. Took a few doses of sulfonal & bromide & potassium.

Nov 17 Nov 17/92. Was somewhat restless, talking about 5 hours, maceless, sleeping about 2 hours, last night. Got up at 1 a.m. and asked to be put to work, washing dishes, or making beds. AM. Pulse 84. Has been noisy and maniacal; is sleepy now & quiet. PM. Pulse 81. Had a spell in which he fell on the floor & cried; says he has delirium. Nov 18/92. Rested well & slept 8 hours last night. AM. 18 Ate very little breakfast. Is restless & excited. Nov 19/92. Was quiet, rested well & slept 8 hours 19 last night. AM. Pulse 74. Nov 20/92. Slept 8 hours last night. AM. Pulse 68. Is constipated 20 Nov 21/92. Was very noisy for 2 hours, last night, sleeping 5 hours. AM. Pulse 96. Is very excited 21 and talkative this morning, claims the Dr drugged him (medicine given was hypnotic he night before, probably), and made him crazy. Talks abusively to the Dr "I am not a criminal" - Had previously been good natured & talked pleasantly. In the afternoon, begged the Dr's pardon for what he had said and said he was sorry, and then began to be somewhat abusive again, 22 almost in the same breath. Nov 22/92. Quite noisy for an hour & a half, sleeping 6 hours 23 last night. AM. Pulse 78. Nov 23/92. Quite noisy for an hour, sleeping 6 hours, last night. 24 AM. Pulse 100. PM. Pulse 80. Has been out walking twice today. Nov 24/92. Noisy for 2 hours, sleeping 6 hours, last night. AM. Pulse 74.

Dec 3 Dec 3/92. Sleeps irregularly; some nights, is quiet & sleeps well; on others is restless and noisy and sleeps only from 4 to 6 hours. Pulse has been 78. 76. 96. (PM same date 100) (2) 78. 72. and 84 5/7 on the past 6 and present morning. Dec 5/92. Wt 151½ lbs. Pulse 84. Dec 7/92. Has rested and slept well since the 5th inst. Today was mischievous & troublesome & in an attempt to control him, one of the attendants was kicked in the mouth by him. Was transferred to C3 and 15 put under close watch. Dec 15/92. On nearly one-half the nights, rests and sleeps well; on the balance, is more or less noisy, sleeping from 4 to 6 hours. Ever since admission, has been clean in habits, fairly tidy, not destructive; as a rule, good-natured, restless, active mentally and physically; talking a great deal in moderately loud tones, matter relevant but whipping about from one subject to another; actively mischievous, teasing and bothering other patients, even sometimes striking them, but laughs at the matter as if it were intended only as a joke. Does not express definite delusions but seems to be a typical case of simple mania. Takes food regularly and in fair quantities & is in quite good bodily health. Strychnin has been used on him with some apparent good results.

16 Dec 16/92. Has been unusually ugly yesterday & today, striking 6 different patients.

19 Dec 19/92. Has been maniacal, loudly noisy, pugnacious and is getting destructive: in

28 fact, is growing worse. Now transferred to C3 to sleep. Dec 23/92. Talks abusively and

1893

Dec 24 is ugly. Eats well. Dec 24/92. Is some quieter this morning, but behaving strangely. Pulse 84. —
" 25/28 Dec 25/92. Fought attendant to-day and was kept in seclusion. Dec 27/92. Is very wild; bushells;
quiets at times. Is loud [illegible]

NAME. C A. Sederberg

DATE, 189 3.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3	152	78	½	
Dec 27	156	80	4	
Mar 2d	160	102	4	
Apl 4th	162½	80	2½	
May 5th	169	84	6½	
June 5th	165	74		4
July 15th	157	62		8
Aug 21st	155	80		2

HLY SUMMARY RECORD.

erberg C A. CASE NO. 3181 R. 30m.

ame on ward December 5th 1892. - - - -
ard from B.J.E.) - - - - - - - - - - -
tion Good. Appetite Good. Habit of
nd to be fed on hall while on ward.
ey destructive and dirty engaged in
hts. Secluded 3/4 hours and now in restraint
g month of Dec 1892. Restless and
ey nights for about 4 months became
~~sort of demented state~~ for one month
ghtened up became more rational
hts and a desire to become well
. anxious to work, read write and
l and Amusement hall. - - - - - - -
orking out doors for a few days. - -
ee by Relatives and Friends while on ward.
ew sick in bed and required but little
Transfered to B.J.E. May 18th 1893.

ge number, with only 3 or 4 hours, rather the majority,
s been somewhat mischievous, at times pugnacious,
somewhat destructive, at times, filthy. Does not show much mental enfeble-
-ment - Appetite excessive & is gaining in weight.

Apl 14 Apl 14/93. Is occasionally restless & noisy for a few hours at night, but sleeps quite well, as a rule, from 6 to 9 hours. Occasionally somewhat noisy & pugnacious by day. Seems mischievous, rather than malicious. Can carry on a fairly coherent & relevant conversation for a time. Has written a few letters. Was out to work, one day.

May 1 May 1/93. Has today visited by a friend. May 2/93. Found playing checkers this morning; unusual
" 6 for him - May 6/93. Struck a fellow-patient today. Has been quarrelsome & fighting but not so much
" 18 as formerly. May 18/93. Sleep & rest at night have greatly improved, quite they are now quite good.
Appetite has been good for some time and he has steadily gained in flesh, month by month. Bowels
have been quite regular, only occasionally constipated. Has worked outside some, well & willingly. He now
seems quite sensible & talk is fairly coherent. Was today moved to B3.

(carried to page 264)

1892

This man was brought by Deputy Barlow and Mr Stendel. The following is the history of case.
Habits are good as far as known, though he says he has been visiting house
Cause of attack not known; form is acute, stated; no accompanying
symptoms manifested. Saturday Nov 12th (about 4 days ago) - This is fo
himself with sexual excesses. Has written letters showing he has de
threatened to kill his step-father. Has also threatened suicide.
filthy or destructive habits. Has been confined to his room since Au
of sulfonal or bromide of potassium.

Nov 17 Nov 17/92. Was somewhat restless, talking about rooms, macerless, sle
Got up at 1 a.m. and asked to be put to work, washing dishes, ornam
noisy and maniacal; is sleepy now & quiet. Pk. Pulse 81. Had a
" 18 slow & quiet; says he has delirium. Nov 18/92. Rested well & sl
" 19 ate very little breakfast. Is restless & excited. Nov 19/92. Was q
" 20 last night. Am. Pulse 74. Nov 20/92. Slept 8 hours last night
" 21 Nov 21/92. Was very noisy for 2 hours, last night. Sleeping o h
and talkative this morning, claims the Dr drugged him (medic
before, probably), and made him crazy. Talks abusively to t
had previously been good natured & talked pleasantly. With
what he had said and said he was sorry, and then bega
" 22 almost in the same breath. Nov 22/92. Quite noisy fo
" 23 last night. Am. Pulse 78. Nov 23/92. Quite noisy for an
" 24 Am. Pulse 100. Pm. Pulse 80. Has been out walking twice
sleeping 6 hours, last night. Am. Pulse 74.

Dec 3 Dec 3/92. Sleeps irregularly; some nights is quiet & sleep
and sleeps only from 4 to 6 hours. Pulse has been 78
" 5/7 in the past 6 and present mornings. Dec 5/92. Wt 151½ pu
and slept well since the 3d inst. Today was mischievous & troublesome &
Control him, one of the attendants was kicked in the mouth by him. Was transferred to C
" 15 put under close watch. Dec 15/92. On nearly one-half the nights, rests and sleeps well; on the
balance, is more or less noisy, sleeping from 4 to 6 hours. Ever since admission, has been clean
in habits, fairly tidy, not destructive; as a rule, good-natured; restless, active mentally
and physically; talking a great deal in moderately loud tones, matter relevant but
skipping about from one subject to another; actively mischievous, teasing and bothering
other patients, even sometimes striking them, but laughs at the matter as if it were
intended only as a joke. Does not express definite delusions but seems to be a typical
case of simple mania. Takes food regularly and in fair quantities & is in quite good
bodily health. Hyoscin has been used on him with some apparent good results.
" 16 Dec 16/92. Has been unusually ugly yesterday & today. Striking 6 different patients.
" 19 Dec 19/92. Has been maniacal, loudly noisy, pugnacious and is getting destructive; in
fact, is growing worse. Now transferred to C 3 to sleep. Dec 22/92. Talks abusively and

Dec 24 is ugly. Eats well. Dec 24/92. Is some quieter this morning, but behaving strangely. Pulse 84. —
" 25/28 Dec 25/92. Fought attendants today and was kept in seclusion. Dec 29/92. Is very wild, hyspells;
[illegible] at other times. Is held by the Attendants, to prevent his fighting, destroying clothing and
[illegible] refusing some meals. Has been constipated. —

Vol 20

MONTHLY SUMMARY RECORD.

PATIENT'S NAME Sederberg C A. CASE NO. 3181 R. 30m.

DATE: May 18" 1893

: Came on ward December 5" 1892.
(Transfered to ward from B.2.E.)
: Physical Condition Good. Appetite Good. Habits of
: Over eating and had to be fed on hall white on ward.
: Was very noisy, destructive and dirty, engaged in
: numerous fights. Secluded 37 hours and in rest suit
: 9 hours during month of Dec. 1892. Restless and
: extremely noisy nights for about 4 months, became
: quiet and in a sort of demented state for one month
: gradually brightened up became more rational
: neater in habits and a desire to become well
: and go home. Anxious to work, read, write and
: attend chapel and Amusement hall.
: Has been working out doors for a few days.
: Visited twice by Relatives and Friends white on ward.
: Has never been sick in bed and required but little
: medicine. Transfered to B.1.E. May 18" 1893.

mornings with no [illegible] with from 6 to 8 hours. By day, has been somewhat
somewhat destructive & at times, filthy. Does not show much mental enfeeble-
-ment - appetite excessive & is gaining in weight.

Apl 14 Apl 14/93. Is occasionally restless & noisy for a few hours at night, but sleeps quite well, as a rule,
from 6 to 9 hours. Occasionally somewhat noisy & pugnacious by day. Seems mischievous,
rather than malicious. Can carry on a fairly coherent & relevant conversation for a time. Has
written a few letters. Was out to work, one day.

May 1 May 1/93. Has today visited by a friend. May 2/93. Found playing checkers this morning, thanked
" 6 for him. May 6/93. Struck a fellow-patient today. Has been quarrelsome & fighting but not so much
" 18 as formerly. May 18/93. Sleep & rest at night have greatly improved, until they are now quite good.
Appetite has been good for some time and he has steadily gained in flesh, 9 weeks by month. Bowels
have been quite regular, only occasionally constipated. Has worked outside some, well & willingly. He now
seems quite sensible & talk is fairly coherent. Was today moved to 1B.

(carried to page 264)

1892

Nov 17 Thi… Nab… Cau… Sym… He… 2… 4…

" 22 alone.

" 23 last night. AM. …

" 24 AM. Pulse 100. PM. Pulse 80. …
Sleeping 6 hours, last night. AM. Pulse 74.

Dec 3 Dec 3/92. Sleeps irregularly; some nights, is f… and sleeps only from 4 to 6 hours. Pulse …

" 5/7 in the past 6 and present mornings. Dec 5/92. 24 151 - … and slept well since the 3d inst. Today was mischievous & troublesome … Control him, one of the attendants was kicked in the mouth by him. Was transferred to C 3 and

" 15 put under close watch. Dec 15/92. On nearly one-half the nights, rests and sleeps well; in the balance, is more or less noisy, sleeping from 4 to 6 hours. Ever since admission, has been clean in habits, fairly tidy, not destructive; as a rule, good-natured, restless, active mentally and physically; talking a great deal in moderately loud tones, matter relevant but whispering about from one subject to another; actively mischievous, teasing and bothering other patients, even sometimes striking them, but laughs at the matter as if it were intended only as a joke. Does not express definite delusions but seems to be a typical case of simple mania. Takes food regularly and in fair quantities & is in quite good bodily health. Hyoscin has been used on him with some apparent good results.

" 16 Dec 16/92. Has been unusually ugly, yesterday & today, striking 6 different patients.

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" 20 fact, is growing worse. Now transferred to C 3 to sleep. Dec 22/92. Talks, abusively and

1892

Dec 24 is ugly. Eats well. Dec 24/92. Is some quieter this morning, but behaving strangely. Pulse 84. —

" 25/28 Dec 25/92. Fought attendants today and was kept in seclusion. Dec 28/92. Is very wild, hyspells; quieter at other times. Is held by the Attendants, to prevent his fighting, destroying clothing and denuding himself. Has taken food irregularly, refusing some meals. Has been constipated. —

Dec 31/92. Is perfectly wild, this morning.

" 31/Jan 14 Jan 3/93. Pulse 132 fair. Pulse 78. Jan 14/93. During the past 14 weeks, has been, nights, more or less restless and noisy; often extremely so & for many hours; sleeping, at times, none at all; — usually from 3 to 5 hours; rarely well; averaging about 4 hours each night. At times, would not stay in bed at all, or keep any bedding on him; and, during the cold spell, was restrained in bed, to keep him covered, for a night or two. Pulse was, at that time, quite rapid; has, lately, been slower and about normal. For a time, appetite was capricious; is now voracious. For a time, was extremely ugly, fighting, spitting at one, talking abusively; has grown some-what quieter and is almost uniformly good-natured.

" 18 Jan 18/93. For past 14 nights, has been quite noisy, sometimes extremely so, for from 2 to 4 hours, each night; out of bed frequently; sleeping only a few hours. Last night, was extremely noisy & continually getting out of bed & slept none. Tore up his bedding. Struck the night-watch a

" 21 blow in the face when the latter was taking him to the water-closet. Jan 21/93. Has been quiet

" 29 and sleeping 9 hours on each of past 3 nights. Jan 29/93. For the past 8 nights, has been quite or extremely noisy, restless & out of bed for from 3 to 4 hours; sleeping 4 or 5 and on one night 7 hours. —

Feb 1/14 Feb 1/93. For past 6 nights has apparently been more quiet & restful sleeping 7 to 8 hours each night.

" 14 Feb 14/93. Since last note, has been somewhat restless, noisy & out of bed at night, sleeping from 4 to 6 and occasionally 7 and 8 hours. Is becoming quite dirty in his habits. By day, has, of late, been somewhat better behaved; does not now seem so ugly, pugnacious and abusive as formerly. Bodily health seems good. —

Mar 16/Apr 1 Mar 16/93. Visited today by his father. Mar 21/93. Since the 14th ult. has passed but one night with no sleep; quite a large number, with only 3 or 4 hours, rather the majority, with from 6 to 8 hours. By day, has been somewhat mischievous, & at times pugnacious, somewhat destructive & at times, filthy. Does not show much mental enfeble-ment — appetite excessive & is gaining in weight.

April 14 April 14/93. Is occasionally restless & noisy for a few hours at night, but sleeps quite well, as a rule, from 6 to 9 hours. Occasionally somewhat noisy & pugnacious by day. Seems mischievous, rather than malicious. Can carry on a fairly coherent & relevant conversation for a time. Has written a few letters. Was out to work, one day.

May 1/2 May 1/93. Has today visited by a friend. May 2/93. Found playing checkers this morning; knocked

" 6 for him — May 6/93. Struck a fellow-patient today. Has been quarrelsome & fighting but not so much

" 18 as formerly. May 18/93. Sleep & rest at night have greatly improved, quite they are now quite good. Appetite has been good for some time and he has steadily gained in flesh, 9 pounds by month. Bowels have been quite regular, only occasionally constipated. Has worked outside some, well & willingly. He now seems quite sensible & talk is fairly coherent. Was today moved to 13.

(carried to page 264)

Personal and Medical History of Michael Murphy

Whole No. 3182.

Residence, Winona, Minn

Date Admission, 16th November 1892

Admitted by, D. Filbourne Hour, 7 PM

How Sent, St L. Buck Jr. P., Winona County

Sex, Male

Age, 32

Civil Condition, Single Widower

Children, one

Age Youngest Child,

Occupation, Laborer

Degree Education,

Profession Religion, Catholic (?)

Habits, Temperate

Nativity, Ireland

Physicians Committing, D. A. Stewart & W. J. English

Correspondents, B. Tighe, Winona, Minn

No. for Year, 94.

Insane Relatives, not known; (Insanity hereditary, not known)

Cause Exciting, unknown

Cause Predisposing,

Form,

Accompanying Bodily Disorder, None

Suicidal or Not, Not

Date of this Attack, 1st symptoms, 7 years ago

Duration, 7 years

No. of Attack, 1st

No. of Admissions,

Age First Attack, about 27 years

Time of Leaving, 10th January 1894.

Time in Hospital, 1 year 1 month. 25 Days.

Result, Died. Apoplexy.

EXAMINATION ON ADMISSION.

Exd by Dr. Baker Nov 28/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, fairly active

MEMORY:

Past Events, Seems inaccurate; says it is poor.

Recent Events, Thinks he has been here from 2 to 3 weeks

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Seems to be rather limited

Correct or Illusive, fairly accurate

REASONING POWER:

Ordinary Subjects, Seems to be in exercise. Thinks

Own Mental State, he was sent here to appease the minds

Special Subjects, of the Sisters, where he had been kept

GENERAL DESCRIPTIVE REMARKS:

Left leg has irregular, involuntary movements on intention - Calf of left leg measured 9½ in that of right leg 10¼ in - largest part - Rt. thigh 13½ in left 12¾ in. Rt fore-arm largest part, 8¾ in; left, Corresponding part, 8 in; Rt biceps 8¼ in - left 7¼ in - Seems capable of drawing his face equally both sides. Says Bishop Cotter left him in the shape he is - having no control of his left hand, loss of appetite &c - all done to appease the Sisters "at convent."

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Inclined to be irritable

DELUSIONS:

Systematized or Not,

Special Subjects, Seems to be concerning Bishop Cotter & Sisters

Transitory or Not,

HALLUCINATIONS: 2.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent, Talks fairly well

Personal and Medical History of Michael Murphy

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7½ in WEIGHT, 112 pounds. NUTRITION, Poor

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Quite Steady Coatings, Considerable Promptness Movement, protruded to left; can be moved to either side however rather deliberate

PUPILS, Equality, Equal Size, normal

Response Light, yes Accommodation, Yes

SIGHT, Somewhat impaired

HEARING, Impaired

COORDINATION, Arms, Finger to nose, Eyes shut, right hand fairly good; left poor.

Legs, Standing, Eyes shut, very feebly.

TREMORS, Hands, Left hand, coarse (voluntary) movements in intention; at almost rest. Tongue, Quite Steady - some coarse effort -

Facial Muscles, Slight General,

REFLEXES, Patellar, Right Patellar exaggerated; left seems absent. Does not reinforcement

Other Reflexes,

ARTICULATION, ~~Hesitating~~, fairly prompt Slurred, Somewhat

FACIAL EXPRESSION, dull

SENSIBILITY, Seems present

HEART, Sounds rather faint; no murmurs heard

LUNGS, respiratory murmur somewhat harsh at apex; resonance good.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, fairly	Careless,
BOWELS, Normal,	Constipated, tendency to be	Irregular, Yes
APPETITE, Good,	Medium,	Poor, Irregular; refuses food sometimes
SLEEP, Good,	Poor,	Irregular, somewhat; attempts restless
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Some time ONSET GRADUAL OR SUDDEN, Gradual

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother dead; age about 65; don't know cause; was healthy.

Father or Pat. Relations, Father died, about 55; Cause unknown; Claims healthy.

Brothers or Sisters, 2 brothers; don't know if living; 4 sisters in old Country; don't know if alive; Claims all are healthy

Personal and Medical History of Michael Murphy

1892

This man was brought here by Sheriff Braley, with following history. Is of temperate habits; supposed cause of attack, unknown; form is chronic; no accompanying bodily disorder. First symptoms were manifested 7 years ago; loss of nerve control; this is first attack; Insanity is now manifested by his being cross, petulant & hard to manage. Has shown no disposition to injure others; not suicidal; not filthy or destructive. Has not been restrained or confined. Was an inmate of the Hospital in Lafayette; also at Winona; no effect. (General Paresis).

Dec 5 Dec 5/92. Has, at times, been noisy by night; quite often somewhat restless; several times quite so; sleeping, usually, 6 or 7 hours; occasionally, less, each night. Has kept his bed daily;

" 12 Dec 12/92. Quite often slightly restless at night, sleeping 6. 7. to 8 hours. Has kept his bed every day, since admission. From admission, to the 28th ult., Pulse, Respirations & temperature taken morning & evening. From the latter date to the present, pulse only, twice daily. From attached record of these data, it will be seen that temperature (rectal) was quite often sub-normal in fact, as a rule, and never rose above 98.6. Respiration, slower than normal. Pulse has ranged from 58 to 86, usually between 60 and 75. Complains a good deal of pain in back & in his left side. Bowels are irregular, with a tendency to dryness & hardness of the passages. Appetite has seemed good, food being, daily, in 2 or 3 occasions, refused. Has, however, lost in weight. Wt, on 5th inst, being 94 pds, in underclothing, which (allowing 12 pds for clothing) indicates a loss of 6 pounds in weight, since admission. Has complained a good deal of various things, of his health, of being cold &c. Has delusions of persecution; (See Examination).

" 21 Dec 21/92. Still keeps his bed and is about the same in health & behavior. Weight, on the 19th inst, in underclothing, 91 pounds. Sits up, for a short time, occasionally. —

" 26 Habits are clean. Is never noisy. Talks freely. Dec 26/92. Wt (in underclothing) 83 pds. —

" 31 Has put up no medicine, but refuses to take it. Dec 31/92. See attached record. —

1893

Jan 3/10 Jan 3/93. Wt 91½ pds. Pulse 56 (not taken in underclothing only). Jan 10/93. Wt (in underclothing) 90 pds. —

" 16 Jan 16/93. Is quiet at night, and sleeps only fairly, being restless in his sleep. Lies in bed, by

" 17 day. Refuses medicine and an occasional meal. Is then and does not vomit. Jan 17/93. Wt (in

" 24 underclothing) 93 pounds; a gain of 3 pounds; Jan 24/93. Wt (in underclothing) 93 pds. —

Feb 1/4 Feb 1/93. Wt (in underclothing) 92½ pds; loss of ½ pound. Feb 4/93. On examination to-day, patient shows incoordination, though it is different to test. There is a partial paralysis of left side, probably due to

" 9 some past lesion, and at present condition which seems quite markedly paretic. Feb 9/93. Weight

" 14 (in underclothing) 90 pounds; a further loss of 2½ pounds. Feb 14/93. The paretic & speech now shows

" 16 quite plainly. The general sluggishness is all in line with General Paresis. Feb 16/93. Wt (in underclothing) 90 pounds. Is still confined to his bed. Since last note, as this subject, has been sleeping somewhat better (7 to 8 hours each night), though is frequently reported as restless & uneasy in his sleep; very infrequently, slightly noisy at night. Occasionally complains of feeling cold. Pulse has been normal, very often slightly above. Appetite has been good, though he has been losing in flesh. Bowels have moved fairly & sometimes quite freely (See attached record). —

March March 2/93. Only rarely slightly restless at night; usually restful & sleeping well. Keeps his bed

Personal and Medical History

NAME. Michael Murphy (in underclothing)

DATE. 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
* Feby 2d	91½		1½	
* Mar 2d	94	74	2½	
* " 11th	96½		2½	
* " 18th	96½		—	
* " 25th	97		½	
* Apl 4th	98½	82	1½	
* " 11th	94½			4
* " 18th	98½		4	
* " 26th	98			1½
* May 3d	97½	80		½
* " 15th	93			4½
* " 22d	99½		6½	
* June 19th	101½		2	
* July 5th	100			1½
* Aug 3d	98			2
* Sept 8th	94			4
* Oct 4th	98		4	

MR. Michael Murphy
DIS.

- ... breakfast.
- ... bath
- ... 98 lbs.
- ... regular
- ... not very good
- ... breakfast.
- ... breakfast. Appetite very good.
- ... breakfast
- ... regular
- ... night from 21st to 25th night at ... hours
- ... breakfast.
- ... the cure affects him
- ... bath
- ... removed.
- ... breakfast and dinner.
- ... for very Restless nights & ... what fed he eats to daughter ...
- ... no dinner.
- ... breakfast and dinner.
- ... very poor sleep at an average ... hours. 2 nights pleasing, and 1 fine. ... to the 27th

refuses some meals, has acute does fair, can be by & cautiously. (See attached ...

Carried to Back of 1

Personal and Medical History of Mick

onal and Medical Hi

1892

This man was brought here by Sheri
Habits; supposed cause of attack
First symptoms were many
Insanity is now manifested by
disposition to injure others; ne
-strained or confined. Has an u
effect. (General Paresis).

Dec 5 Dec 5/92. Has, at no time, been noisy
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-sions, refused. Has, however, lost in weight. Wt, on 5th inst, being 94 pds, in
underclothing, which (allowing 12 pds for clothing) indicates a loss of 6 pounds in
weight, since admission. Has complained a good deal of various things, of
his health, of being cold &c. Has delusions of persecution; (see examination).
" 21 Dec 21/92. Still keeps his bed and is about the same in health & behavior. Weight, on
the 19th inst, in underclothing, 92 pounds. Sits up, for a short time, occasionally. —
" 26 Habits are clean. Is never noisy. Talks freely. Dec 26/92. Wt (in underclothing) 83 pds. —
" 31 Has put upon medicine, but refuses to take it. Dec 31/92. See attached record. —
1893
Jan 3 Jan 3/93. Wt 91½ pds. Pulse 66. (Wt. taken in underclothing only). Jan 10/93. Wt (in underclothing) 90 pds. —
" 10
" 16 Jan 16/93. Is quiet at night, and sleeps only fairly, being restless in his sleep. Lies in bed, by
" 17 day. Refuses medicine and an occasional meal. Is thin and does not gain. Jan 17/93. Wt (in
" 24 underclothing) 93 pounds; a gain of 3 pounds; Jan 24/93. Wt (in underclothing) 93 pds. —
Feb 1 Feb 1/93. Wt (in underclothing) 92½ pds; loss of ½ pound. Feb 11/93. On examination to-day, patient shows
in coordination, though it is difficult to test. There is a partial paralysis of left side, probably due to
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" 14 (in underclothing) 90 pounds; a further loss of 2½ pounds. Feb 14/93. The paretic speech now shows
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been losing in flesh. Bowels have moved fairly & sometimes quite freely (see attached record) —
March Mar 2/93. Only rarely slightly restless at night; usually restful & sleeping well. Keeps his bed

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3182

MR. Michael Murphy
DETAILED HISTORY OF IS.

Oct. 1883

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	
21	7	3	76	70	Refuses breakfast
22	7	3	76	70	Gave bath
23	7	3	72	68	Weight 98 lbs
24	7	3	82	70	Bowels regular
25	7	3	88	88	Refuses most food
26	7	3	74	70	
27	7	3	82	70	Refuses breakfast
28	7	3	70	68	
29	7	3	72	72	Bath
30	7	3	80	70	
31	7	3	78	72	Refuses breakfast. Appetite very poor
					Refuses breakfast
					Bowels regular
					Restless during night from 2nd to 3rd night last
					an average of 4 hours
					Refuses breakfast
					Says the Bed affects him
					Gave bath
					Bed removed
					Refuses breakfast and dinner
					Bowels for 3 days were irregular —
					Says what food he eats to do him
					harm
					Refuses dinner
					Refuses breakfast and dinner
					Restless during night last on average
					of 6 hours. Nightly pleading and noise.
					Off 15th to the 27th

Refuses some meals, & refuses food at last very scanty. (see

Carried to Back of 1

Personal and Medical History of Mich

1892

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Habits; supposed cause of attack
First symptoms were many
Insanity is now manifested by
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Dec 5 Dec 5th

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cold. Pulse has been normal, very seldom slightly above. Appetite has been good, though he has
been losing in flesh. Bowels have moved fairly & sometimes quite freely (See attached record) —
March Mar 2/93. Busy, rarely slightly restless at night; usually restful & sleeping well. Keeps his bed

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NAME. Michael Murphy

DETAILED HISTORY OF IS.

1893

		HOUR	PULSE	RE	
		A.M.	P.M.	A.M.	P.M.
Sep	24	7	5	60	66
	25	7		60	
	26	7	5	68	70
	27	7	5	72	
	28	7		70	
	29	7	5	70	72
	30	7	5	72	70
Oct	1	7		66	
	2	7		60	
	3	7	5	72	70
	4	7		68	
	5	7	5	60	66
	6	7	5	78	76
	7	7	5	72	70
	8	7		72	
	9	7	5	66	70
	10	7	5	68	73
	11	7	5	62	62
	12	7	5	58	60
	13	7	5	60	60
	14	7	5	70	72
	15	7	5	80	60
	16	7	5	68	68
	17	7	5	60	68
	18	7	5	70	72
	19	7	5	62	64
	20	7	5	70	72

ve as breakfast
ve bath
eight 92 lbs.
owels regular
fuit, no vomiting
no breakfast
ith.
no breakfast. Appetite very poor.
no breakfast.
owels regular.
t during night from 2nd to 3rd inst
on average 7 hours
no breakfast.
ays the food affects him.
ve bath
wels moved.
no breakfast and dinner
better. Says he sees things
as what food he eats to do him
ore.
no dinner.
no breakfast and dinner
better; says he sees things
Gr 8 pounds. 2 nights sleeping 7 and 8 hours.
Gr 10th to 20th

refuses some meals, no nourishment last week or so. (See

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MR. Michael Murphy
IS.

ETAILED HISTORY OF

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RES AM	RES PM	
1893							
Aug 28	7	5	62	70			ass breakfast. ve bath. eight 91 lb.
29	7	5	60	66			owels regular.
30	7	5	72	74			tite not very good.
31	7	5	70	67			
Sep 1	7	5	76	70			no breakfast.
2	7	5	72	82			
3	7						th.
4	7	5	74	70			
5	7	5	72	70			no breakfast. Appetite very poor.
6	7	5	74	76			no breakfast.
7	7	5	72	70			owels regular.
8	7	5	74	74			
9	7	5	72	74			pt during night from 12th to 5th night pt in average of 7 hours.
10	7	5	66	70			no breakfast.
11	7	5	64	70			ays the eyes affects him.
12	7						
13	7	5	82	74			ve bath
14	7						s removed
15	7	5	60	70			no breakfast and dinner.
16	7		66				
17	7		70				
18	7		60				fetch from Boyds answer given ys breakfast he eats & coughs him ross.
19	7		70				no dinner.
20	7	5	76	70			no breakfast and dinner.
21	7		66				fetch from Sleet answer given ept 6 hours. 7 nights pleeting 7 and 5 pm.
22	7	5	72	70			ept 6 hours. 7 nights pleeting 7 and 5 pm.
23	7		60				

refuses some meals, no acute exc. sat. very scanty. (see at

Carried to Back of

1892

This man was brought here b
Habits: suppred
First Sym

Da

daily;
is kept his bed
spiration & temperature
only, twice daily. Rectal
rectal temperature, was quite often sub-normal
spiration, slower than normal. Pulse
ha between 60 and 75. Complains a good deal of
par ide. Bowels are irregular, with a tendency to dryness &
hard. es. Appetite has seemed good, food being, only on 2 or 3 occa-
-sions, ds however. lost in weight. Wt, on 5th inst, being 94 pds, in
underclothing, which (allowing 12 pds for clothing) indicates a loss of 6 pounds in
weight, since admission. Has complained a good deal of various things, of
his health, of being cold &c. Has delusions of persecution; (see examination).
" 21 Dec 21/92. Still keeps his bed and is about the same in health & behavior. Weight, on
the 19th inst, in underclothing, 92 pounds. Sits up, for a short time, occasionally. —
" 26 Habits are clean. Is never noisy. Talks freely. Dec 26/92. Wt (in underclothing) 83 pds. —
" 31 Has put upon medicine, but refuses to take it. Dec 31/92. See attached record. —
1893
Jan 3/10 Jan 3/93. Wt 91½ pds. Pulse 66. (Not taken in underclothing only). Jan 10/93. Wt (in underclothing) 90 pds. —
" 16 Jan 16/93. Is quiet at night, and sleeps only fairly, being restless in his sleep. Lies in bed, by
" 17 day. Refuses medicine and an occasional meal. Is thin and does not gain. Jan 17/93. Wt (in
" 24 underclothing) 93 pounds; a gain of 3 pounds; Jan 24th 93. Wt (in underclothing) 93 pds. —
Feb 1/4 Feb 1/93. Wt (in underclothing) 92½ pds; loss of ½ pound. Feb 4th 93. On examination today, patient shows
in coordination, though it is difficult to test. There is a partial paralysis of left side, probably due to
" 9 some past lesion, and a present condition which seems quite markedly paretic. Feb 9/93. Weight
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" 16 quite plainly. The general sluggishness is all in line with General Paresis. Feb 16/93. Wt (in
underclothing) 90 pounds. Is still confined to his bed. Since last note, author's subject, has been
sleeping somewhat better (7 to 8 hours each night), though he is frequently reported as restless &
uneasy in his sleep; very infrequently slightly noisy at night. Occasionally complains of feeling
cold. Pulse has been normal, very often slightly above. Appetite has been good, though he has
been losing in flesh. Bowels have moved fairly & sometimes quite freely (see attached record) —
March Mar 2/93. Subj rarely slightly restless at night; usually restful & sleeping well. Keeps his bed

Personal and Medical History of Micha

1892

This man was brought here by Sheriff B.
Habits; supposed cause of attack, unk
First symptoms were manife
Insanity is now manifest
disposition to injure
-strained wea
effect.

Dec 5 Dec

pt his bed
ation & temperatu
, fierce daily. Rem
ne, was quite often sub-normal
ow, slower than normal. Pulse
ween 75. Complains a good deal of
ide. Bowels are irregular, with a tendency to dryness &
. Appetite has seemed good, food being, mly on 2 or 3 occa-
s however, lost in weight. Wt, on 5th inst, being 94 pds, in
which (allowing 12 pds for clothing) indicates a loss of 6 pounds in
since admission. Has complained a good deal of various things, of
his health, of being cold &c. Has delusions of persecution; (see examination).

" 21 Dec 21/92. Still keeps his bed and is about the same in health & behavior. Weight, on the 19th inst, in underclothing, 92 pounds. Sits up, for a short time, occasionally. —

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" 31 Has put up no medicine, but refuses to take it. Dec 31/92. Is attached record. —

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March March 2/93. Only rarely slightly restless at night; usually rested & sleeping well. Keeps his bed

Personal and Medical Hi

DETAILED HISTORY OF SICKNESS OF MR. Michael Murphy
DIAGNOSIS.

1893

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
Aug	7	5	60	64					Ate as breakfast
									Gave bath
21	7	5	74	72					
3	7	5	66	76					Weight 92 lbs.
4	7	5	64	66					Bowels regular
5	7	5	60	72					Appetite not very good
6	7	5	60	64					
7	7	5	64	62					Ate no breakfast
8	7	5	60	78					
9	7	5	76	72					Bath
10	7	5	74	78					
11	7	5	60	64					Ate no breakfast - Appetite very poor
12	7	5	60						Ate no breakfast
13	7		68						Bowels regular
14	7	5	68	76					
15	7	5	68	72					Slept during night from 1st to 15th nights at an average of 7 hours
16	7	5	70	72					Ate no breakfast
17	7	5	76	74					As sings the ones after him
18	7	5	64	80					
19	7	5	60	80					Gave bath
20	7		76						Bowels moved
21	7	5	70	70					
22	7	5	66	72					Ate no breakfast and dinner
23	7	5	74	70					
24	7	5	72	74					Appetite poor Ate only 2 spoonfuls oatmeal for breakfast Says what food he eats to dough in his mouth
25	7	5	70	64					Ate no dinner
26	7	5	60	60					Ate no breakfast and no dinner
27	7	5	64	66					Appetite poor Slept at an average of 6 hours (7 nights) and 5 hours (8 nights) from the 15th to the 27th

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ersonal and Medical H

AILED HISTORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
1892 July	6	7	8	24	72				Ate no breakfast. Has purpura.
	7	7	8	20	82				Ate no breakfast. Bowels moved.
	9	7	8	66	72				
	8	7	8	72	64				Bath
	10	7	8	72	74				
	11	7	8	82	72				Ate no dinner. Breath foul, gums red. Has not
	12	7	8	74	78				
	13	7	8	76	80				
	14	7	8	72	60				Ate no breakfast. Says he does not feel well.
	15	7	8	80	64				
	16	7	8	72	70				
	17	7	8	64	70				Ate no breakfast.
	18	7	8	66	67				
	19	7	8	64	62				
	20	7	8	76	78				Appetite poor. Says he does not feel well.
	21	7	8	70	72				
	22	7	8	72	82				Appears poorly. Bath
	23	7	8	72	76				
	24	7	8	76	72				
	25	7	8	80	72				Ate no breakfast
	26	7	8	74	76				Appetite poor
	27	7	8	62	68				Ate no breakfast
	28	7	8	62	60		"	"	" "
	29	7	8	60	64		"	"	" "
	30	7	8	64	76				
	31	7	8	68	64				

y. Tone
often sub-normal
in normal. Pulse
ains a good deal of
with a tendency to dryness &
food, food being, mly on 2 or 3 occa-
diet. Wt, on 5th inst, being 94 pds, in
for clothing) indicates a loss of 6 pounds in
complained a good deal of various things, of
his
re. Has delusions of persecution; (see examination).

" 21 Dec 21/92. keeps his bed and is about the same in health & behavior. Weight, on
the 19th inst, in underclothing, 92 pounds. Sits up, for a short time, occasionally. —
" 26 Habits are clean. Is never noisy. Talks freely. Dec 26/92. Wt (in underclothing) 83 pds. —
" 31 Was put upon medicine, but refuses to take it. Dec 31/92. (see attached record). —
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Jan 3/10 Jan 3/93. Wt 91½ pds. Pulse 66. (not taken in underclothing wt). Jan 10/93. Wt (in underclothing) 90 pds. —
" 16 Jan 16/93. Is quiet at night, and sleeps only fairly, being restless in his sleep. Lies in bed, by
" 17 day. Refuses medicine and an occasional meal. Is thin and does not gain. Jan 17/93. Wt (in
" 24 underclothing) 93 pounds; a gain of 2 pounds; Jan 24/93. Wt (in underclothing) 93 pds. —
Feb 1/4 Feb 1/93. Wt (in underclothing) 92½ pds; loss of ½ pound. Feb 4/93. On examination today, patient shows
" 9 incoordination, though it is different to test. There is a partial paralysis of left side, probably due to
" 14 some past lesion, and at present condition which seems quite markedly paretic. Feb 9/93. Weight
" 16 (in underclothing) 90 pounds; a further loss of 2½ pounds. Feb 14/93. The paretic speech now shows
quite plainly. The general sluggishness is all in line with General Paresis. Feb 16/93. Wt (in
underclothing) 90 pounds. Is still confined to his bed. Since last note, at this subject, has been
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uneasy in his sleep; very infrequently slightly noisy, at night. Occasionally complains of feeling
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been losing in flesh. Bowels have moved fairly & sometimes quite freely (see attached record). —
March Mar 2/93. Only rarely slightly restless at night; usually restful & sleeping well. Keeps his bed

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ORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS.

DETAILED HISTORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS.

DATE	HOUR	PULSE		RESP		TEMP		
	AM	PM	AM	PM	AM	PM	AM	PM
1893 May								
27		5		72				
28	7	5	74	86				
29		5		70				
30	7	5	70	72				
31	7	5	70	72				
June 1	7	5	74	78				
2	7	5	76	72				
3	7	5	80	74				
4	7	5	76	64				
5	7	5	76	68				
6	7	5	62	76				
7	7	5	70	78				
8	7	5	68	76				
9	7	5	68	70				
10	7	5	68	60				
11	7	5	66	70				
12	7	5	70	80				
13	7	5	74	80				
14	7	5	70	78				
15	7	5	80	64				
16	7	5	78	60				
17	7	5	80	80				
18	7	5	74	80				
19	7	5	74	76				
20	7	5	74	70				
21	7	5	72	70				
22	7	5	70	74				
23	7	5	70	70				
24	7	5	74	74				
25	7	5	70	72				
26	7	5	70	70				
27	7	5	82	72				
28	7	5	76	80				
29	7	5	70	72				
30	7	5	72	80				
July 1	7	5	70	72				
2	7	5	66	72				
3	7	5	66	72				
4	7	5	70	74				
5	7	5	66	74				

Barrs moved
Bath
Bath
Bath

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...TORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS · Paranoia Dec 93

...NICAL NOTES IN THE CASE OF M. Murphy
AS

DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
Dec: 26	6 PM	80			On Ward: In bed only	
27	7 AM	64				
	6 PM	86				
28	7 AM	74				
	5 PM	74				
29	7.a.m.	84				
	5.30	76				
30	7.00	74				
	5.00	76				
May: 1	7.00	78				
	5.00	74				
2	7.00	76				
	6.00	82				
3	7.00	80				
	6.00	72				
4	7.00	64				
	5.00	63				
5	7.00	82				
	6.00	68				
6	6.00	80				
	7.00	74			Appetite good	
7	7.00	76			Bowels move regular	
	5.00	78				
8	7.00	70				
	6.00	80				
9	7.00	76				
	6.00	64				
10	7.00	74				
	6.00	78				
11	7.00	72				No change in any respect - Eyes
	6.00	72			appetite fairly good	still somewhat bad
12	7.00	72				
	5.00	70				
13	7.00	67				
	5.00	72				
14	7.00	74				
	6.00	80			Weight 93 lbs.	Eyes have been somewhat worse but are
15	7.00	74			improving	
	6.00	70				
16	7.00	74				
	5.00					
17	7.00	78			Bowels moved	
	5.00	76				
18	7.00	74				
	5.00	82			Same from day to day - appetite good and bowels	
19	7.00	78			move regular	
	5.00	78			8.30 a.m. Bath	
20	7.00	78				
	5.00	78				
21	7.00	78				
	6.00	84				
22	7.00	74			Weight 99 lbs	Eyes still a little worse - Vision quickly
	5.00	68				on the same way
23	7.00	70			Appears the same from day to day	
	5.00	70				
24	7.00	68				
	5.00	74				
25	7.00	76				
	6.00	80			Is not quite well	
26	7.00	64			at no breakfast	
	5.00	66				
27	7.00	80				

...of
...to dryness &
...g, only on 2 or 3 occa-
...Breat, being 94 pds, in
...) indicates a loss of 6 pounds in
...ained a good deal of various things, of
...delusions of persecution; (See examination).
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Habi... ...Is never noisy. Talks freely. Dec 26/92. Wt (in underclothing) 83 pds. —
" 31 Was put upon medicine, but refuses to take it. Dec 31/92. See attached record. —
1893
Jan 3/ Jan 3/93. Wt 91½ pds. Pulse 66. (Wt. taken in underclothing only). Jan 10/93. Wt (in underclothing) 90 pds. —
" 16 Jan 16/93. Is quiet at night, and sleeps only fairly, being restless in his sleep. Lies in bed, by
" 17 day. Refuses medicine and an occasional meal. Is thin and does not gain. Jan 17/93. Wt (in
" 24 underclothing) 93 pounds; a gain of 3 pounds; Jan 24/93. Wt (in underclothing) 93 pds. —
Feb/ Feb 1/93. Wt (in underclothing) 92½ pds; loss of ½ pound. Feb 4/93. On examination to day, patient shows
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" 14 (in underclothing) 90 pounds; a further loss of 2½ pounds. Feb 14/93. The paretic speech now shows
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sleeping somewhat better (7 to 8 hours each night), though he is frequently reported as restless &
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March Mar 2/93. Only rarely slightly restless at night; usually restful & sleeping well. Keeps his bed

...nal and Medical ...

...TORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS · January 1893

...NICAL NOTES IN THE CASE OF M. Murphy

MO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
Jan	26	5. PM	80				
	27	2.30	80				
		5	66				
	28	7.30	72			7 PM Bowels Moved	
		5	90				
	29	7.30	92				
		5	76				
	30	7.30	78				
		5	78				
	31	7.30	80			6 P.M. Bowels Moved	
		5	28				
April	1	7.30	78				
		5.00	78				
	2	9.00	86				
		6.00	86				
	3	7.30	88				
		6.30					
	4	7.30	82			1 PM Bowels Moved.	
		5.00	86			appetite good Bowels Movedregular.	
	5	7.30	82				
		5.00	94				
	6	7.00	64				
		5.00	68				
	7	7.00	82				
		5.00	88				
	8	7.00	64				
		5.00	70				
	9	7.00	72			Bowels Moved regular appetite Good	
		5.00	82				
	10	7.00	94				
		5.00	78				
	11	7.00	80				
		5.00	74			Bath.	
	12	7.00	88				
		5.00	72				
	13	7.00	70			3.30 Bowels moved very freely	
		5.00	70				
	14	7.00	74				
		5.00	64				
	15	7.00	76				
		5.00	70			10 AM Bowels Moved	
	16	7.00	70				
		5.00	72				
	17	7.00	74				
		5.00	80				
	18	7.00	84			appetite good	
		5.00	78				
	19	7.00	78				
		5.00	74			Bath.	
	20	7.00	76				
		5.00	72				
	21	7.00	76			1.30 Bowels Moved.	
		5.00	68				
	22	7.00	86				
		5.00	78				
	23	7.00					
		5.00	80				
	24	7.00					
		5.00	70				
	25	7.00	80			5 P.M. Passed.	
		5.00	94				
	26	7.00	74				

CK 116

...ow & temperature
...ly, twice daily. Temp
rectal
...e temperature, was quite often sub-normal
...ow 98.6. Respiration, slower than normal. Pulse
...66, usually between 60 and 75. Complains a good deal of
...n back & in his left side. Bowels are irregular, with a tendency to dryness &
hardness of the passages. Appetite has seemed good, food being, only on 2 or 3 occa-
-sions, refused. Has however, lost in weight. Wt on 5th inst, being 94 pds, in
underclothing, which (allowing 12 pds for clothing) indicates a loss of 6 pounds in
weight, since admission. Has complained a good deal of various things, of
his health, of being cold &c. Has delusions of persecution; (See Examination).
21 Dec 21/92. Still keeps his bed and is about the same in health & behavior. Weight, on
the 19th inst, in underclothing, 92 pounds. Sits up, for a short time, occasionally.
26 Habits are clean. Is noisy. Talks freely. Dec 26/92. Wt (in underclothing) 83 pds.
31 Has put upon medicine, but refuses to take it. Dec 31/92. See attached record.
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Jan 3/10 Jan 3/93. Wt 91½ pds. Pulse 66. (Not taken in underclothing wt). Jan 10/93. Wt (in underclothing) 90 pds.
16 Jan 16/93. Is quiet at night, and sleeps only fairly, being restless in his sleep. Lies in bed, by
17 day. Refuses medicine and an occasional meal. Is thin and does not gain. Jan 17/93. Wt (in
24 underclothing) 93 pounds; a gain of 3 pounds; Jan 24/93. Wt (in underclothing) 93 pds.
Feb 1/14 Feb 1/93. Wt (in underclothing) 92½ pds; loss of ½ pound. Feb 14/93. On examination to-day, patient shows
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been losing in flesh. Bowels have moved fairly & sometimes quite freely (See attached record).
27 31 March Mar 25/93. Only rarely slightly restless at night; usually restful & sleeping well. Keeps his bed

...onal and Medical ...

HISTORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS . January 6 1893

DETAILED HISTORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS . March 6/93.

DATE	HOUR	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
March	7.30		80					3 pm Bowels moved.
1		5						
2	7.30		84					appetite fairly good.
		5		86				Complains of bad at times
3	7.30		72					
		5		62				
4	7.30		72					Bowels move regular.
		5		70				
5	7.30		70					Bowels Moved.
		5		78				10 am Bath.
6	7.30		74					
		5		64				
7	7.30		80					
		5		72				
8	7.30		78					
		5		70				
9	7.30		72					
		5		66				
10	7.30		80					8.30 Bowels Moved.
		5		76				
11	7.30		76					Bowels Moved. am.
		5		80				Lies quietly in bed. Is able to sit up
12	7.30		80					chair, but if in 5 minutes time, as every
		5		78				matter has a preliminary spasmodic
								twitching.
13	7.30		72					Wore out eat Dinner or Supper.
		5		68				
14	7.30		66					
		5		62				
15	7.30		76					appetite good bowels move regulas.
		5		68				
16	7.30		74					
		5		80				
17	7.30		78					
		5		86				
18	7.30		92					
		5		84				Bowels Move regulas.
19	7.30		80					
		5		72				
20	7.30		80					
		5		88				
21	7.30		86					Bowels Move regulas appetite good.
		5		88				
22	7.30		82					
		5		78				
23	7.30							Bowels Moved. Scant.
		5						
24	7.30		92					
		5		96				
25	7.30		78					
		5		76				
26	7.30		76					9.30 Bowels Moved.

...pulse only, twice daily. Temperature that temperature (rectal) was quite often sub-normal ...was above 98.6. Respiration, slower than normal. Pulse ...from 58 to 86, usually between 60 and 75. Complains a good deal of pain in back & in his left side. Bowels are irregular, with a tendency to dryness & hardness of the passages. Appetite has seemed good, food being, only on 2 or 3 occasions, refused. Has however, lost in weight. Wt, on 5th inst, being 94 pds, in underclothing, which (allowing 12 pds for clothing) indicates a loss of 6 pounds in weight, since admission. Has complained a good deal of various things, of his health, of being cold &c. Has delusions of persecution; (See examination).

" 21 Dec 21/92. Still keeps his bed and is about the same in health & behavior. Weight, on the 19th inst, in underclothing, 92 pounds. Sits up, for a short time, occasionally. —
" 26 Habits are clean. Is never noisy. Talks freely. Dec 26/92. Wt (in underclothing) 83 pds. —
" 31 Has put upon medicine, but refuses to take it. Dec 31/92. See attached record. —
1893
Jan 3/10 Jan 3/93. Wt 91½ pds. Pulse 66. (Not taken in underclothing only). Jan 10/93. Wt (in underclothing) 90 pds. —
" 16 Jan 16/93. Is quiet at night, and sleeps only fairly, being restless in his sleep. Lies in bed, by
" 17 day. Refuses medicine, and an occasional meal. Is thin and does not gain. Jan 17/93. Wt (in
" 24 underclothing) 93 pounds; a gain of 2 pounds; Jan 24/93. Wt (in underclothing) 93 pds. —
Feb 1/6 Feb 1/93. Wt (in underclothing) 92½ pds; loss of ½ pound. Feb 4/93. On examination to day, patient shows incoordination, though it is different to test. There is a partial paralysis of left side, probably due to
" 9 some past lesion, and as present condition which seems quite markedly paretic. Feb 9/93. Weight
" 14 (in underclothing) 90 pounds; a further loss of 2½ pounds. Feb 14/93. The paretic speech now shows
" 16 quite plainly. The general sluggishness is all in line with General Paresis. Feb 16/93. Wt (in underclothing) 90 pounds. Is still confined to his bed. Since last note, all his subject, has been sleeping somewhat better (7 to 8 hours each night), though he is frequently reported as restless & uneasy in his sleep; very infrequently slightly noisy at night. Occasionally complains of feeling cold. Pulse has been normal, very often slightly above. Appetite has been good, though he has been losing in flesh. Bowels have moved fairly & sometimes quite freely (See attached record) —
March Mar 2/93. Is only rarely slightly restless at night; usually restful & sleeping well. Keeps his bed

HISTORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS. Dec 1893

DETAILED HISTORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS. Feb 1, 93

DATE	HOUR A.M.	HOUR P.M.	PULSE A.M.	PULSE P.M.	RESP. A.M.	RESP. P.M.	TEMP. A.M.	TEMP. P.M.	OTHER DATA.
1	7.30	5	72	68					Had passage in bed
2	7.30	5	64	64					Was very well. Complains of being cold at times.
3	7.30	5	72	72					
4	7.30	5	70	68					Patient on examination shows uncoordination though it is difficult to test. a partial paralysis of left side, probably due to some past lesion, and a present condition which seems quite markedly
5	7.30	5	90	100					paretic
6	7.30	5	66	66					Paretic
7	7.30	5	64	84					Appetite good. Bowels move regular
8	7.30	5	62	74					
9	7.30	5	74	60					Bowels moved freely
10	7.30	5	66	68					
11	7.30	5	62	64					10 a.m. Bowels moved.
12	7.30	5	70	70					
13	7.30	5	72	62					Appetite Fairly good
14	7.30	5	60	60					Bowels move regular
15	7.30	5	62	64					The Paretic speech shows quite plainly the general sluggishness of all in line with General Paresis
16	7.30	5	64	66					Bowels move regular
17	7.30	5	66	70					Appetite Fairly good. The change from day to day is
18	7.30	5	64	60					Bowels move regular
19	7.30	5	72	78					
20	7.30	5	72	74					
21	7.30	5	78	82					Talk seems to realize his insanity - has weakness of mind & lack of memory - Speech quite changed
22	7.30	5	62	66					10 a.m. Bowels moved.
23	7.30	5	65	64					Bowels Moved.
24	7.30	5	77	66					
25	7.30	5	72	68					9 a.m. Bowels Moved
26	7.30	5	78	86					
27	7.30	5	66	66					
28	7.30	5	64	60					

Oct 31/93 refuses

Carried to Back of 1

Feb

... pulse only, twice daily. Temperature (rectal) was quite often sub-normal ... was above 98.6. Respiration, slower than normal. Pulse ... from 58 to 86, usually between 60 and 75. Complains a good deal of pain in back & in his left side. Bowels are irregular, with a tendency to dryness & hardness of the passages. Appetite has seemed good, food being, only on 2 or 3 occasions, refused. Has, however, lost in weight. Wt, on 5th inst, being 94 pds, in underclothing, which (allowing 12 pds for clothing) indicates a loss of 6 pounds in weight, since admission. Has complained a good deal of various things, of his health, of being cold &c. Has delusions of persecution; (See Examination).

Dec 21/92. Still keeps his bed and is about the same in health & behavior. Weight, on the 19th inst, in underclothing, 92 pounds. Sits up, for a short time, occasionally. — Habits are clean. Is noisy. Talks freely. Dec 26/92. Wt (in underclothing) 83 pds. — Has put upon medicine, but refuses to take it. Dec 31/92. See attached record. —

Jan 3/93. Wt 91½ pds. Pulse 66. (Not taken in underclothing only). Jan 10/93. Wt (in underclothing) 90 pds — Jan 10/93. Is quiet at night, and sleeps only fairly, being restless in his sleep. Lies in bed, by day. Refuses medicine, and an occasional meal. Is thin and does not gain. Jan 17/93. Wt (in underclothing) 93 pounds; a gain of 3 pounds; Jan 24/93. Wt (in underclothing) 93 pds. —

Feb 1/93. Wt (in underclothing) 92½ pds; loss of ½ pound. Feb 4/93. On examination to-day, patient shows incoordination, though it is difficult to test. There is a partial paralysis of left side, probably due to some past lesion, and a present condition which seems quite markedly paretic. Feb 9/93. Weight (in underclothing) 90 pounds; a further loss of 2½ pounds. Feb 14/93. The paretic speech now shows quite plainly. The general sluggishness is all in line with General Paresis. Feb 16/93. Wt (in underclothing) 90 pounds. Is still confined to his bed. Since last note, as this subject, has been sleeping somewhat better (7 to 8 hours each night), though he is frequently reported as restless & uneasy in his sleep; very infrequently slightly noisy, at night. Occasionally complains of feeling cold. Pulse has been normal, very seldom slightly above. Appetite has been good, though he has been losing in flesh. Bowels have moved fairly & sometimes quite freely (See attached record) —

March 2/93. Only rarely slightly restless at night; usually restful & sleeping well. Keeps his bed

Personal and Medical History of Michael Murphy

1892

Dec 5 Dr. Dr. Ad. Ex. A. ...

" 21

" 26

" 31

1893 Jan ...

" 1

" 1

" ...

Feb ...

" 6

" 14

" 18

Mar 25/93. Only rarely slightly restless at night; usually restful & sleeping well. Keeps his bed

Personal and Medical H...

DETAILED HISTORY OF SICKNESS OF MR. M. Murphy

DIAGNOSIS. January A 1893

DATE	HOUR	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	OTHER DATA
Jan 1	7		70		60			Ate as usual, and but very little breakfast.
2	7 30		74		56			Eats fairly well as time bowels regular.
3	7 30		60		74			
4	7 30		56		64			Appetite fair.
5	7 30		60		60			
6	7 30		70		54			Eats fairly well Cristine really Complains
7	7 30		74		64			8 PM
8	7 30		66		72			8 PM. Bowels moved.
9	7 30		64		60			
10	7 30		60		54			Complaining of cold.
11	7 30		72		64			8 PM. Bowels moved
12	7 30		70		56			Appetite fairly good.
13	7 30		74		74			
14	7 30		62		60			Bowels move regular
15	7 30		72		66			
16	7 30		78		68			Appetite good
17	7 30		62		68			
18	7 30		66		66			
19	7 30		64		96			3 30 PM Bowels moved.
20	7 30		64		68			
21	7 30		70		74			Eats fairly well takes freely
22	7 30		72		74			Bowels moved.
23	7 30		66		66			
24	7 30		70		60			
25	7 30		70		68			Bowels moved freely
26	7 30		72		70			
27	7 30		68		68			Complains of cold at times
28	7 30		68		70			Bowels moved.
29	7 30		80		80			
30	7 30		80		64			
31	7 30		82		82			

Oct 31/93. Sleeps nightly from 5 to 6 hours. Eats very well, for 2 or 3 days at a time; then occasionally refuses some meals, or he/she does eat, eats very scantily. (see attached records of Nurses). —

carried to Back of 1

1894

Dec 5 D

" 12

Feb

Mar 25/93. Duty, rarely slightly restless at night; usually restful & sleeping well. Keeps his bed

DETAILED HISTORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS.

December

DATE:	TEMP. AM	TEMP. PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	OTHER DATA.
Dec. 13	100		72				
		5		66			
14	100		70				Eats well.
		5		86			
15	100		67				
		5		72			
16	100		67				Bowels moved. 8. a.m.
		5		62			
17	100		80				
		5		68			
18	100		88				
		5		72			
19	100		64				Bowels moved 7 a.m.
		5		66			
20	100		70				
21	100	5	74	90			
22	100		76				Bowels Moved 8.30
		5		62			
23	100		64				
		5		64			Appetite good.
24	100		64				
		5		64			
25	100		60				Bowels moved 4 P.M.
		5		68			
26	100		72				
		5		28			Appetite fairly good)
27	100		68				
		5		88			Bowels moved 3 P.M. 6.P. Refused medicine
28	100		60				Refuses medicine) Ate.
		5		64			
29	100		58				
		5		76			
30	100		86				
		5		84			
31	100		82				Ate no breakfast
		5		76			

Oct 31/93. Sleeps, nightly from 5 to 6 hours. Eats very well, for 2 or 3 days at a time; then occasionally refuses some meals, or he does eat, eats very scantily. (See attached record of Nurses). —

Carried to Back of

DETAILED HISTORY OF SICKNESS OF MR. M. Murphy
DIAGNOSIS.

November

DATE	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	OTHER DATA.
							Came on ward Nov 16 — 7 P.M.
17		80		14		97	Eats well. Complains of pain in back
17	5	72	14	14	97	98	8 a.m. and side also of bowels being costive.
18	5	76	14	14	97.8	98	9 A.M. Bowels moved (very hard and dark)
	5	67		14		98	12 " " Bowels moved again (freely)
							Sat up in bed about 2 hours this P.M.
19	5	64	14	14	98		Bowels moved 6 A.M. also at 7.30 and 8 A.M. eats well
							Bowels moved 10 A.M. (freely)
	5	66	15		98		Sat up in bed 3 hours this P.M.
20	5	68	16		97.8		8 a.m. Bowels moved but somewhat lumpy and hard
	6	70	16		98		Sat up in bed 2 hours this P.M.
21	5	68	16		97.8		8 A.M. Bowels moved (very hard)
	5	67			98		4 P.M. " " "
22	5	74	18		97.8		Has a very good appetite.
23	5	68	18	16	98	98	Bowels costive.
	5	78		16		98	refuses to take dose for bowels
24	5	76	15		98		Eats well
25	5	72	14	16	97.8	98	always complaining of head being
	5	68	14	14	98		Cold.) Bowels costive and refused to take dose
26	5	62	15		98		Bowels still costive Eats well
	5	76	16	16			1 P.M. Dove fell also at 2 & 4 — 5 — 6 — 7 and 8 —
27	5	82	16	15	98		8 a.m. Bowels moved freely also at 10 a.m
							2 P.M. Bowels moved also at 5 Eats well
28	5	78	16		98		Always complaining of head being cold
	5	58					3 P.M. Bowels moved (but very hard.)
29	5	70					Sat up in bed 2 hours this A.M.
	5	76					Eats well but always complaining of
30	5	74					his diet
	5	82					Sat up for about 2½ hrs this P.M.
	December						
Dec 1	5	164	12				Appetite very good
2	5	78					Bowels Costive
3	5	66					6 P.M. Bowels moved freely
	5	74					8 A.M. Dove fell out of bed
	5	66					Sat up 2 hours this A.M.
4	5	60					Sat up in bed 2 hours this P.M.
	5	68					Bowels moved 8.30 A.M.
6	5	62					
	5	63					Eat nothing for breakfast
6	5	58					Sat up in bed 2 hours this A.M.
	5	60					Eat nothing for breakfast or dinner
7	5	62					
	5	67					Eats some better.
8	5	60					
	5	70					
9	5	74					Bowels Costive
10	5	72					
	5	70					Sat up about 2 hours to day
11	5	60					Bowels moved 7.30 A.M.
	5	63					
12	5	66					
	5	78					

(see attached record).

...e no breakfast today;
...regular. Sept 15/93. Appetite
...in no breakfast or
...ly day also.

...akfast,
...93 Patient
...eadily, ri
...Some Rele"

Oct 31/93. Sleeps, nightly from 5 to 6 hours. Eats very well, for 2 or 3 days at a time; then occasionally refuses some meals, or he like does eat, eats very scantily. (see attached records of nurse). —

carried to Back of 1

Personal and Medical History of Michael Murphy.

…iarly. Talks only in answer to questions. Mar 26/93. See attached clinical record for past month.
Apl 8/93. Lies perfectly quietly by day & at night. Is thought by night nurse to sleep either very lightly or very little.
" 29 Is not restless, however. Apl 29/93. Was, at his request, got up for a while & put out on the hall today. —
" 30 Went to bed again, the same afternoon. Apl 30/93. Eyes are sore today; Conjunctivitis.
May 18 May 18/93. Still keeps his bed, day & night. Lies there quietly & silently. During a portion of the past 4 weeks, he has been (but not often) restless for an hour or 2 at night, sleeping only from 2 to 3 or 4 hours; on 2 nights, none at all & only on 3 or 4 nights, 6 or 7 hours. For past week, however, he has been sleeping much better (6 or 7 hours each night), and has been less frequently restless. Appetite has been good & bowels
" 31 fairly regular – (see attached records.). May 31/93. Lies steadily in bed. Always willing to talk; yet weak in mind. Struggles to remember & can't. Half realizes his condition. Eyes have been sore for some time, giving him, he says, considerable pain. They are, however, less painful now.
June 3 June 3/93. Appetite very poor; refuses food, at times; "thinks it is killing him". June 8/93. Still eats poorly;
" 19 refuses occasional meals. June 19/93. Appetite has been some better of late, tho' he still refuses some meals.
" 30 June 30/93. Appetite has become quite good. Bowels regular. There is no noticeable change in any way, in the past month. Lies steadily & quite quietly in bed. —
July 7/30 July 7/93. Has been again refusing some of his meals, the past 2 days. Lies quietly in bed. July 29/93. Has refused his breakfast on quite a number of mornings this month. At times, complains of not feeling well.
" 31 July 31/93. Since last note on this subject up to about the 15th of June, patient has rested & slept fairly well at night, 6 to 7 hours on each. From the last mentioned date until about 13th of July, slept 7 to 8 hours, each night. Since that date, he has been restless a couple of hours each night, but sleeping from 4 to 6 or 7 hours. Lies quietly in bed. Appetite has been poor for some time and he has refused his breakfast quite often, complaining of not feeling well. In other respects, does not change much from month to month –
Augst Aug 15/93. From 1st inst, up to date, has slept nightly, on the average, 7 hours. Has remained quietly in bed, by day, also. Appetite has been poor & he has refused some meals. Has been losing in flesh, the
" 27 past 2 months. Bowels are regular. Aug 27/93. Has continued to sleep, on an average, 6 hours each night. Appetite continues poor; refuses food occasionally; says "what he does eat is doing him harm". Complains "that the cold affects him". Bowels are regular. Remains quietly in bed (see attached record).
" 31 Aug 31/93. Still refuses an occasional meal. Otherwise no material change.
Sept 7/8 Sept 2/93. Visited by friends, today. Sept 10/93. Still refuses meals occasionally. Ate no breakfast, today;
" 15 keeps about the same, although his appetite, at present, is not very good. Bowels regular. Sept 17/93. Appetite
" 20 is now very poor; but bowels are normal. Sept 20/93. Appetite still poor. Does eat no breakfast on
" 26 the past 3 days. Sept 27/93. Again refused breakfast, the past 2 days. Is quite restless, at times, by day also.
" 25 Sept 26/93. Still holds the idea that what food he eats does him more harm than good.
Oct 2/7 Oct 2/93. Complains, from time to time, of being cold. Oct 7/93. Still refuses his breakfast,
" 26/30 occasionally. Visited by Sisters today. Appetite, for some days, has been very poor. Oct 25/93 Patient
" 27 converses quite freely, at times. Sleeps from 5 to 6 hours, nightly. Oct 27/93. Lies, steadily, in
" 29 bed. Has but little control of his limbs. Oct 29/93. Talking today a great deal of "Ireland & Home Rule".
" 31 Oct 31/93. Sleeps, nightly from 5 to 6 hours. Eats very well, for 2 or 3 days at a time; then occasionally
refuses some meals, or he does eat, eats very scantily. (See attached record of Nurse). —

Carried to Back of 1

Mar 25/93. Rarely slightly restless at night; usually restful & sleeping well. Keeps his bed

Personal and Medical History of Mike Mehrkens

Whole No. 3187

Residence, Belvidere, Minn

Date Admission, 18th November 1892.

Admitted by, Dr Phelps Hour, 7.30 Pm

How Sent, C.D. Anderson, Sheriff, Goodhue County

Sex, Male

Age, 29 years

Civil Condition, married

Children, 2 children

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, not a church member

Habits, Good

Nativity, Germany

Physicians Committing, B. Jahning & H.L. McKinstry

Correspondents, Louis Mehrkens, Redwing, Minn

No. for Year, 96

Insane Relatives, aunt, on mother's side, idiotic.

Cause Exciting, Injury to head, a month ago.

Cause Predisposing,

Form, Melancholia - Acute

Accompanying Bodily Disorder, No.

Suicidal or Not, Not

Date of this Attack, about 3 weeks ago

Duration, about 3 weeks

No. of Attack, 1st

No. of Admissions,

Age First Attack, about 29 years.

Time of Leaving, Feb. 22 '93

Time in Hospital, 3m 4 ds.

Result, Improved.

EXAMINATION ON ADMISSION.

Exd by Dr Baker Nov 23/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Somewhat confused.

Quick or Sluggish, Somewhat sluggish

MEMORY:

Past Events, Says "does not remember well". Thinks it Some impaired the past month or so.

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, ?

Correct or Illusive, Illusive; moderately accurate

REASONING POWER:

Ordinary Subjects, No error; only thinks his head a little weak; & can hear with one ear.

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has had an injury to his head; about a month & a half ago. Does not seem to have been a severe blow; was not knocked down nor unconscious. Does not know what did hit him. Thinks this (Hospital) is the Capital of Minnesota. Does not know what he is here for. Sees others here. Thinks they are here on account of religion. Hears some man preaching in his ward.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Sad, he says

DELUSIONS:

Systematized or Not, No well defined delusion

Special Subjects, detected; probably has some

Transitory or Not, ill-defined.

HALLUCINATIONS: None detected

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, Fairly Coherent

Voluble or Reticent, Only brought out by questions; makes an effort to answer questions apparently. Answers in few words.

Personal and Medical History of Mike Mehrkens

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 Feet 9 in WEIGHT, 157 pounds (not much below normal) NUTRITION, about normal

WOUNDS OR ABNORMALITIES, Scar on under lip. Abnormalities (?)

TONGUE, Tremors, Some Coatings, Slight Promptness Movement, Fair

PUPILS, Equality, Equal Size, dilated

Response Light, Slight Accommodation, Yes

SIGHT, Good; left eye slightly less keen.

HEARING, left ear deaf - right impaired

COORDINATION, Arms, finger to nose, Eyes shut, some slight inaccuracy.

Legs, Standing on foot, does well; Standing, eyes shut, sways slightly.

TREMORS, Hands, very little Tongue, Some

Facial Muscles, very slight General,

REFLEXES, Patellar, Unequal; left exaggerated (7 or 8); Right about normal.

Other Reflexes,

ARTICULATION, Hesitating, Somewhat Slurred, Some

FACIAL EXPRESSION, Suggestive of blankness.

SENSIBILITY, Seems fairly keen

HEART, Seems to be no murmurs.

LUNGS, Seem good; Chest 36½ in; Expansion 3 in about.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Yes Constipated, Irregular,

APPETITE, Good, Eats well (no ad) Good Medium, Poor,

SLEEP, Good, Seems Poor, Not does sleep very well (no ad) Irregular, Says is, occasionally.

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; between 50 & 60; claims healthy.

Father or Pat. Relations, father living; says good health; over 60; works every day.

Brothers or Sisters, 3 brothers living; healthy as far as known; 1 sister living - thinks healthy; about 21.

Personal and Medical History of Mike McEtrkens

1892

This man was brought here by deputy-Sheriff O.D. Anderson. The following is history. Has an aunt, on mother's side, idiotic; her habits are good; cause of attack, injury to head, a month ago; form is depressed and paranoiac. First symptoms of disease were manifested about 3 weeks ago; this is 1st attack; Insanity is now manifested on religion. Showed a disposition to injure; once to his wife, cause not known. Is not suicidal; no filthy or destructive habits; has a difficulty of hearing, following an attack of measles 9 years ago. Has not been restrained or confined. Has had treatment from Drs. McKinstry and Brown, for two weeks - Did not improve under treatment.

Nov 19 Nov 19/92. Was quiet, rested quite well, and slept 7 hours, last night. Am. Pulse 89.

" 29 Nov 29/92. On a few occasions, slightly restless for an hour or two; usually rests quite well; is uniformly quiet and sleeps from 6 to 8 hours each night. Pulse has been, 92. 98. 102. 88. 80. 76. 96. 88, 84. 80, on the past 9 and present mornings.

Dec 5 Dec 5/92. Wt 158 lbs. Pulse 72. Dec 9/92. At night, rarely been slightly restless, usually resting and sleeping well. Has been clean tidy and well-behaved by day. Was today, transferred from B2 to B1. Dec 12/92. Was evidently disturbed by the transfer, apparently depressed, eyes suffused with tears, although not actively crying; getting up at night, and pounding on the door, wishing to be let out. Was today sent back to B2.

" 17 Dec 17/92. Has never been noisy at night; at most, has only been somewhat restless; getting up & dressing and wandering about. By day, has been well-behaved, of good personal habits, taking care of himself, taking food well; sitting among others but not engaging in conversation nor in games. At times, walking about aimlessly, getting up & shaking hands in a mechanical way, when approached & greeted, making some what feeble reply to questions as to his condition. Always seems to indicate that he feels well. Seems to be in a sort of dazed, confused, mental state. Has visited in the 14th inst. by brother.

1893
Jan 3/18 Jan 3/93. Wt 153 lbs. Pulse 82. Jan 18/93. Is quiet at night. Cries and is more depressed; almost daily asks if he can see his family. Seems to worry about them. Has lost some in weight. —

Feb 3 Feb 3/93. Wt 156½ lbs. Pulse 88. Has regained his weight, recently lost.

" 18 Feb 18/93. Apparently uniformly quiet at night & sleeping well. Moves about at times a little more freely by day. Is clean tidy & well-behaved. Still retains a somewhat sad & depressed expression. Seems very anxious to be sent away.

" 28 Feby 28/93. Was permitted to go home today with his father & brother.

— Discharged —

Personal and Medical History of John Linn

Vol 20 Folio 44

Sept 20 Appetite Continues good. Has some cough, at times. — " — " —

Oct 1 Oct 1/93. Says that he is troubled somewhat with rheumatism at times. [illegible]

Oct 31 Oct 31/93 [illegible]

Vol 20
Folio 41

CASE RECORD.

Patient's Name John Lind Name Disease Name Physician

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms
May 24	98.8	72	18		Eats fairly well of oatmeal gruel and other light diet.	Night slept and rested well
	99.8	68	18			
May 25	99.4	64	20			Appears much better this A.M. asked to get up 1 P.M. dressed and up on ward. Night slept 6 hrs bowels in good condition Transfered to B 2E.
May 26		72				
May 27						

Recorded by _____ Nurse.

Vol 20 Folio 44

Dec 30 Dec 30/94. Wt 132½ lbs. P 72. Dec 31/94. Has remained up & about; cares for Fire-Hall &c.

Jan 1/95 Condition about as usual, before recent illness. Jan 1/95. Wt 132½ lbs. P 92. Jan 31/95. Keeps about the house, from month to month - Seems quite contented here. Visited Daily, as usual -

Jan 31 Jan 31

...History of Mike McErkens

1897 This man ... The following is history.
Has an a... to head, a
month ago
about 3 w...
disposit...
destruc...
Has no...
for two...
Nov 19 Nov 19th
" 24 Nov 24
is m...
80.7
Dec 5th Dec
pre...
" 12 - f...
c...
" 17
...ing
...e
...spring
...eating
...le softly
...seems
...pressed;
...s lost sound
...afterward a
...newhat sad a

Room 44

July 30 Appetite continues good. Has some cough, at times. —— " —— . ——
Oct 4 Oct 4th 93. Says that he is troubled somewhat with rheumatism, at times: also some cough.
" 31 Oct 31/93 ...

vol 20 Folio 41

CASE RECORD.

Patient's Name John Linn Name Disease ... Name Physician H H H

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
May 20th	100	72	24		On diet of Lot milk & milk toast	Patient came on ward 9 A.M. put to bed.
				11 A.M. gave medicine		night. slept scarcely
				2 P.M. " " gave medicine		any. was quite restless
				7 P.M. " medicine		passed urine freely
				2 A.M. " " medicine		dark color appearance
				3 P.M. medicine	Ate scarcely	bloody.
				4 P.M. " medicine	any thing	
				Medicine discontinued		
				5 45 P.M. Sedlitz powder		
May 21	100.2	84	16	Medicine discontinued	Pork glass hot	passed urine about
	100.6	76	18	5 30 P.M. Sedlitz powder	milk for breakfast	5 times to day each time
				7 15 Applied hot	dinner and supper	passing 7 to 8 oz. dark
				applications over	ate very little	and bloody in appearance
				Kidneys. continued	milk toast.	5 45 P.M. bowels moved
				during night.		freely. Appetite very
				A.M. discontinued		poor. Night slept but
				applications		coughing some
May 22	100.6	88	20	10 A.M. Gave sponge	Pork glass boiled	Patient has had
	100.2	116	26	bath.	milk this A.M.	coughing spells and
				5 45 P.M. sponge bath.	ate little milk	raises phlegm
				10 P.M. sponge bath	toast. took oatmeal	large quantities
				2 A.M. sponge bath.	gruel for dinner	P.M. complained of
					and supper	muscles in right
					ate fair by well	arm paining him
						much also of feeling
						feverish
May 23	99.4	88	18		Pork oatmeal	says he feels
	99.6	72	20		gruel for breakfast	much better to day.
					dinner and	Night slept quite
					supper to day	well

Recorded by ... Nurse.

...ward. Was a "parole".
June/95 June 1/95. Wt 135½ lbs. P 95. June 30/95. Has remained up & about: cares for fire - Hall &c.
July 31 Condition about as usual, before recent illness. July 1/95 - Wt 132½ lbs. P 95. July 31/95. Keeps about the house, from room to room - seems quite contented here. Works daily as usual -

Removed to Infirmary Case Book 32 - page 404

Personal and Medical History of John Linn

Room 44

Appetite continues good. Has some cough, at times. —— " —— . —— .

Oct 4/93. Says that he is troubled somewhat with rheumatism, at times: also some cough.

Oct 31/93. Keeps about as usual. Works very faithfully & intelligently in the Store room, daily. Is always quiet & well-behaved on hall. Neat & clean in personal habits. Still complains some of rheumatism & pains in back. — Nov 1-93 Wt 136 1/2 lbs. Dec. 1-93 Appetite not very good. Bowels irregular.

Dec 31/93 Coughs some. Troubled with weak back. 12/31/93 Good patient. Works at Store. Complains of sore eyes & headache. Is a good worker & generally busy. Jany 1/94 Went down town without permission & got somewhat intoxicated, then retiring fell on heater & cut forehead. Wt 130 lbs. Pulse 80. Jany 31/94 Appetite fair. Bowels regular.

Feb 1/94 Coughs some & is not very strong. Works at Storehouse. Is contented & well behaved. Feb 2/94. Wt 140 lbs. Pulse 84. Feb 28/94. Apparently rests & sleeps well, at night. Appetite fair; bowels regular. Coughs some & is bothered with headaches, once in a while. Behaves very

Mar 1/94 well & works faithfully & diligently in the Store-room, each day. March 2/94. Wt 139 lbs. Pulse 90. March 31/94. About the same.

April 1/94 April 2/94. Wt 141 pounds. Is in good physical condition. Pulse 85. April 30/94 About the same, from month to month. Behaves very well. Works quite faithfully in the Store-room & seems quite satisfied & contented here. Habits are very neat.

May 1/94 May 3/94. Wt 141 1/2 lbs. Pulse 90. May 31/94. Works daily in the Store room. Health does not seem very good.

June 1/94 June 1/94. Wt 140 1/2 " " 84. June 30/94. Complains, at times, of headache & stomach trouble. Still works.

July 1/94 July 4/94. Wt 135 " " 80. Is losing some in flesh, but does not complain of any sickness.

31 July 31/94. Appetite is changeable. Bowels regular. He is uniformly quiet & well-behaved. Works steadily in the Store-room; very civil, willing & obliging. At times, still complains of headache, and some distress in stomach. He does not seem very strong. Habits are neat and clean.

Aug 31 During this period, there does not seem to have been any change in patient. He has been gaining some in flesh.

Sept 30 (8/3. 136 lbs. - 9/3 139 lbs. 10/1 - 143 lbs - Pulse has been about normal). Had a sick spell for a couple of

Oct 31 days about 20th to Aug. but was soon around again. Is uniformly quiet & well-behaved. Nice & pleasant in Conversation. Works daily & willingly in the Stores-Department. Habits neat. Transferred to A 4 Oct 12th -

Nov 30 Nov 5/94. Wt 141 lbs. Pulse 70. Nov 30/94. No special change. Works daily nice at the Store-house.

Dec 31 Dec 1/94. Wt 139 " " 70. Dec 28/94. A change being made in the occupancy of the (A 4) ward, patient was with several others, today transferred to C 2. Dec 31/94 Keeps about the same.

Jany 31/95 Jany 1/95. Wt 142 lbs. Pulse 72. Jany 31/95. No change noted. Still works at Store house.

Feb 28/95 Feb 1/95. Wt 144 " " 72. Feb 21/95. Quiet & well-behaved. Works daily in Store-room.

Mar 31 Left there today, & commenced to take care of Fire-Hall & Employés' quarters. Is very neat, clean

April 30 and thorough about his work. March 1/95. Wt 142 lbs. Pulse 76. March 31/95. No special change.

April 4/95. Wt 143 lbs. Pulse 70. April 30/95. Always about the same. Is at times, much troubled with cough & catarrh: occasionally complains of ill-feeling. Is not very strong. Works daily about Fire-hall

May 10 May 9/95. Has been complaining of considerable ill-feeling, of late. Yet has been doing his

20 usual work about the Fire-Hall &c. May 20/95. As he seemed to get no better, I was, today,

22 transferred to "Infirmary ward" at 9 A.M. Was put to bed, there. May 23/95. Has remained

23 in bed. Urine passed has had a dark & bloody appearance. Has coughed some & slept poorly.

25/27 Also complained of feeling feverish & of pains in muscles. May 25/95. Slept quite well & feels much better, today. May 25/95. 1 P.M. Dressed & up, in ward. May 27/95. Moved to C 2.

(see attached nurse's record of this sickness). Is working a little at Fire Hall. Has a "parole".

June 30 June 1/95. Wt 135 1/2 lbs. P 95. June 30/95. Has remained up & about: cares for Fire-Hall &c.

July 31/95 Condition about as usual, before recent illness. July 1/95. Wt 132 1/2 lbs. P 92. July 31/95. Keeps about the same, from month to month. Seems quite contented here. Works daily as usual.

Examined to Indicate Case Book 32 impression

1893
Jan 3/93 Was in
Jan 3/93. —
almost dai
in weight.
Feb 3 Feb 3/93. Wt 156 1/2 p ined his weight, recently lost.
" 18 Feb 18/93. Apparently t at night & sleeping well. Moves about in the ward a
little more freely by day. an tidy & well-behaved. Still retains a somewhat sad &
depressed expression. Seems very anxious to be sent away.
" 28 Feby 28/93. Was permitted to go home today with his father & brother.

— Discharged —

Personal and Medical History of William Woehrle

Whole No. 3185.
Residence, St Paul, Minn
Date Admission, 18th November 1892
Admitted by, Dr Phelps Hour, 730 PM
How Sent, Jno B. Olivier Jr, Ramsey County
Sex, male
Age, 21 years
Civil Condition, Single
Children, None
Age Youngest Child,
Occupation, Baker
Degree Education,
Profession Religion, Yes Lutheran
Habits, Good
Nativity, Germany
Physicians Committing, Geo. J. Nauley and H. J. O'Brien
Correspondents, Beresford Bakery Co. St Paul Minn
13/11/92 John Woehrle (brother) 511 Adams St N. E. Minneapolis

No. for Year, 97.
Insane Relatives, One sister ; No knowledge as to hereditary
Cause Exciting, Dont Know
Cause Predisposing,
Form, Mania — Acute
Accompanying Bodily Disorder, Mitral regurgitation (valvula 2:3)
Suicidal or Not, Has requested to be shot.
Date of this Attack, One month ago
Duration, about a month
No. of Attack, 1st
No. of Admissions,
Age First Attack, 21 years
Time of Leaving, Oct 28' 93
Time in Hospital, 11 mos 10 dys.
Result, Recd

EXAMINATION ON ADMISSION.

Exd by Dr Baker Dec 3/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, active ; quick
MEMORY: Cant test accurately —
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Probably alert and
Correct or Illusive, Illusive ; cannot test accurately
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,
} Probably perverted
GENERAL DESCRIPTIVE REMARKS:
Takes the examination in a playful way ; goes through "Monkeyish Movements". Cares not to take several tests as he declines to try them.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Yes ; always smiling & good natured
Depressed,
DELUSIONS:
Systematized or Not, Not definitely known
Special Subjects, Cannot learn from him
Transitory or Not,
HALLUCINATIONS: ?
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Very incoherent
Voluble or Reticent, at present rather reticent. Talks much to himself in monotones. Does not apparently attempt to answer questions or very rarely. Knows that he is in Rochester.

Personal and Medical History of William Woehrle

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 inches WEIGHT, 130 lbs. NUTRITION, Below normal. Is anaemic & pale
WOUNDS OR ABNORMALITIES, Probably none.
TONGUE, Tremors, Some coarse Coatings, Slight Promptness Movement, Moderate
PUPILS, Equality, Some unequal; left a little larger. Size, Somewhat dilated
Response Light, Yes Accommodation, Yes
SIGHT, Probably Good
HEARING, Probably good
COORDINATION, Arms, Inquisitive, Eyes shut, good.
Legs, Standing on foot, good. Standing, Eyes shut, good.
TREMORS, Hands, almost none Tongue, Slight
Facial Muscles, almost none General,
REFLEXES, Patellar, Equal; much exaggerated (9-10 Dr. P.'s scale) —
Other Reflexes, Ankle-clonus.
ARTICULATION, ~~Hesitating~~, Makes no effort to pronounce clearly Slurred, Somewhat indistinct & slurred.
FACIAL EXPRESSION, Abnormal. Is smiling most of the time.
SENSIBILITY,
HEART's action very strong; impulse visible & diffuse: 2° sound accentuated - murmurs?
LUNGS, Seem normal. Girth 35½ in. Expansion 2¼ in.
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, Tendency to be.	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good, Fairly, now	Poor, at time of admission	Irregular,
PULSE, See Records	RESP., "	TEMP., "

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Probably short ONSET GRADUAL OR SUDDEN, Probably sudden —

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,
} Cant get any accurate information in these points.

1892

This patient was brought here by deputy-Sheriff Courteau, with the following history. Is of good habits; supposed cause of attack not known; form is acute, depressed; has mitral regurgitation (valvular?). First symptoms manifested one month ago. This is first attack. Insanity is now manifested by delusions of bodily injury & poison. Has shown no disposition to injure others. Has requested tobacco; not disposed to filthy or destructive habits; no peculiarities of temper as previously known; as to bodily disease, not known; has not been restrained or confined nor under medical treatment; is at times excitable and we guess might do himself injury.

Nov. 19 Nov 19/92. Would not stay in bed last night; was quite noisy, crying a good deal, sleeping only about 1 hour. AM. Is talking rapidly & almost incessantly; is incoherent. Attention can be obtained and held for a short time. Is motional. Pulse 120; Skin moist. Ate a quite good breakfast. — PM. Is restless and noisy; ate dinner & supper. Pulse 111, fuller than this morning; Skin hot; " 20 Tongue some coated but moist. Nov 20/92. Was out of bed the greater part of the night, demented and noisy, sleeping only about 4 hours. AM. Pulse 96. Cries and is excited. Eats well. Tongue " 21 some coated, but moist. PM. Pulse 78. Is quieter. Takes food. Nov 21/92. Was noisy and restless, the greater part of last night, sleeping but 2 hours. PM. Pulse 87. Eats well. — " 22 Nov 22/92. Somewhat noisy last night for a couple of hours, sleeping six hours. AM. Pulse 78. " 23 Tongue dry; Eats well; Still restless & excited. Nov 23/92. Somewhat noisy & restless last night, sleeping 4 hours. AM. Pulse 78. Talks incoherently; talks & sings to himself seeing happy; " 24 not ugly nor profane, nor destructive nor dirty. Eats well. Pulse 78. Nov 24/92. Restless and " 25 noisy for 3 hours, sleeping 5 hours, last night. Nov 25/92. Was quiet, and slept well all " 29 night, last night. Nov 29/92. Has been more or less restless and noisy each night since the last note, sleeping from 4 to 7 hours. Was constipated a few days ago & given laxative. Bowels moving. This afternoon, looked flushed & feverish, although not complaining. — Pulse 97. T(o) 102. Put to bed on the "Sick-Ward" C2. 5 PM. Pulse 110. R 30. T(o) 103.8. — " 30 7 PM. Pulse 93. R 21. Was given medicine. Nov 30/92. Was quiet during last night, sleeping 5 hours. 7 AM. Pulse 72. R 20. T(o) 99.2. Lies quietly in bed. Tongue is some Coated; bowels did not move; abdomen quite distended and tympanitic; Coughs slightly; Eats well. — Dec 1 5 PM. Pulse 74. R 20. T(o) 98.8. Dec 1/92. Was restless, sleeping 5 hours last night. Bowels have not moved and urine seems scant. AM. Pulse 70. R 20. T(o) 99. 5 PM. Pulse 64. R 20. T(o) 98.2. " 2 Dec 2/92. Somewhat restless last night, sleeping 5 hours. 7 AM. Pulse 64. R 18. 5 PM. Pulse 62. " 3 refused to permit taking of temperature. Dec 3/92. Is up today. AM. Pulse 60. PM. Pulse 70. " 11 Dec 11/92. Has been restless at night, as a rule, sleeping from 3 to 5 hours, since last note. Has been up daily, seeming fairly strong and claiming that he feel well. Pulse, counted twice daily since the 3d inst., has ranged from 70 to 102. Has been more or less restless, foolish in action, and talking to himself. Today, became ugly and was moved to B3. On the 3d inst Wt. 136 pounds. " 20 Dec 20/92. Has been only slightly restless at night, usually sleeping well, since the last note. By day, has been quiet, good-natured and quite well-behaved. Lies around on the benches, with Eyes closed, the greater part of the time. Has taken food regularly & well, and has seemed somewhat better. " 26 Dec 26/92. Was ugly, fighting today & had to be shut in a room.

1893 Jan 3 Jan 3/93. Wt 151½ pds. Pulse 81. Jan 20/93. Is occasionally slightly noisy & restless for an hour

1893

NAME. Wm Wehrle

DATE, 189 3	WEIGHT.	PULSE.	GAIN.	LOSS.
Jan 3d	151½	81	7½	
Jan 31st	151	76		½
March 2d	150	88		1
April 4th	147	80		3
May 3d	151	88	4	
June 3d	156	112	5	
July 1st	161½	68	5½	
Aug 3d	159½	—		2
Sept 8th	161		1½	
Oct 3d	164½	72	3½	

...huguacuis on a few occasions. Quite often destructive. ...ved. Jan 21/93. Restless & out of bed for 3 hours or so last ... & pillow slips into strings; 6 Am. Has remained up ...s shirts to pieces. Jan 30/93. Attacked an attendant today ...3

... With the exception noted above, has not been reported as noisy ...leeps well. By day, has become more quiet & is now very seldom ...al health about the same.

...somewhat restless & mischievous, but comparatively quiet

... & well-behaved. Appetite almost nothing.

...leeps probably well. Quiet & well-behaved. Health quite fair- ...lar. Is well-behaved at times; at others, is inclined ...ctive at night. Talks incoherently. Habits clean.

... steadily in weight. Is in good physical condition. ...robably-behaved for a time, probably noisy & the ...Skin for some time.

... flesh the past 4 weeks. Appetite good. Bowels regular. — ... July 31/93. Restful & sleeping well, at night. Has been ...elling to work & to do anything requested of him. Habits ...ait now, but shows somewhat of mental weakness.

... Aug 31/93. Continues about as usual. —

...ht (Attendant's note). Talks rationally. Health good. ... 3/93. Has increased somewhat in weight in past month.

" 20 Oct 20/93. Is quiet & well behaved. Appetite good. Makes no complaints. Works in the dining-room. Physical condition good. Mental condition seems to be improving.

" 28 Oct 28/93. Apparently, rests & sleeps well, at night. Has continued quiet & well-behaved. Clean, tidy & of good personal habits. Works steadily in dining room.

Went home, on trial, with his brother (today) who thought he seemed quite well. Health is good. There is a slight air of silliness and a lack of activity, showing slight mental impairment, but he is practically well, at present.

- Discharged -

1892 This patient was brought here by deputy Sheriff Co
Is of good habits; supposed cause of attack not known; fo
regurgitation (valvular?). First symptoms manif
Insanity is now manifested by delusions of bodily i
to injure others. Has requested to be shot; not disp
of temper as previously shown; as to bodily disease,
Nov. 19 now under medical treatment; is at times excitable
Nov 19/92. Would not stay in bed last night; was
about 1 hour. AM. Is talking rapidly & almost
and held for a short time. Is emotional. P
PM. Is restless and noisy; ate dinner &
" 20 Tongue is coated but moist. Nov 20/
and noisy, sleeping only about 4 hours
" 21 is coated, but moist. PM. Pulse
restless, the greater part of last nig
" 22 Nov 22/92. Somewhat noisy last
" 23 Tongue dry & pick; Eats well; Still re
night, sleeping 4 hours. AM. Com
" 24 not ugly nor profane, nor destructive in a
" 25 noisy for 3 hours, sleeping 5 hours, last ni
" 29 night, last night. Nov 29/92. Has been more or le
the last note, sleeping from 4 to 7 hours. Was constipated
Bowels moving. This afternoon, looked flushed & feverish, al
Pulse 97. T 101. Put to bed on the "Sick Ward" C2. 5 PM. Pulse 110. R 30. T 103.8. —
" 30 1 PM. Pulse 93. R 21. Was given medicine. Nov 30/92. Was quiet during last night, sleeping
5 hours. 7 AM. Pulse 72. R 20. T 99.2. Lies quietly in bed. Tongue is some Coated; bowels
did not move; abdomen quite distended and tympanitic; Coughs slightly; Eats well. —
Dec 1 5 PM. Pulse 74. R 20. T 98.8. Dec 1/92. Was restless, sleeping 5 hours last night. Bowels have
not moved and urine seems scant. AM. Pulse 70. R 20. T 99. 5 PM. Pulse 64. R 20. T 98.2.
" 2 Dec 2/92. Somewhat restless last night, sleeping 5 hours. 7 AM. Pulse 64. R 18. 5 PM. Pulse 62.
" 3 refused to permit taking of temperature. Dec 3/92. Is up today. AM. Pulse 60. PM. Pulse 70.
" 11 Dec 11/92. Has been restless at night, as a rule, sleeping from 3 to 5 hours, since last note. Has
been up daily, seeming fairly strong and claiming that he feels well. Pulse, counted twice daily
since the 3d note, has ranged from 75 to 102. Has been more or less restless, foolish in action,
and talking to himself. Today, became ugly and was moved to B3. On the 3d inst Wt. 136 pounds.
" 20 Dec 20/92. Has been only slightly restless at night, usually sleeping well, since the last note. By
day, has been quiet, good-natured and quite well-behaved. Lies around on the benches, with eyes
closed, the greater part of the time. Has taken food regularly & well, and has seemed somewhat better.
" 26 Dec 26/92. Was ugly, fighting today & had to be shut in a room.
1893
Jan 3 Jan 3/93. Wt 151½ pds. Pulse 81. Jan 20/93. Is occasionally slightly noisy & restless for an hour
20

or two at night. Has been ugly and pugnacious on a few occasions. Quite often destructive.
Rarely talks. Physical health improved. Jan 21/93. Restless & out of bed for 3 hours or so last
Jan 21 night - also destructive; tore his sheets & pillow slips into strings; 6 AM. Has remained up
" 30 in his room since 3 am. Also tore his shirts to pieces. Jan 30/93. Attacked an attendant today
and was put in seclusion for a while on C3.
Feb 3/ Feb 3/93. Wt 151 pds. Pulse 76. Feb 20/93. With the exception noted above, has not been reported as noisy
20 or restless at night & apparently rests & sleeps well. By day, has become more quiet & is now very seldom
ugly, pugnacious or destructive. Physical health about the same.
March March 27/93. Usually quiet at night; somewhat restless & mischievous, but comparatively quiet
and well-behaved by day.
Apl to Apl 20/93. Continues uniformly quiet & well-behaved. Eyes almost nothing.
May to May 30/93. Continues about as usual. Sleeps probably well. Quiet & well-behaved. Health quite fair.
" 31 May 31/93. Appetite good. Bowels regular. Is well-behaved at times; at others, inclined
to be disagreeable. Is somewhat destructive at night. Talks incoherently. Habits clean.
Helps some with work on the wards.
June 3 June 3/93. Has been gaining quite steadily in weight. Is in good physical condition.
" 30 June 30/93. Has not been reported as badly-behaved for some time, probably owing to the
closer watch that has been kept upon him for some time.
July 1 July 1/93. Has made a further gain in flesh, the past 2 weeks. Appetite good. Bowels regular.
" 28 July 28/93. Transfered to B2 today. July 31/93. Restful & sleeping well, at night. Has been
to very well-behaved of late. Always willing to work & to do anything requested of him. Habits
Aug 31 are clean. Is quiet & fairly intelligent now, but shows somewhat of mental weakness.
Aug 3/ Aug 3/93. Is in good physical health. Aug 31/93. Continues about as usual. —
Sept 30 Sept 30/93. Works. Seems to be all right (Attendant's notes). Talks rationally. Health good.
Oct 3 Is always in good humor. Oct 3/93. Has increased some in weight in past month.
" 20 Oct 20/93. Is quiet & well behaved. Appetite good. Makes no complaints. Works in the dining-
room. Physical condition good. Mental condition seems to be improving.
" 28 Oct 28/93. Apparently, rests & sleeps well, at night. Has continued quiet & well-behaved.
clean, tidy & of good personal habits. Works steadily in dining room.
Went home on trial, with his brother (today) who thought he seemed
quite well. Health is good. There is a slight air of silliness and a lack of
activity, showing slight mental impairment, but he is practically well, at present.

- Discharged -

Personal and Medical History of August Iverson

Whole No. 3186.

Residence, 411 2nd Av. South. Minneapolis

Date Admission, 18th November 1892
date of warrant 2nd Nov/92

Admitted by, Dr. Phelps Hour, 7.30 Pm

How Sent, J. R. Corrigan, Jopl. Hennepin Co.

Sex, Male

Age, 31

Civil Condition, Single

Children,

Age Youngest Child,

Occupation, Sewing-machine Agent

Degree Education,

Profession Religion, Not a Church member

Habits, Intemperate

Nativity, Norway

Physicians Committing, E. T. Gibson and J. R. Freeman

Correspondents, John Iverson, Andrew Iverson
Faribault Minn

No. for Year, 98.

Insane Relatives, one sister; unable to learn as to heredity

Cause Exciting, Drink

Cause Predisposing,

Form, Mania-Acute

Accompanying Bodily Disorder, No

Suicidal or Not, Not

Date of this Attack, within the last few weeks

Duration, a few weeks

No. of Attack, 1st

No. of Admissions,

Age First Attack, 31 years

Time of Leaving, Nov. 28" 92

Time in Hospital, 5 ds.

Result, Improved

EXAMINATION ON ADMISSION.

Ed by Dr. Baker Nov 19/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Says it is good

Recent Events, Seems fairly good.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fairly active

Correct or Illusive, fairly Correct

REASONING POWER:

Ordinary Subjects,

Own Mental State, } Seems fairly good.

Special Subjects,

EMOTIONAL STATE:

Normal, Calm, Yes: is, however, Easily Excited, when

Indifferent, when he grows nervous & talks

Exalted, rapidly —

Depressed,

DELUSIONS:

Systematized or Not, Unsystematized

Special Subjects, had fears of being harmed.

Transitory or Not,

HALLUCINATIONS: Has had: "of hearing" & "of sight"
Claims has not now —

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, very voluble.

GENERAL DESCRIPTIVE REMARKS:

Was examined on 2d Nov: on the 5th was being brought here, when he escaped from the Deputy at Kedowing. Says he did not know fully that he was running away; was sick at the time. Says he walked over to Faribault where his mother lives - Stayed there about 10 days; went to Minneapolis to work - Officer says him & had him he had better come down to the Hospital, which he concluded to do. Is restless & nervous under the examination possibly through the fear of not making the best appearance, as he realizes quite fully where he is & that he is being examined. While being questioned about various points concerning his health he declares repeatedly that he is in perfect health, has all his senses - "never was better" - Denies any hallucinations or delusions at present —

Personal and Medical History of August Iverson

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10 1/4 in. WEIGHT, 178 lbs (is about av. wt) NUTRITION, Good

WOUNDS OR ABNORMALITIES, Scar on right temple. Abnormalities, probably none.

TONGUE, Tremors, markedly tremulous Coatings, slight, moist Promptness Movement, fairly prompt

PUPILS, Equality, unequal, left larger Size, somewhat dilated

Response Light, limited Accommodation, Yes

SIGHT, Good

HEARING, left ear slightly impaired; right good

COORDINATION, Arms, Finger to nose, Eyes shut, good.

Legs, Standing comfort, well. Standing, Eyes shut, fairly steady.

TREMORS, Hands, Marked. Tongue, Marked

Facial Muscles, Marked; more rt. side, on retention General,

REFLEXES, Patellar, Equal; slightly exaggerated.

Other Reflexes,

ARTICULATION, Hesitating, Rapid Slurred, possibly

FACIAL EXPRESSION, about normal.

SENSIBILITY,

HEART, Sounds clear; 2° somewhat accentuated.

LUNGS, Seem normal; Chest 40 in; Expansion 3 in (about).

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Yes	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good, now, probably has been	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably short ONSET GRADUAL OR SUDDEN, probably sudden.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; Claims healthy

Father or Pat. Relations, Father died about 57. Thinks of Consumption.

Brothers or Sisters, 4 Brothers, all living; all healthy; 1 sister dead; Consumption he claims

Personal and Medical History of *August Iverson*

1893

This patient was brought here by a deputy sheriff, with following history. Has been of intemperate habits; has one extra misdemeanor; Cause of this attack is drink; form, acute; no accompanying bodily disorder, or disease; first symptoms were manifested within the last few weeks; this is first attack. Insanity is now manifested by hallucinations, and delusions; fears that people will kill him. Not disposed to injure others; not suicidal; not filthy or destructive; has not been restrained or confined, nor under medical treatment.

Nov 19 Nov 19/92. Was quiet, restful and slept 8 hours last night. Am. Pulse 72. Ate a good breakfast; tongue is some
" 20 coated. Talks quite coherently and rapidly. Nov 20/92. Again quiet, restful and slept 8 hours last
" 23 night. Am. Pulse 74. Nov 23/92. Has been quiet, restful and has slept 8 hours each night since the last note. Pulse has been 72. 74. & 78, as Each of last 2 and present mornings. By day, has been quiet, clean, tidy and well-behaved; has dressed and taken care of himself; been up + around daily. Gone out walking and moved around much + promptly. Has been free in Conversation, Calm, coherent and rational. Has not seemed Either depressed or exalted. No definite delusions noted. Has seemed somewhat restless, and nervous, especially under disturbing Circumstances, Was today visited by a brother and taken Home by him.

Discharged May 3rd '93.

From 268

Irving O. Sweetzer

1893

Aug 3/18 Aug 3/93. Wt 107 lbs (Has lost 5 lbs, in past month). Aug 18/93. Has been very noisy for a time, today. —
" 31 Aug 31/93. Appetite good; bowels regular. Sleeps well. Talks very little. Appears quite depressed.
Sep 5/ Sep 5/93. While out walking, to day, tried to make his escape. Sep 7/93. Transferred to C2 from B2. —
" 8/30 Sep 8/93. Wt 105½ lbs (is still losing in flesh). Sep 20/93. While on this ward, up to this date, has been
" 30 doing well, fairly. Appetite not very good; bowels regular. Walks some on hall. Sep 30/93. About the same.
Oct 1 Oct 1/93. Has "spells" occasionally, when he thinks he is not treated right + wants to be moved to another ward.
" 5/ Oct 5/93. In his present "spell" does not work + talks but very little. Oct 8/93. Weight 104½ lbs (still losing some)
" 31 Oct 31/93. In "spell". Very quiet, taciturn; also very stubborn. Otherwise no material Change.
Nov 3/ Nov 3/93. Wt 103 lbs. Appetite fairly good; bowels regular. Nov 5/93. Appetite good; bowels regular. Patient
" 6 plays games; goes out walking; does no work, of late. Nov 6/93. Goes out walking nearly every day. Talks quite rationally.
" 30 Nov 30/93. Seems to be making some improvement. Appetite is changeable. Talks quite sensibly, at times.
Dec 4/ Dec 4/93. Wt 101 lbs. (Patient has been losing some in flesh, the past + months). Dec 9/93. Patient is up +
in ward, daily; Appetite is not very good; bowels are regular. Talks but little; is very stubborn + contrary, at times.
" 30 Dec 30/93. Does not seem to change much. Keeps very quiet + taciturn. Inclined sometimes to be quite stubborn.
1894 Jan 2/ Jan 2/94. Weight 103 pounds; (has gained a trifle). Jan 5/94. Has two small sores coming on back, evidently
caused from his continually sitting down, as he scarcely ever moves except at his meals. Appetite not very good.
" 7/18 bowels are fairly regular. Jan 7/94. Sores on back keep about the same. Jan 8/94. Visited, today, by father.
" 30 Jany 30/94. Keeps about as usual. Goes out walking quite regular. Of late, is always asking for whiskey.
Feb 2/ Feb 2/94. Wt 104½ lbs. (continues to gain some in flesh). Feb 4/94. For the last few days, he has been working
" 9 on the ward. Appetite is good; bowels regular. Is brighter of late and more active. Feby 9/94. Transferred to B2.

(Continued to Back of page 1)

Personal and Medical Hist...

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DETAILED HISTORY OF SICKNESS OF MR. W. J. Abbott
DIAGNOSIS.

1893 Oct 2

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM
Oct 28	7	5	102	118				
29	7	5	108	110				
30	7		110					
31	7	5	96	104				
Nov 1	7		106					
2	7	5	116	112				
3	7	5	128	116	34	32	101 2	100 8
4	7	5	130	136	34	32	101 2	99 8
5	7	5	120	134	28	32	100 6	99 8
6	7	5	110	116	32		99 8	
7	7	5	118	134	30		100 4	
8	7	5	108	136	30		99 8	
9	7		132					
10	7	5	114	120				
11	7		122	100			100 2	
12	7		150	140			102	
13	7							

Has bed sores on back and on one each hip
Bed sores doing nicely
Has pimple sore on face
Very restless the greater part
Very restless the greater part of the Morning
Very restless has not talked any
Very quiet restless
Has spells of choking - Respiration
hard and irregular at times
Bed sores about the same
Sore on face doing nicely
Restless and noisy the greater part of the day
Has numerous bed sores
Numerous bed sores blisters on back + limbs
Has water blisters on back + limbs
by friends
Refused to take food
Fluid
Failing
Pulse but little, hours past
Appears to be rapidly failing
5 P.M. Breathing hard and labored
Breathing hard and also rattling
Hands and feet cold
Pulse failing rapidly
in throat
9.15 P.M. Died

Appears
seems
cold.
Wid C Reed
s -
, x

Personal and Medical History of [illegible]

DETAILED HISTORY OF SICKNESS OF MR. W. J. Abbott.
DIAGNOSIS.
November. 93.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
Nov 1	7	5	80	100					Restless & noisy at times Takes what food
									is given him
2	7	5	82	84					Does not eat well
3	7	5	88	92					Appetite good Bowels in not very good
									condition
4	7	5	102	100					Have bath Very restless all day
5	7	5	106	98					Destructive & noisy Bowels some
									what costive
6	7	5	96	98					
7	7	5	98	102					Bowels in some better condition
8	7	5	98	104					Bed is wet damp nicely
9	7	5	100	100					Restless & noisy all day
10	7	5	104	106					
11	7	5	100	108					Has diarrhoea in small amount
12	7	5	104	116					Destructive & noisy
13	7	5	112	114					
14	7	5	110	112					Bed is wet damp nicely
15	7	5	80	94					
16	7	5	100						Takes what nourishment given him
									talks at times & is very noisy
17	7	5	102						
18	7	5	82	94					
19	7		98						Is continually picking his clothing also
									scratching himself
20	7		116						
21	7	5	106	105					
22	7	5	118	104					Bowels in very fairly regular
23	7	5	110	106					Has been coming on each leg
24	7	5	96	108					
25	7	5	106	112					Bed is wet damp fairly well dressed
									morning & evening
26	7	5	102	108					
27	7	5	116	108					Appetite good Sleeps some during
									the day.

time, today. —
ears quite depressed.
to C. from B. —
up to this date, has been
hall. Sep 30/93. About the same
wants to be moved to another ward.
8/93. Weight 104 lbs (still losing flesh)
otherwise no material change.
te good; bowels regular. Patient
ng nearly every day. Talks quite rationally.
le. Talks quite sensibly, at times.
t & maniac). Dec 4/93. Patient is up &
tte; is very stubborn & contrary, at times.
him. Refused sometimes & be quite stubborn

- 5/ [illegible]
- 31 Oct 31/93.
Nov 3/ Nov 3/93. Wt 103,
- 6 plays games; goes out walking
- 30 Nov 30/93. Seems to be making some
Dec 4/ Dec 4/93. Wt 101 lbs. (Patient has been
in ward, daily; Appetite is not very good; bowels are reg
- 30 Dec 30/93. Does not seem to change much. Keeps very fair
1894
Jan 1/ Jan 1/94. Weight 103 pounds; (has gained a trifle). Jan 11/94. Has two small sores coming on back, evidently
caused from his continually sitting down, as he scarcely ever moves except at his meals. Appetite not very good.
- 17/18 bowels are fairly regular. Jan 17/94. Sores on back keep about the same. Jan 18/94. Exists, today, by further
- 30 Jany 30/94. Keeps about as usual. Goes out walking quite regular. Appetite is always asking for whiskey.
Feb 2/ Feb 2/94. Wt 104½ lbs. (Continues to gain some in flesh). Feb 4/94. For the last few days, he has been working
- 9 on the ward. Appetite is good; bowels regular. Is brighter of late and more active. Feby 9/94. Transferred to B².

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Personal and Medical History of Chas A. Sederberg.

from page 248

June 30 — June 12/93. Was visited by his father to day. June 30/93. For some time past has been working with the Store-keeper. Is a quiet & well-behaved patient; clean, tidy & of good personal habits. appetite not very good. Always complaining of bowels giving him trouble & of constipation. —

July 6 — July 6/93. While unloading some barbed-wire today, he cut his hand quite badly; wound dressed. Almost always say "bowels dont move"; "is stopped up"; "has piles" &c when no evidence of trouble is seen & some of these statements are surely false. Patient is in good physical health.

" 31 — July 31/93. Appetite poor. He has been losing some in weight, yet is in good physical health. Continually keeps up his complaint that "his bowels trouble him". Has been quiet & well-behaved for some time and has had no "spell" for several months. Has been clean, tidy and of good personal habits, also. Continues to work at daily in the Steward's department. Would like to go home soon. — very pleasant in manner & freely talkative, at times.

Aug 7 — Aug 7/93. Has continued about as last described. Was to-day visited by a brother, who took patient home, this Evening.

— Discharged —

from 300.

William J. Abbott.

1892
Dec 7/9 (with) in bed sores. Has water blister on back. Was visited by friends, today. Dec 9/93 Appears to be failing. Refused supper this evening. Dec 11/93. Takes but little nourishment, now; seems to be rapidly failing. Dec 13/93. 5 P.M. Breathing hard & laborer. Hands and face cold. There is also a rattling in throat. Sinking rapidly. Died at 9.15 P.M. (See attached C. Record)

Patient has lingered along, a long time, failing with exceeding slowness — Bed sores have been held back for a long time.

Relatives were kept fully advised, from time to time, of patient's condition, & mother was telegraphed his death. She came & had the remains removed.

— Died

Personal and Medical History of Irving O. Sweetzer

Whole No. 3188.

Residence, Warsaw, Rice County, Minnesota

Date Admission, 23rd November 1892.

Admitted by, Dr Phelps Hour, 3.30 PM

How Sent, R. A. Mott, Jf P, Rice County.

Sex, male

Age, 25 years

Civil Condition, Single

Children,

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Not a church member

Habits, Good

Nativity, in Warsaw, Rice County, Minnesota

Physicians Committing, F. M. Ross and J. W. Wood

Correspondents,

No. for Year, 100

Insane Relatives, Grandfather, uncle & aunt on mother's side, and grandmother on fathers side.

Cause Exciting, Onanism

Cause Predisposing, Heredity

Form, Melancholia – Acute

Accompanying Bodily Disorder, undue excitement of genital organs

Suicidal or Not, Yes; tried to last night; has tried to get hold of razor

Date of this Attack, last spring

Duration, some 6 months

No. of Attack, 1st

No. of Admissions,

Age First Attack, about 25 years.

Time of Leaving, Apr. 25. 1899

Time in Hospital, 6 yrs. 5 m. 2 d.

Result, Died Tuberculosis Pulmonalis

Entd by Dr. Baker Dec 6/92

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Active

MEMORY:

Past Events, Is good

Recent Events, " "

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Probably Correct

REASONING POWER: Incoherence

Ordinary Subjects, Fairly Good.

Own Mental State,

Special Subjects, "See Delusion"

EMOTIONAL STATE:

Normal, Calm, Possibly

Indifferent,

Exalted, Probably

Depressed,

DELUSIONS:

Systematized or Not, Systematized

Special Subjects, "See notes"

Transitory or Not,

HALLUCINATIONS: Denies any

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Free & Calm

GENERAL DESCRIPTIVE REMARKS:

In left Sub-Clavicular region is heard a murmur synchronous with heartbeat; loudest at the beginning of expiration. Says grandfather on mother's side died, he believes, insane; had a stroke of paralysis. Was over 80 years old. Still believes that he has been drugged. Was given Cantharides; knows this by it producing a feeling of excitement to his genital organs. Don't know anyone who gave him these drugs. Was also given Belladonna. Knows this by it effect on his pupils; has read of effects of these drugs. Has had these ideas since last Spring. Denies that anyone ever tried to injure him within the past 2 or 3 months.

In case it is necessary to notify relatives in regard to Irving Swantzer, Telephone to Faribault & the message will be sent to Warsaw over the local telephone.

SSION—(Continued.)

STICS.

130lbs NUTRITION, Below normal

right little finger. Abnormalities, none

with marked Promptness Movement, fair

, somewhat dilated

odation, Yes

COORDINATION, Arms, Finger to nose, Eyes shut, Good.

Legs, Standing on foot, somewhat unsteady; Says he feels weak. Standing, Eyes shut, Sways some

TREMORS, Hands, Slight Tongue, some slight

Facial Muscles, almost none General,

REFLEXES, Patellar, Equal; somewhat exaggerated – 7 on D. P's Scale.

Other Reflexes,

ARTICULATION, Hesitating, No Slurred, very little or none

FACIAL EXPRESSION,

SENSIBILITY, Good

HEART, Sounds loud: Apex beat, normal position; no murmurs

LUNGS, Good. Chest 33½ in Expansion 3 in

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, Tendency to be	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular, Yes
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; about 70. Health not very good; Has vomiting & dizzy spells.

Father or Pat. Relations, Father living; about 60; Claims healthy.

Brothers or Sisters, 2 brothers living, Say health very good; 1 brother dead (24) Prone to death on plains in Colorado. Had measles; died, when a child, of scarlet fever—

Whole No. 3188.

Residence, Warsaw, Rice County, Minnesota

Date Admission, 23rd November 1897.

Admitted by, Dr. Phelps Hour, 3.30 PM.

How Sent, R. A. Mott, Jr. P., Rice County.

Sex, male

Age, 25 years

Civil Condition, Single

Children, ——

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Not a church member

Habits, Good

Nativity, in Warsaw, Rice County, Minnesota

Physicians Committing, F. M. Rose and E. Wood

Correspondents,

Cause 1.

Cause Predisposing,

Form, Melanc.

Accompanying Bodily Disorder, undue

Suicidal or Not, Yes; tried to last night; tr...

Date of this Attack, last spring

Duration, some 6 months

No. of Attack, 1st

No. of Admissions,

Age First Attack, about 25 years.

Time of Leaving, Apr. 25. 1899

Time in Hospital, 6 yrs. 5 m. 2 d.

Result, Died Tuberculosis Pulmonalis.

92.8

Entd by D. Baker Dec 6/97

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Active

MEMORY:

Past Events, Is good

Recent Events, " "

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Probably Correct

REASONING POWER: In Exercise

Ordinary Subjects, Fairly Good.

Own Mental State,

Special Subjects, "See Delusion"

EMOTIONAL STATE:

Normal, Calm, Possibly

Indifferent,

Exalted, Probably

Depressed,

DELUSIONS:

Systematized or Not, Systematized

Special Subjects, "See notes"

Transitory or Not,

HALLUCINATIONS: Denies any

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Free & Calm

GENERAL DESCRIPTIVE REMARKS:

In left sub-clavicular region is heard a murmur synchronous with heartbeat; loudest at the beginning of expiration. Says grandfather on mother's side died, he believes, insane; had a stroke of paralysis. Was over 80 years old. Still believes that he has been drugged. Was given Cantharides; knows this by it producing a feeling of excitement to his genital organs. Don't know anyone who gave him these drugs. Was also given belladonna. Knows this by it effects on his pupils; has read of effects of these drugs. Has had these ideas since last spring. Denies that anyone ever tried to injure him within the past 2 or 3 months.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 inches WEIGHT, 116 lbs; used to be 130 lbs NUTRITION, Below normal

WOUNDS OR ABNORMALITIES, Slight scars on left wrist and right little finger. Abnormalities, none

TONGUE, Tremors, Some slight Coatings, Slight; Slightly thick marked Promptness Movement, Fair

PUPILS, Equality, Equal Size, Somewhat dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Finger to nose, Eyes shut, Good.

Legs, Standing on foot, somewhat unsteady; Says he feels weak. Standing, Eyes shut, Sways some

TREMORS, Hands, Slight Tongue, Some slight

Facial Muscles, almost none General,

REFLEXES, Patellar, Equal; somewhat exaggerated — 7 on S. P. Scale.

Other Reflexes,

ARTICULATION, Hesitating, No Slurred, very little or none

FACIAL EXPRESSION,

SENSIBILITY, Good

HEART, Sounds loud: Apex beat, normal position; no murmurs

LUNGS, Good. Chest 38½ in Expansion 3 in

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, Tendency to be	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular, Yes
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; about 70. Health not very good; Has vomiting & dizzy spells.

Father or Pat. Relations, Father living; about 60; Claims healthy.

Brothers or Sisters, 2 brothers living; Say health very good; 1 brother dead (24) Hope to die with pleurisy in Colorado. Had measles; died, when a child, of scarlet fever—

1892

This man was brought here by Sheriff Stewart, with the following history. His habits are good, as regards temperance and morality. Insanity is hereditary, on both mother's and father's side; supposed cause of this attack is Onanism; form is chronic and exalted; there is an undue excitement of genital organs. First symptoms were manifested last spring by insomnia and nervousness. This is the first attack. Insanity is now manifested by his being opposed to Masonry and all religious societies; has shown no disposition to injure others; tried to commit suicide last night, and has tried to get laudanum. Is not filthy or destructive. Previous to symptoms appearing, was opposed to religion. No bodily disease. Has not been restrained or confined. Has been under medical treatment. Drs Dow & Wood have treated him all summer; quieting remedies, sulfonal, hyoscine &c; to quiet the nervousness & produce sleep.

Nov 23 Nov 23/92. On admission, put on B^r. Says that he does not sleep well. Given hypnotic.
" 24 Nov 24/92. Restless for 4 hours, sleeping 4, last night. Am. Pulse 84. Says that he has pain in his stomach
" 25 and nausea last night. Is somewhat constipated. Nov 25/92. Rested well & slept 8 hours, last night.
" 26 Am. Pulse 88. Is constipated. Nov 26/92. Rested and slept well last night. Am. Pulse 88. Has pain
" 27 in lower jaw; probably neuralgia. Nov 27/92. Slept 7 hours last night. Am. Pulse 74. —
" 28 Nov 28/92. Slept 8 hours last night. Has been up daily; this morning remained in bed. Pulse 76.
" 29 Says his mouth is sore & he cannot eat. Nov 29/92. Restless for 4 hours, sleeping 5, last night.
Am. Still in bed. Pulse 69. Heads aches severely. Is considerably stirred up about being kept here.
Says he wont eat any nor take any medicine, while here." Pm. Says "he has been drugged." Refused
" 30 all food today except a little milk, taken from the Dr's hand. Nov 30/92. Was restless for 5 hours,
sleeping 3, last night. Am. Still in bed. Ate his breakfast.

Dec 1 Dec 1/92. Rested well, and slept 8 hours last night. Am. Pulse 73. Dec 5/92. Has rested and
slept quite well, since the last note. Wt 112½ pds, today. Pulse has been 73. 80. 80 am & pm on the
" 13 past 3 and present mornings. Dec 13/92. Rested and slept well, until last night, when
he was restless and slept poorly. Was up for a time, after his confinement to the bed recorded
above; went to bed again at his own request & got up again yesterday. Complains often of being weak
and nervous. Pulse has been 72. 84. 60. (?) 80. (?) am & (?) on the past 6 and present mornings.
" 14 Dec 14/92. Complains of head-ache today. Pulse 80.

1893
Jan 3/4 Jan 3/93. Wt 115½ Pds. Pulse 79. Jan 4/93. Has apparently rested and slept well since the
above notes on this subject. Has never been noisy at night. For 2 or 3 weeks after admission, spent
a good deal of time in bed, claiming himself weak & nervous, and that he felt better in bed. For
the past 2 weeks, has been up almost continuously, by day. Has always been uniformly clean, tidy,
and well-behaved. Talks a great deal, and very promptly and decidedly, with earnestness of expression.
Speech is coherent. Thinks himself unjustly kept here; that he is not insane, but merely, weak
and nervous, and that he will get worse here instead of better. Expressed a delusion that he
was being drugged, which ideas, it seems, he held before coming here. Refused food for a short
time, but has since eaten regularly & fairly well. Has seemed a trifle less impatient & irritable today.
" 8 Jan 8/93. Is much worked up & excited, swearing about being kept here. Says he is sick. Has
" 9/10 mild tonsilitis. Is in bed. Jan 9/93. Temp. Jan 10/93. Was lying down, very much dis-
-turbed; suddenly began tearing his coat; at the approach of the attendant remonstrating with

1893

him, he flew violently at the attendant, and fought him desperately. Spell lasted about
Jan 11 an hour. Jan 11/93. Is in bed this morning. "Is all broke up". Is afraid of getting medicine.
" 17 Jan 17/93. Kept his bed until today. Pulse ranged, while in bed, from 70 to 80. Said "the bed
" 24 is the best place he had found". Is up today and does not feel so well. Jan 24/93. Has remained
up daily since the last note. Quiet and fairly well-behaved. Was visited at the 17th inst.
by a friend.

Feb 3/6 Feb 3/93. Wt 120 pds. Pulse 92. Feb 6/93. Am. Is in bed. Nothing appears to be the matter with him,
" 7 talks a good deal, but most of it is irrational. Feb 7/93. Am. Is still in bed - appetite good. Bowels
" 11 regular. Says he is "resting up". Feb 11/93. Remains now in bed only part of the time. Says he feels well.
"Don't know what will be the next thing on the programme"; "he wants to be prepared for it when it comes."
" 13 Feb 13/93. Complains of his teeth paining him. (Teeth are apparently all sound). Was visited yesterday
" 25 by a friend & today by his mother. Feb 25/93. Yesterday & today visited by his brother. Wanted to go home
with the latter, who advised him to remain here a while longer. Patient was much put out
by brother's refusal to take him out; said he would then give up in despair & that he would harm
himself if his wish was not complied with. Had an hysterical attack, fell down on the floor, kicked
about &c. Was picked up & placed on a seat where he shortly came to himself & behaved quite rationally.
Is now up daily, out on the hall, dressed. Is looking well - appetite is good. Also sleeps well.
Bodily health seems quite good.

Mar 4 March 2/93. Wt (in underclothing) 107 pds. Pulse 86. March 7/93. Has been in bed the past 5 days; nothing
" 28 appears to be the matter with him; says he simply preferred remaining in bed - got up today.
March 28/93. Restless at night but not so, as far as reported. Has remained up every day; usually
claims he feels fairly well. Inquires very anxiously what we want him to do & goes on & alludes
incoherently to "marrying the girl", "to the masons" & various other subjects. Is rather thin.
" 31 March 31/93. Is in bed today. Wants to go home.

Apr 1 April 1/93. Up today, lying around. April 2/93. Went to bed again.
" 4 April 4/93. Wt, in underclothing, 101½ pds. Pulse 68. Visited, today, by his father.
" 5/7 April 5/93. Has poor appetite. Is losing in weight. Put on tonic. April 7/93. Sleeps today.
" 11½ April 11/93. Wt, in underclothing, 97½ pds. April 12/93. Am. Pulse 80. Te 98. Pm. Pulse 80. Te 98.8
" 13 April 13/93. Am. Pulse 76. Te 97.6. Refuses his medicine. Put on Mosquera's beef meal. —
" 14/18 April 14/93. Am " 52 " 98.4. April 16/93 Am. Pulse 84. Te 98.4.
" 17/18 April 17/93. Has been eating very little for some time. April 18/93. Wt, in underclothing, 99½ pds.
" 19/22 April 19/93. Visited today by his father. April 22/93. For some time past, last taken food very
poorly, refused medicines, & more recently has lain in bed in a stuporous condition, refusing
to say anything. Conversed with his father, however, when he was here. Patient was got up
& dressed & prepared to resent home, when he spoke quite cordially & freely with the officers
and bade them good-bye. Went home today with his father.

July 3/4 July 3/93. Has returned today. Was put on B^r. — July 4/93. Weight 112 pounds. —
" 31 July 31/93. Appetite poor; bowels, as a rule, regular. Is depressed. "Wants to get out or go back
Talks sometimes. Sleeps apparently well. Does not, at present, seem so strong as when he came
back. Talks always in a despondent way. Inclined to be incoherent & full of delusions.

(Carried to 263)

Personal and Medical History of John Erikson #3

Whole No. 3190

Residence, No permanent residence at any place

Date Admission, 28th November 1892

Admitted by, Dr. Phelps Hour, 7 PM.

How Sent, S. J. Nelson, Court Commr. Goodhue Co.



Sex, male

Age, 28

Civil Condition, Not Stated

Children, " "

Age Youngest Child,

Occupation, Locomotive Fireman

Degree Education,

Profession Religion, Lutheran

Habits, Temperate; religious.

Nativity, Sweden

Physicians Committing, Philo. E. Jones and N. Juell

Correspondents, Ed. Haughton
616 North Plum St. Ottumwa, Iowa.

No. for Year, 102

Insane Relatives, —— ; Insanity not hereditary

Cause Exciting, Masturbation

Cause Predisposing, " "

Mania — Acute

anying Bodily Disorder, No

or Not, attempted to cut throat with knife in California (time of 1st attack probably)

Date of this Attack, not exactly stated

Duration, " " "

No. of Attack, appears to be 2nd

No. of Admissions, 1

First Attack, about 25 Years.

Time of Leaving, September 6th 1902

Time in Hospital, 9 yrs 9 mos 9 days

Result, Died: Asphyxia from Carbonic acid Gas (accidental) —

EXAMINATION ON ADMISSION.

Exd by Dr. Bates Nov 30/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Fairly clear at present

Quick or Sluggish, Fairly active

MEMORY:

Past Events, Says "not very good"; has "Spells"

Recent Events, when he cannot remember.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Fairly alert; does not observe very widely

Correct or Illusive,

REASONING POWER: Fair exercise

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not,

Special Subjects, See notes

Transitory or Not,

HALLUCINATIONS: Has had "of hearing"; possibly "of taste"

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Fairly Coherent

Voluble or Reticent, Talks when questioned.

GENERAL DESCRIPTIVE REMARKS:

Has not worked for 3 or 4 weeks; just because he could not stand on his legs. His knees & toes got cold. Has had more or less cough for 5 years past. Has sensation as if toes were not there; as if they might be grown out. Was in Hospital in Redwing. Thought some one was after him; ran away one night; tasted the snow; it tasted of fire, brimstone, matches &c. Thinks God must have had possession of him. Has sung and prayed a good deal. —

Personal and Medical History of John Erikson

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 Feet 6 in WEIGHT, 144 lbs (Weight 3 yrs ago) NUTRITION, Rather poor; pale, anaemic

WOUNDS OR ABNORMALITIES, Scar on left index finger; slight scar left groin. Abnormalities ? —

TONGUE, Tremors, Slight Coatings, almost none; teeth marked Promptness Movement, Very slow

PUPILS, Equality, Equal Size, dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Fairly Good

COORDINATION, Arms, Finger to nose, eyes shut, good.

Legs, Standing one foot, considerably unsteady standing; eyes shut, fairly steady. Running shuckey, no hesitation seemingly —

TREMORS, Hands, almost none — Tongue, Slight

Facial Muscles, Some tremors on intention General,

REFLEXES, Patellar, Equal; exaggerated (8 or 9 Dr. P's scale) —

Other Reflexes,

ARTICULATION, Hesitating, Some Slurred, but fairly clear.

FACIAL EXPRESSION, Sad: Cowls some

SENSIBILITY, Seems normal.

HEART, Seems normal.

LUNGS, Seem good; Chest 35½ in Expansion 2½ in

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Constipated, Yes Irregular,

APPETITE, Good, Yes Medium, Has been Poor; is better now

SLEEP, Good, Has been very Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 2 or 3 months ONSET GRADUAL OR SUDDEN, Gradual

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Can't say if mother alive now; 3 years ago was 55. Had poor health.

Father or Pat. Relations, Don't know if father living now: was 48, 3 years ago

Brothers or Sisters, Has 3 brothers & 1 sister; were in good health when he last heard of or from them. Knows of no relatives having been in hospital.

1892 This man was brought here by Arthur Anderson, deputy, with following history. Is of temperate & religious habits. Cause of attack, masturbation; form, chronic, depressed. No accompanying bodily disease. Commenced masturbation when 12 years of age & continued it ever since. Has had an attack in California, 3 years ago, where he says that he was confined in Hospital 3 months. Insanity is now manifested by his praying & singing; reading in bible and he believes the devil has possession of him. Has not, so far as known, shown disposition to injure others. Says that he attempted to cut his throat with a knife in California. Not disposed to filthy or destructive habits; no bodily disease. Has not been restrained or confined. According to his statement was treated for 3 months in California; has not been treated here. This being a masturbator seems to prey on his mind, causing dementia.

Nov 29 Nov 29/92. Rested quite well, sleeping 6 hours last night. Am. Pulse 88. Pm. Pulse 92.

" 30 Nov 30/92. Has quiet last night; apparently sleeping well. Am. Is up, dressed; sits in one place, looking steadfastly out of the window. Looks as if about to cry. Says "he is looking at a headlight". Face is drawn in an expression of intensity; he occasionally shakes or trembles. Says "he is trying to get power"; "can't get his toes back; some one has his toes".

Dec 1 Dec 1/92. Rested fairly well last night and was quiet. Am. Pulse 80. Is constipated.

" 2/3 Dec 2/92. Rested well last night & apparently slept well. Am. Pulse 84. Dec 4/92. Complains

" 5/7 of constipation & insomnia. Dec 5/92. Wt 139 lbs. Pulse 88. Dec 7/92. Is not markedly restless

" 8/9 at night and is quiet. Am. Pulse 96. Dec 8/92. Am. Pulse 96. Dec 9/92. Am. Pulse 76. —

" 10 Dec 10/92. Is pale & anaemic; put on tonic.

1893
Jan 3/ Jan 3/93. Wt 142 lbs. Pulse 92. Jan 4/93. Is uniformly quiet at night. Occasionally somewhat restless, but sleeps fairly well. Has been up & around daily, not having been confined to his bed, nor having complained of feeling ill. Has been clean, tidy & well-behaved. Has been good-natured; smiling rather sillily & shaking hands when he meets the officers. Talks some when questioned; at other times, very little or none. Sits much in one place or lies around; does no work. Is pale. Has taken food well.

" 19 Jan 19/93. Got an instrument and began pounding the door today. Attacked the attendants

" 24 when they asked him to give it up & fought quite hard. Jan 24/93. Has been quite often somewhat restless at night, getting out of bed, sleeping from 5 to 7 or 8 hours. Has been fairly well-behaved, as a rule, by day & quiet. Lies around & does nothing.

Feb 3 Feb 3/93. Wt 145 lbs. Pulse 92.

" 25 Feb 25/93. Very infrequently restless for an hour or so at night; almost uniformly quiet & restful and sleeping 7 to 8 hours, each night. By day is fairly well behaved, idle, silent & inactive. Sits or lies around in the benches, or in the hall. Has become very slouchy in dress. In fair bodily health —

Mar 4/ March 2/93. Wt 145 lbs. Pulse 86. March 4/93. Has been somewhat restless at night lately.

" 25 March 25/93. Restless for 3 hours last night. Attacked a fellow patient this morning. —

" 29 March 29/93. Is quiet at night & with the exception mentioned above, has seemed to rest & sleep well. Behaves rather foolishly, making up faces & assuming strange attitudes by day. Does not seem to be gaining any. —

Apr 4/ April 4/93. Wt 146 lbs. Pulse 78. April 26/93. Occasionally restless for from 1 to 2 or 3 hours at night,

1893
Has been rather foolishly behaved and at times troublesome by day.

May 3/ May 3/93. Wt 148 lbs. Pulse 86. May 22/93. Has been restless for an hour or so, on about only 8 nights

" 22 during last month. Sup. taken daily; fairly tidy, still somewhat inclined to be slouchy, idle, inactive

" 31 and foolish in manner. Health seems good. May 31/93. Appetite good. Bowels regular. No cough noticed. Is inclined to be rough with his fellow patients & is continually getting into trouble with them. Is incoherent in talk at times; at others, coherent. Was transferred to C[3] on 29th inst. Is in apparently good physical condition. Habits fairly neat.

June 3 June 3/93. Wt 148½ lbs. Pulse 78. Cut his finger with a table knife at breakfast. Says "he wants the finger off". —

" 10 June 10/93. Scratched his hand & face with a nail today.

" 30 June 30/93. Is very mischievous, at times, on the hall. Habits neat at times & again, dirty. Has to be fed out on the hall, being violent & destructive while in dining-room

July 7/17 July 7/93. Wt 149 lbs. Pulse 72. July 17/93. Cut his forefinger with a piece of tin; not

" 23 seriously, however, says "he wants this finger off". — July 23/93. Cut this same finger slightly

" 31 again today. July 31/93. Appetite fair; bowels normal. Physical condition apparently good (though he has lost 12 pounds in weight since July 2nd). Is mischievous & destructive. Has to be constantly under watch. Has "spells" where he is noisy. Dirty in habits. —

Aug 1/ Aug 1/93. Wt 137 lbs. Pulse 74. Appetite is very poor. Aug 10/93. Injured one of his fingers today, causing

" 10/ it to bleed (see above July notes in this connection). Aug 21/93. Appetite is improving. Aug 31/93. His

" 31 appetite is now good. Bowels regular. Physical condition very good. Apparently rests & sleeps well, at night. Is fairly well-behaved. Is not noisy nor destructive nor considered ugly. Is, however, mischievous around water-closet & washroom. Has to be fed, on the hall. Again cut one of his fingers slightly; "wants it off". Face recently bruised by a fellow patient in a quarrel. Habits, not at all neat; hard to keep his clothing in proper shape. Talks but little & then to himself. Has spells of laughing. Understands when spoken to, but does not reply.

Sep 2/ Sep 2/93. Wt 140 lbs. (a slight gain). Pulse 96. Sept 27/93. No change to report. Physically & mentally

" 30 about the same as described in last general note. Sep 30/93. No noticeable change.

Oct 1/ Oct 1/93. Wt 137 pounds. Pulse 98. Oct 15/93. Appetite fair. Still has to be fed, on the hall.

" 31 Oct 31/93. Appetite is only fair, for some time past. Still fed, on hall. Bowels are regular. Is still inclined to be mischievous & destructive requires constant watching. Is not considered quarrelsome or noisy, generally; understands what is said to him. Has long "spells" of laughing. Physical condition good. Habits are not very clean. Nov 2 93 Wt 142 Pulse

Nov 30 93 Appetite fair. Fed on hall. Bowels reg. Health good. Behavior mischievous noisy. disobedient. Still generally incoherent. Improvement. Does not try to injure or maim himself. Personally

Dec 4/31 Injuries none. Dec. 4. 93 Wt 146 Pulse. Dec 30 93 Appetite fair. Fed on hall. No change

Jan 7/31 Jan 7/94 Wt 143½ Pulse Jan 31. 94 No change. —

Feb 1/28 Feb 1/94 Wt 144 lbs. P. 78. Feb 28/94. Appetite fair; bowels regular. Behavior is quiet. He talks very little. is incoherent in speech. Physical condition good, but, mentally, no improvement is noticed —

Mar 1/31 March 1/94. Wt 141 lbs. Pulse 76. March 31/94. About as usual. Is inclined to be dull & stupid. Talks incoherently. Not very neat in his habits. No improvement can be observed, at this date. —

April 1/ April 1/94. Wt 146½ lbs. Pulse 78. April 26/94. Was vaccinated today. April 30/94. Does not seem

30 (carried back of page 1)

Whole No. 319
Residence, St Paul, Minn
Date Admission, 28th November 1894
Admitted by, Dr. Phelps Hour, 7 PM
How Sent, John B. Olivier Jeff. Ramsey County
Sex, Male
Age, 30 years
Civil Condition, Single
Children, None
Age Youngest Child,
Occupation, Miner
Degree Education,
Profession Religion, Not a Church member
Habits, Hard-drinker; Easy morals
Nativity, Wisconsin
Physicians Committing, E. F. Geer and G. A. Renz.
Correspondents, Mrs H. H. Bennett
(Sister's address) 76 West Winifred St. St Paul. Minn

No. for Year, 103
Insane Relatives, None; Insanity not hereditary
Cause Exciting, Supposed he was when he was poisoned in Rocky mountains.
Cause Predisposing,
Form, Dementia – Epileptic
Accompanying Bodily Disorder, Total Blindness & Epilepsy
Suicidal or Not, Attempted; with Knife; propensity not now active
Date of this Attack, 1½ years ago; loss of mind
Duration, about 1½ years
No. of Attack, 1st
No. of Admissions,
Age First Attack, 28+ years
Time of Leaving, Jan. 24th '93
Time in Hospital, 1 mo 27 ds.
Result, Improved.

EXAMINATION ON ADMISSION.

Exd by Dr. Baker Nov 30/94

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Seems clear at present
Quick or Sluggish, fairly active

MEMORY:
Past Events, Seems fairly good
Recent Events, " "
Special Subjects,

PERCEPTIVITY:
Alert or Dull, fairly alert
Correct or Illusive, fairly correct

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,

EMOTIONAL STATE:
Normal, Calm, Yes
Indifferent, possibly
Exalted,
Depressed,

DELUSIONS:
Systematized or Not,
Special Subjects, None definite detected
Transitory or Not,

HALLUCINATIONS: denies any

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherently
Voluble or Reticent, Talks quite freely

GENERAL DESCRIPTIVE REMARKS:

Has Salt-rheum on his body; denies having had venereal disease; has "spells" when "his knees" by to-day" and he falls. Sometimes is conscious of these "spells". Usually is unconscious; has been having them since last spring. Thinks & believes he was poisoned in the Rocky Mountains. Then was poison in his medicine & poison in the water he drank. Strain through copper ore. Began losing Eyesight about a year ago last august; it began by blurring – which has latterly become dizzy. Last February & Spring ceased to be able to see anything. Has not drunk much since he got blind, but used to drink before that –

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10 in WEIGHT, 195 lbs. NUTRITION, about normal
WOUNDS OR ABNORMALITIES, bullet scar on Rt. thigh; scar on left Shoulder & on Rt. Knee. Is totally blind
TONGUE, Tremors, quite marked on protrusion Coatings, none; moist. Promptness Movement, fairly prompt
PUPILS, Equality, slightly unequal; left larger. Size,
Response Light, do not give; seems to be slight ~~Accommodation~~, variation without reference to accommodation or light —
SIGHT, Is blind.
HEARING, right side much impaired; left somewhat.
COORDINATION, Arms, finger to nose, (Eyes shut) fairly good;
Legs, Standing, one foot, Can't stand. Standing (Eyes shut) sways some.
TREMORS, Hands, some Tongue, quite marked, on protrusion.
Facial Muscles, slight of face. General,
REFLEXES, Patellar, Equal; about normal
Other Reflexes,
ARTICULATION, Hesitating, some slightly Slurred, slightly.
FACIAL EXPRESSION, Inclined to be dull & blank;
SENSIBILITY, Hypersensitive to pain; feels sensation of cold well.
HEART, Sound somewhat distant; 2° Sound somewhat accentuated.
LUNGS, Seem good; Chest 41½ in Expansion 3½ in (about).
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes		Careless,
BOWELS, Normal,	Constipated, Yes (claims habitually)		Irregular,
APPETITE, Good, Yes	Medium,		Poor,
SLEEP, Good, Has been, yes.	Poor,		Irregular, restless since here.
PULSE,	RESP.,		TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Probably slow.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living; about 54. Pretty good health.
Father or Pat. Relations, Father living; about 70; Claims very good Health
Brothers or Sisters, 2 brothers living; the Eldest has had fits; the other paralyzed in lower half of body; 2 brothers dead; both in infancy; 2 sisters living in St Paul; Claims all in good health —

Personal and Medical History of George Stollenburg
"Scholenburg"

1892

This patient was brought here by Mr. Courteau, deputy sheriff, with following history. Has been a hard-drinker and of easy morals; cause of attack supposed to be when he was prospecting in Rocky Mountains; form is depressed; suffers from total blindness and Epilepsy; injury on head in fights &c. First symptoms manifested 11 years ago; loss of mind. This is first attack. Do now refuses to obey, speak, or act. Has shown no disposition to injure others. Has attempted suicide, with knife; propensity not now active. Is not disposed to filthy or destructive habits; no peculiarities of temper &c previously shown. Has not been restrained or confined. Has been under medical treatment for loss of sight. no result.

Nov 29/92 — Nov 29/92. Has quite restless last night and did not sleep well. Nov 30/92. Again passed a restless night and did not sleep well. Patient claimed he slept none; that the room was too hot; got into a quarrel with his room-mate, about which he talks good-naturedly. Appetite is not very good. Talks freely & coherently. Transferred today from A⁴ to B³.

1892
Dec 1 — Dec 1/92. Has restless for a couple of hours, sleeping 5 last night. Am. Pulse 80. Is costive.
" 2/3 — Dec 2/92. Restless for a couple of hours, sleeping 6 last night. Am. Pulse 96. Dec 3/92. Again restless, sleeping 6 hours last night. Am. Pulse 92. Dec 4/92. Slept 7 hours last night.
" 4 — Am. Pulse 80. Is costive. Dec 5/92. Somewhat restless last night, getting out of bed,
" 5 — sleeping 5 hours. Am. Pulse 76. Wt 158½ pds. Dec 6/92. Restless for 1 hour, sleeping 7 last
" 6 — night. Dec 7/92. Slept 8 hours last night. Am. Pulse 68. Dec 8/92. Slept 5 hours
" 7/8 — last night. Am. Pulse 74. Had a "spell" yesterday, in which he fell out of the chair, but had
1893 — no convulsions. Was over it in a few minutes.
Jan 3/93 — Jan 3/93. Wt 164 pds. Pulse 84. Jan 5/93. Has been uniformly quiet; occasionally slightly restless; on the whole, sleeping well at night. By day, has been clean, tidy & well-behaved. Talks freely & coherently, usually good-naturedly & cheerfully. Does not usually express definite delusions. Once gave expression to the very firm idea that he had been taking some medicine or drug with his food; thought it was given by the Dr. Also thought he had been taking mercury, claiming that his teeth were loose. Fits have occurred, but are usually without active convulsion and are quite quickly recovered from. A mild degree of swelling, accompanied by slight redness, with fairly definite outlines, began on left cheek & spread over face & lower part of forehead, which site is occupied by some slight staining of skin. Eye-sight is completely gone. Was visited on the 1st of the year or more exactly Xmas-Day, by his nephew. Has lost in weight without apparent cause.
" 24 — Jan 24/93. Has had fewer fits, of a mild form; has been quiet, good-natured & cheerful; rest full at night. In good physical condition & of good habits.
Was today visited by his nephew & taken home by him.

— Discharged —

Personal and Medical History of George E. Peters

from page 360

1893
Oct 5/30 (Contd) — declined, saying he did not feel well. Oct 30/93. Appetite very good. Bowels regular. Has been kept in C³ in the day time (as he can be more closely guarded & watched then) since he tried to make his escape, as above reported. Is very restless; never contented. Walking the floor most of the time, while awake; writes a good deal; seems to be quite nervous, at times. Says he wants an Electric treatment". Is always talking about going back to Stillwater to clear himself from the charge against him. Has not gone out walking since his abortive trial to escape. Habits clean. No work.
" 31 — Oct 31/93. Still quite restless; walks the floor most of the time. Never seems contented; ever watching for an opportunity to escape: & is closely guarded in the C³ Hall, in day time. Habits clean. Is in good physical condition. Writes occasional letters; habits are clean & neat. —
Dec 31 — Dec 31/93. There is no special note to make, during these past 2 months, in regard to this patient, or his condition. He continues, more or less, restless, and requires to be constantly & closely watched. He has been noticed, at times, to become much confused. He attends dances & other entertainments given for the patients, but in these dances he moves about stupidly & in a bewildered manner. Has written a few letters to his relatives. Physical condition is quite good. —
1894
Jan 31 — Jany 31/94. No noticeable change, at this date; still quite restless; is very discontented
Feb 1/28 — Feb 1/94. Wt 164 pds. Pulse 74. Feb 28/94. Appetite good; bowels regular. Behavior, of late, is fairly good; tho' he continues restless; never contented in any place, always talking "about getting out of this place and going home". Habits are neat & clean. Physical condition is good. —
Mar 1/31 — March/94. Wt 163½ pds. Pulse 84. March 31/94. No change noticeable, at this date. —
Apr 1/30 — April 2/94. Wt 163½ " " 76. April 30/94. Patient keeps about the same from month to month.
May 1/31 — May 1/94. Wt 162 " " 78. May 31/94. Behaves well. Talks rationally; somewhat restless & is generally walking up & down the hall. Habits are neat and clean. Is in good physical condition.
June 1/30 — June 1/94. Wt 158½ pds. Pulse 84. June 30/94. Still quite restless. Quite frequently asks "what he must do to get out of this place"; always suggesting some way by which he thinks he may improve. Seems somewhat weak & absent minded; forgets things quite easily; asks a good many questions. Habits clean. He does no work. Still requires careful watching. Physical health is good. —
July 1/31 — July 1/94. Wt 156 pds. Pulse 92. July 31/94. Keeps about the same. Attends patients' entertainments & dances. Becomes very easily confused in action & manner, quite easily. —
Aug 1/31 — Aug 1/94. Wt 155 pds. Pulse 94. Aug 31/94. Keeps about as described in note of June 30th (above).
Sep 1/30 — Sep 3/94. Wt 154 " " 106. Sep 30/94. Acts very strangely, at times. Mental power seems growing weaker.
Oct 1/31 — Oct 1/94. Wt 156 " " 78. Oct 31/94. Behavior is very restless; is very discontented & wants to get away; requires very close watching. Is walking the hall most of the time. Mental power seems growing still weaker. Is always asking about something, or making some suggestion for which he thinks he can get home. Attends patients' dances, quite regularly. Of late, has been noticed to act quite strangely when he is participating in them; making curious movements; face then wears a very "way off" expression and, at times, he has been noticed to become quite confused & bewildered even in the simplest movements in these dances. When spoken to, answers quite readily. Health is good.
Nov 1/30 — Nov 1/94. Wt 161 pds. Pulse 70. Nov 30/94. Behavior good; talk rational, but is somewhat simple & foolish.
Dec 1/31 — Dec 1/94. Wt 162 " " 90. Dec 8/94. Transferred to C³. Dec 31/94. Talks in a rambling manner, but answers questions rationally, as a rule. Very restless during the day. Habits clean. Seems "confused" at times.
1895
Jan 1/31 — Jany 1/95. Wt 161 pds. Pulse 78. Jany 31/95. Talks in a rambling silly manner. Generally, no change noted.

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Personal and Medical History of Dana Bush

Whole No. 3192.

Residence, Lake City, Minnesota

Date Admission, 29th November 1892

Admitted by, Dr Kilbourne Hour, 2 Pm

How Sent, Sheriff of District Court, Wab

Sex, Male

Age, 28 Years

Civil Condition, Single

Children, none

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Reared a Catholic

Habits, Reputed Good

Nativity, Wabasha County, Minnesota

Physicians Committing, J. B. Cole M.D.

Correspondents,



No. for Year, 104

Insane Relatives, Insanity hereditary; no evidence of it-none to my knowledge.

citing, not stated

disposing, not given

Manic, Chronic

aying Bodily Disorder, No

r Not, Not

is Attack, date of first symptoms not known not known - probably some time

ack, not 1st

missions, 2nd here

Attack, 22 [2]

eaving,

ospital,

Result,

EXAMINATION ON ADMISSION.

Exd by Dr Baker Dec 6/92

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, probably somewhat sluggish

MEMORY:

Past Events, Seems rather uncertain

Recent Events, appreciates, but is not very accurate

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Inclined to be rather dull

Correct or Illusive, fairly correct as far as observation goes

REASONING POWER:

Ordinary Subjects, —

Own Mental State, that "is witched"

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent, probably

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, that he is bewitched

Transitory or Not,

HALLUCINATIONS: used to hear voices - does not now - Spirits used to talk to him -

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Fairly Coherent

Voluble or Reticent, Answers questions after considerable hesitation

GENERAL DESCRIPTIVE REMARKS: Shows a slight scar on stomach; says it is a "witch-mark"; got it last July from a witch who got hold of him. "It burned dreadfully". Knows of a child that had one, too. Says, was sent here because knows called crazy. States he is not crazy but bewitched. Claims he has seen God at Rest Island and He looks like any ordinary person. Talks (patient) has the purpose of saving people from drinking whiskey &c. Got witched away from Rest Island on 26th ult past. Says spirit of another person got into him and that he could not help doing the shooting. Denies claiming to be Christ or preaching. Claims has never got drunk. Sits rather stolidly, quietly in chair, looking around while being examined. After each question, hesitates & says "let me." & after repetition of question, answers, usually coherently. Repeats, again & again, that he is witched and has been twice a child. Answers "I don't know" to a good many questions.

Dana Bush

ISSION—(Continued.)

ISTICS.

(last written) NUTRITION, Good

Promptness Movement, rather sluggish

lated

Copy of hearing petition of Carrie Busch & Herman Busch as for appointment of a Guardian for Anton Busch served upon Dr A.T. Kilbourne Supt. and Resident Admit-

Jan. 16th 1893.

My Dear Sister Annie:- I received your letter and was glad to hear that you were all well. I am well, am glad to hear that father is coming to see me. Well, Annie, I was to a dance, had a good time. I go to church every Sunday. We men had a Christmas tree Christmas night. The Doctors, and the girls and the boys, they marched through the hall. It is too bad that William died ----- when He wrote me last, I weighed 184 pounds. Eddy and Harmon they was lucky to Cawght that wolf. I suppose Henry pick. Tell peaty habby wasing Joseph wife Dawn frain west an a kist tall father he came to see me I will go home with him.

Well, Annie, th s is all for this times, write soon, I sent my best regart to all.

Daney Busch,

Rochester, Minn.

To, Miss Annie Busch,

Lake City, Minnesota.

Dec. 14th '92.

Dear Sir:- Freend Myke, I will write a few lines to you to let you know I am well, I hope thisfew lines will find you the same.

Well, Myke, how is times at Lake City? Well, Myke, I wish you would send me some chewing tobacco. How is my folks get along? Is they all well? Well, Myke, this is all for this time, write soon.

Sent my best regards to all,

Daney Burch

Rochester, Minn.

Myke, you tell my father to sent me some money, or chewing tobacco.

conversation

althy.

Personal and Medical History of Dana Bush

Whole No. 3192.

Residence, Lake City, Minnesota

Date Admission, 29th November 1899

Admitted by, Dr. Kilbourne Hour, 2

How Sent, By order of District C

Sex, Male

Age, 28 Years

Civil Condition, Single

Children, None

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Reared a

Habits, Reputed

Nativity, Wabasha Co

Physicians Committing, J. B

Correspondents,

No. for Year, 104

Insane Relatives, Insanity hereditary; no evidence of it to my knowledge.

not stated

disposing, not given

Disorder, Insanity

Dec. 18th 1899

Dear Sister Annie:- I received your letter and was glad to hear that you were all well. I am well, am glad to hear that father is coming to see me. Sunday. We were to a dance, had a good time. I go to church every Sunday. We were to a Christmas tree. Christmas night. It is too bad that Willy Petty Pabby and Harmon Pabby wasing Joseph wife Dawn Train went as a kist tail father and the girls and the boys, when He wrote me last. I suppose Henry Pick came to see me I will go home with him. I weighed 134 Pounds. Well, Annie, th s is all for this time, write soon, I sent my best regard to all. Davey Busch, Rochester, Minn.

To, Miss Annie Busch, Lake City, Minnesota.

Copy of hearing petition of Carrie Busch Herman Busch ag for appointment of a Guardian for Anton Busch served upon Dr A.T. Kilbourne Supt. and Jessica admit- Sept 4' 1899.

EXAMINATION ON ADMISSION.

Exd by Dr Baker Dec 6/99

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Probably

MEMORY:

Past Events, Seem

Recent Events, appr

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Inclined to be rather dull

Correct or Illusive, Fairly Correct

REASONING POWER:

Ordinary Subjects

Own Mental Stat

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Probably

Excited,

Depressed,

DELUSIONS:

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Fairly Coherent

Voluble or Reticent, Answers questions after a hesitati

GENERAL DESCRIPTIVE REMARKS: Knows a "witch" got hold of him. "It burned dreadfully". Knows of a child that died too. Says, was seen in a hotel room by Jesus Christ. Claims he was called crazy. State he is not crazy, but he is witched. Claims Jesus Christ at first talked and he looked like any ordinary person. Katie (patient) had the purpose of saving people from drinking whiskey & witches away from Lake Leland on 26th for last. Says Spirit of another person got into him and that he cured not help doing the shooting. Denies coming to save Christ or preaching. Claims he never got drunk. Sits rather stolidly & quietly in chair, looking around while being examined. After each question, hesitates & says "keep." & after repetition of question, answers, usually correctly. Repeats, again & again, that he is witched and has been since a child. Answers "I don't know" to a good many questions.

ISSION—(Continued.)

ISTICS.

(as last written) NUTRITION, Good

Promptness Movement, rather sluggish

, somewhat dilated

odation, Yes

HEARING, Good

COORDINATION, Arms, Finger to nose, Eyes shut, Fairly good; some tremulousness.

Legs, Standing on foot, some unsteadiness. Standing, Eyes shut, Sways slightly

TREMORS, Hands, Some Tongue, very slight

Facial Muscles, None seemingly General,

REFLEXES, Patellar, Equal. Diminished (2 or 3) D. C. Scale.

Other Reflexes,

ARTICULATION, Hesitating, Probably due Inignorance Slurred, quite, when talking in ordinary conversation

FACIAL EXPRESSION, Rather Stolid

SENSIBILITY,

HEART, Sounds free from murmurs

LUNGS, Seem good. Girth 39½ in Expansion —

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, yes	Constipated,	Irregular,
APPETITE, Good, yes	Medium,	Poor,
SLEEP, Good, fairly	Poor,	Irregular,
PULSE, 72 (on ad) See Record	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; about 53: Health good; has had rheumatism

Father or Pat. Relations, Father living; about 60; Claims good health.

Brothers or Sisters, 4 Brothers living; he says healthy; 5 Sisters living; says all healthy.

Whole No. 3192.
Residence, Lake City, Minnesota
Date Admission, 29th November 1892
Admitted by, Dr. Kilbourne Hour, 2
How Sent, By order of District Court
Sex, Male
Age, 28 years
Civil Condition, Single
Children, None
Age Youngest Child,
Occupation, Farmer
Degree Education,
Profession Religion, Reared a Catholic
Habits, Reputed T
Nativity, Wabasha County, Minnesota
Physicians Committing, J. B.
Correspondents,

Exd by Dr Baker Dec 5/92

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Probably somewhat sluggish

MEMORY:
Past Events, Seems
Recent Events, appears
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Inclined to be rather dull
Correct or Illusive, Fairly Correct as far as Observation goes

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Probably
Excited,
Depressed,

DELUSIONS:

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Fairly Coherent
Volubile or Reticent, Answers questions

GENERAL DESCRIPTIVE REMARKS: Stout. Has a light reddish moustache. Eyes a little "watery" looking. Has a scar on left side of forehead. Says "it burned dreadfully". Knows of a child that had one, too. Says, was sent to Claims he has seen God at Rest Island and He looked like any ordinary person. Thinks (patient) has the power of saving people from drinking away from Rest Island in 26th for last. Says Spirit of another person got into him and that he could not help doing the shooting. Seems to be under the influence of Spirit while talking. Says was Christ preaching. Claims he never got drunk. Sits rather stolidly & quietly in chair, looking around while being examined. After each question hesitates & says "Heigh." & after repetition of question, answers, usually relevantly. Repeats, again & again, that he is stitched and has been, since a child. Answers "I don't know" to a good many questions.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10¼ in WEIGHT, 167 pds. (weighed 200 lbs last winter) NUTRITION, Good
WOUNDS OR ABNORMALITIES, (?) (?)
TONGUE, Tremors, very slight Coatings, slight Promptness Movement, rather sluggish
PUPILS, Equality, Equal Size, somewhat dilated
Response Light, some Accommodation, Yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Finger to nose, Eyes shut, Fairly good; some tremulousness.
Legs, Standing on foot, some unsteadiness. Standing, Eyes shut, sways slightly
TREMORS, Hands, some Tongue, very slight
Facial Muscles, none seemingly General,
REFLEXES, Patellar, Equal. Diminished (2 or 3) D. P's Scale.
Other Reflexes,
ARTICULATION, Hesitating, probably due to Inquiry Slurred, quite, when talking in ordinary conversation
FACIAL EXPRESSION, rather Stolid
SENSIBILITY,
HEART, Sounds free from murmurs
LUNGS, Seem good. Girth 39½ in Expansion —
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, yes Constipated, Irregular,
APPETITE, Good, yes Medium, Poor,
SLEEP, Good, fairly Poor, Irregular,
PULSE, 72 (on ad) See Record RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living; about 53: health good; has had rheumatism
Father or Pat. Relations, Father living; about 60; claims good health.
Brothers or Sisters, 4 Brothers living; he says healthy; 5 Sisters living; says all healthy.

Personal and Medical History of Dana Bush

1892

This man was sent here by order of Hon. Charles M. Start, Judge of District Court, 3d Judicial District, County of Wabasha; order dated 21st Nov. 1892. The following is patient's history. His habits are reputed good. No evidence of insanity being hereditary; no insane relatives as known. (Though previous history states differently; see below*). Cause of this attack is not stated; form is chronic. No accompanying bodily disorder. Dont know when first symptoms were manifested; since maturity first symptoms manifested were of delusion. This is not 1st attack. One occurred about 6 years ago, and at that time he was confined in this (Rochester) Asylum. He now thinks his actions are under control of a watch, and are for the purpose of saving souls. Is disposed to injure others. Shot and killed City Marshall of Lakecity, Minn, on July 26th 1892. Is not suicidal. Not filthy or destructive. No peculiarities previously shown, that can be ascertained; though he has always had a peculiarly nervous disposition, and, at times, extremely irritable. Has been confined as above, in this Hospital, and, since July 26/92 in Wabasha County Jail.

*(Note. Was here before under name "Daney (anthony) Bush"; from March 8/87 to Apl 25/87. Predisposing cause then deemed heredity, grandmother then sister being insane. See also Newspaper Clipping attached. Vol 8. fol 39. Nov 29/92)

Nov 29/30 Nov 29/92. On admission was put upon B3. Nov 30/92. Slept 7 hours last night 830 am. Pulse 84.

Dec 1/2 Dec 1/92. Temp 100.2. Dec 1/92. Acted offbed two last night, sleeping 7 hours. 930 Am. Pulse 84. Temp 99.8. Dec 2/92 Was

" 3 quiet and slept 7 hours last night. 930 Am Pulse 74. Temp 99.9. Dec 3/92 Was quiet and slept 7 hours

" 4 last night. 930 Am. Pulse 84. Temp 100.6. Dec 4/92. Slept 8 hours last night. 930 am. Pulse 74. Temp 100.

" 5/28 Dec 5/92. Wt 172½ pds. Pulse 68. Dec 28/92. Has been uniformly quiet at night, resting well and sleeping from 7 to 8 hours each night. Pulse has been 85. 71. 74. 86. 96. 108. 110. (2) (2) 85. 100. 100. (2). 104

1893 110. 104. 104. 90. (2). (2). 90. 96. [illegible] 87. on ~~each~~ of the past 22 and present morning respectively.

Jan 3/ Jan 3/93. Wt 183½ pounds. Pulse 84. Has gained 15½ pds since admission. Jan 6/93. Has continued to be quiet at night, apparently resting and sleeping well. Has been up daily; dresses himself & takes care of his own person and toilet. Is clean. Dresses quite neatly & tidily. Has been quiet and well-behaved by day. Talks quite freely with other patients & the attendants; with the physicians is not so free in conversation. Answers greetings & questions but does not usually carry his talk further. Plays games well; Works well, making beds & caring for rooms; is considered a good patient by the attendants in the sense that he is well-behaved & easily managed. Talks with the attendants about having been witched in regard to the shooting affair which occurred at Lake City. Has some scars from shots, when, he says, the witch entered him. Asks the attendant if he thinks the Dr will let him go home soon. Conduct is uniform, there being no 'spells' or variations. Still occasionally mentions being witched, but seems more averse to talking about it. Reads newspapers & has written a couple of letters. Remembers some of the

" 16 patients whom he knew when he was here before & who are still here. Jan 16/93. See attached

" 25 copy of his letter, written to his sister. Jan 25/93. Lives along quietly & peaceably. Habits good. Has a dull, sleepy look.

Feb 3/25 Feb 3/93. Wt 190 pds. Pulse 76. Has gained 11½ pds in past 4 weeks. Feb 25/93. Uniformly quiet, resting & sleeping well, at night. Is up & around daily; very clean, neat & tidy in appearance. Is well behaved & a very good & diligent worker on the ward. Still holds to his old delusions, though he only mentions, or talks about them seldom now. Has good Physical health. Writes occasional letters.

March 15th 1893.

Dear brother, and all; I will write a few lines to let you know that I am well, I hope thes few lines will find you all the same Well, Joseph, I got sick in July I had a bad luck whitthe policeman I weigh 198 pounds We got a pleanty of snow this winter out west, How is Barney getting alongHow is Lacke Lane getting along, does he play ball yet How is old man Aker is Aker girls married yet where is Eddie Catnill now, is he out west? yet? is the Ewels boys out west yet? Well, Joseph, I heard that your wife was down here on a visit well, Joseph, did you hear anything about my trial. They sent me to the Hospital at Rochester I felt good and healthy I think I would like in the spring, I got good times here, but I rather be out working and earing money I was creeping in July, I think I working too hard.

Well, Joseph, this is all for this time, I send my best regards to all, write soon.

Dany Busch,
Rochester,
Minnesota.

CK!!!

Daney Busch,
Apr. 21st '93.
Rochester, Minn. Lock Box C.

My Dear Brother and all:- I received your letter and was glad to hear from you. I am well, I hope these few lines will find you the same. So you had bad luck with your family this winter; my weight is now about 206 lbs. They got a dance here every week and we go out walking every day and play ball. Saxx So the Acher girls are married; he did not get Clar Acher; well, Joseph, father was here to see me, he said that I was going to have another thral. I heard Emily for shot that man, I think I was insane at the time; I could not help it. They shot me pretty bad, I was sick for a week in jail, 20th of April it snowed about 14" of snow; it is storming to day. Is Lanch Lane home yet? Well, Joseph do they sell wisk yet in Elkton? Henry Jick wife got a baby boy. When Henry Jick got married we boys cheered him; he gave us three kegs of beer, and box of cigars. This summer when I was working in the band house, I caught one of the girls blazing with the fingers she ran like a wild girl. How is Baring getting along this winter? Well, Joseph this is all for this time, write soon. I send my best regards to all.

(B____)

Dec. 14th '92.

Dear Sir:- Frèend Myke, I will write a few lines to you to let you know I am well, I hope thisfew lines will find you the same.

Well, Myke, how is times at Lake City? Well, Myke, I wish you would send me some chewing tobacco. How is my folks get along? Is they all well? Well, Myke, this is all for this time, write soon.

Sent my best regards to all,
Daney Burch
Rochester, Minn.

Myke, you tell my father to sent me some money, or chewing tobacco.

(Carried back of Page 1.)

Personal and Medical History of Dana Busch

1892

This man was sent here by order of Hon. Charles M. Start, Judge of District Court, 3d Judicial District, County of Wabasha; order dated 21st Nov. 1892. The following is patient's history. His habits are reputed good. No evidence of insanity being hereditary; no insane relatives as known. (Though previous history states differently; see below*). Cause of this attack is not stated; form is chronic. No accompanying bodily disorder. Dont know when first symptoms were manifested; since maturity first symptoms manifested were of delusion. This is not 1st attack. One occurred about 6 years ago, and at that time he was confined in this (Rochester) Asylum. He now thinks his actions are under control of a watch, and are for the purpose of saving souls. Is disposed to injure others. Shot and killed City Marshall of Lake City, Minn, on July 26th 1892. Is not suicidal. Not filthy or destructive. No peculiarities previously known, that can be ascertained; though he has always had a peculiarly nervous disposition, and, at times, extremely irritable. Has been confined, as above, in this Hospital, and, since July 28/92 in Wabasha County jail.

*(Note. Was here before under name "Daney (Anthony) Busch", from March 8/87 to April 25/87. Predisposing cause then deemed hereditary, grandmother then sister being insane. See also Newspaper Clipping attached. Vol 8. fol 39. Nov 1892)

Nov 29/30 Nov 29/92. On admission was put upon B3. Nov 30/92. Slept 7 hours last night. 830 am. Pulse 84. Dec 1/ Dec 1/92. Temp. 100.2. Dec 1/92. Out of bed once last night, sleeping 7 hours. 930 Am. Pulse 82. Temp. 99.8. Dec 2/92. Was " 3 quiet and slept 7 hours last night. 930 Am. Pulse 74. Temp. 99.9. Dec 3/92. Was quiet and slept 7 hours " 4 last night. 930 Am. Pulse 82. Temp. 100.6. Dec 4/92. Slept 8 hours last night. 930 am. Pulse 74. Temp. 100. " 5/28 Dec 5/92. Wt 172½ pds. Pulse 68. Dec [illegible]. Has been uniformly quiet at night, resting well and sleeping from 7 to 8 hours each night. Pulse has been 84, 96, 108, 110, (?), (?), 85, 100, 100, (?), 104, 110, 104, 104, 90, (?), (?), 90, 96, [illegible] 84. On each of the past 22 days present morning respectively has gained 1½ pds since admission. Jan 6/93

1893 Jan 3/6 Jan 3/93. Wt 183½ pounds. Pulse 84. Has been quiet at night, appears to be quiet at night, appears to have continued to be quiet at night, appears to have continued to be quiet at night, appears to have continued

1892

This man was sent here by orde
District, County of Wabasha; ord
His habits are reputed good."
(Though previous history states diff
no accompanying bodily disor
first symptoms manifested were
ago, and at that time he was em
control of a watch; and are for th
and killed City Marsh
destructive. No recent
had a peculiarly re
fried as above, in this
(Note. Was here before unde
then deemed heredity, gra

Nov 29/30 Nov 29/92. On admissi
Dec 1/ Dec 1/92. Wt 100·2. Dec 6/92. O
- 3 quiet and slept 7 hou
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" 5/28 Dec 5/92. Wt 172½ po
sleeping from 7 to

1893 110. 104. 104. 90. (2). (2). c

Jan 3/ Jan 3/93. Wt 183½ po
- mued to be quiet at
himself & takes car
Has been quiet and
with the physicians is not so
usually carry his talk further
is considered a good patient
talk with the attendants abo
at Lake City. Has some so
-dant ideas he thinks the D w
or variations. Still occasi
about it. Reads news papers &
" 16 patients whom he knew wh
" 25 copy of his letter, written this
Has a dull, sleepy look. —

Feb 3/93 Feb 3/93. Wt 191 pds. Pulse 76. Has gained 1½ pds in past two weeks. Feb 25/93. Has
getting & sleeping well, at night. Is up & around daily; very clean, neat & tidy in appearance &
well behaved & a very good & diligent worker on the ward. Still hears & his old delusions, though he only
mentions, or talks about them seldom now. Has good Physical health. Writes occasional letters.

March 2/93. Wt 198 pds. Pulse 84. March 15/93. See attached copy of letter of this date.
March 30/93. Uniformly quiet at night, apparently resting & sleeping well. Quiet & well-behaved
today. Attends dances, participating - Lives along, apparently contented & happily. Does
not act as if he had any remembrance of having committed the crime. Asks, occasionally, when
can go home. Does not seem to realize that he will be held to account for his crime.
April 11/93. Wt 206 pds. Pulse 96. April 10/93. Has today visited by his father.
April 15/93 Was visited by a friend, today. April 21/93. See attached copy of a letter, written this date.
May 3/93. Wt 210 pds. Pulse 74. Has, monthly, been making a decided gain in weight. —
May 22/93 Conduct, behavior & rest at night continue as above described. Is well-behaved by
day; quiet; very neat & tidy. Attends dances regularly, taking part in them; goes also to Services
in Chapel. Occasionally speaks of that crime and "wonders if he will be sent down the road for it." —
Reads & works some. Seems quite happy & contented. Writes occasional letters. Is very good physical health.
May 30/93. Appetite good. Bowels regular. Complains, sometimes, of having "a shot in his head";
and occasionally it will form some matter & it will break" - Is well-behaved; quiet; a good
and very willing worker. Clean, very tidy, and of good personal habits.
June 3/93. Wt 211 pounds. Pulse 68. June 19/93. Visited, today, by a sister. June 20/93. Again
visited by sister, today. June 30/93. No special change to note. Quite active & works well.
July 1/93. Wt 208½ pds. Pulse 72. Says he must have been a little insane, when he committed
the murder." Says the "Sheriff had been bothering him. July 31/93. No change from last month.
Is quite active physically. Continues quiet & well-behaved. Helps willingly with the work.
Aug 1/93. Wt 211 pds. Pulse 78. Aug 31/93. Appetite good; bowels regular. Behaves all right,
so far as ordinary conduct is concerned. Is always willing to do anything asked of him. Works
well ward. Habits are clean. He takes part in all kind of games played both ward and
outside. Goes to entertainments. Aug 31/93. Continues about the same. Physical health good.
Sep 2/93. Eloped, last evening, through a window; made a key & unlocked the screen & with
another fellow-patient (John Chance), made their escape. Diligent search was made but
without avail. Sep 5/93. Has brought back this morning. Father reports him as not right
yet; that he, at times, talks in a foolish way. Came with father & mother, who had no trouble.
Wt. today, 210 pds. Pulse 98. Sep 27/93. Appetite good; bowels regular; no change from last
month. Spoken to about his prospects, here seems in a feeble way concerning the hopelessness
of it and the way he did the deed. Sep 30/93. Talks quite rationally. Takes part in all
kind of games; attends dances, participating in them. Also attends Chapel services, regularly.
Works well ward. Still repeats his desire that his trial would come off soon, as he is sure
he can clear himself. Habits are clean & neat.
Oct 7/93. Wt 211 pounds. Pulse 78. Oct 6/93. Appears to be implicated in helping another
patient (Geo. E. Peters) to pick a lock & make his escape. Oct 31/93. No material change —
Wt 213. Pulse 72. Nov 30/93. Appetite good. Bowels reg. Behavior good. Talk: can't see anything
wrong in his conversation. Works a good deal. Habits clean. Dec 31/93 Wt 210½. Pulse 70. Dec 31/93 No change
Jan 2/94. Wt 205½. Pulse Jan 21/94. Complains of headache & "coughs some. Remained in bed all day
2/ Better & up on ward. Jan 31/94 Appetite good. Bowels reg. Health good. No delusions. Behavior good. Works well on ward. (See Page "A")
31 Talk rational. Habits clean and neat.

(Carried back of Page 1)

Personal and Medical History of Charles Vance

Whole No. 3195

Residence, Minneapolis

Date Admission, 1st December 1892

Admitted by, Dr. Phelps Hour, 7 PM

How Sent, J. R. Corrigan, Jof P. Hennepin County

Sex, Male

Age, 40 years

Civil Condition, no (?)

Children,

Age Youngest Child,

Occupation, Laborer, but has past next to past 2 yrs in workhouse

Degree Education,

Profession Religion, Not a Church member

Habits, Not stated

Nativity, North Carolina

Physicians Committing, S. S. Kilvington & E. J. Gibson

Correspondents, Mrs. Alex. Carpenter
Yancey Co. North Carolina

No. for Year, 107

Insane Relatives, Mother was sent to Asylum at Indianapolis - Ind. ; Insanity hereditary

Cause Exciting, Heredity

Cause Predisposing, " "

Form, Mania — Chronic

Accompanying Bodily Disorder, No

Suicidal or Not, Not

Date of this Attack, 2 years ago

Duration, 2 years or so

No. of Attack, Not 1st

No. of Admissions,

Age First Attack, about 38 (?)

Time of Leaving, July 31. 1893

Time in Hospital,

Result, Transf. to Fergus Falls.
pt. pm

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr. Baker Dec 10/92

MENTAL ACTIVITY:

Clear or Confused, Clear at present

Quick or Sluggish, fairly active

MEMORY:

Past Events,

Recent Events, Seems good; says it is.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, fairly Correct

REASONING POWER:

Ordinary Subjects,

Own Mental State, fairly good

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Seems so

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, None detected

Transitory or Not,

HALLUCINATIONS: None detected

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent.

Voluble or Reticent, fairly free in answer to question.

GENERAL DESCRIPTIVE REMARKS:

Tumor in right side of scrotum raises suspicion of a scrotal hernia, but does not disappear on lying down. Does not give impulse on coughing, and is dull or flat on percussion. He was put in workhouse 1st time, for hitting a man, has been in there several times for being a "bag" - says he knows when "spells" are coming on & goes & asks to be locked up. Wants to & feels like hitting someone, gets desperate - seems to have imperative impulse to strike at times; can't explain why he scratches his arm face - says he gets desperate - Denies having drunk to excess —

Personal and Medical History of Charles Vance

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in WEIGHT, 133 pds. (usually 130 pds.) NUTRITION, below normal

WOUNDS OR ABNORMALITIES, Some scratches on face. Has a pterygium on left eye. Has a tumor in right scrotum - probably of testicle —

TONGUE, Tremors, Marked Coatings, Thick; large, red, moist Promptness Movement, fair

PUPILS, Equality, Equal Size, Though left pupil a little larger in certain lights

Response Light, Imperfect; has spasmodic twitching Accommodation, Seems imperfect.
Reflexes motion looking —

SIGHT, Fair —

HEARING, Considerably impaired

COORDINATION, Arms, Fingers nose, eyes shut, fairly well, but some inaccuracy.

Legs, Standing on foot, Quite unsteady. Standing Eyes Shut, fairly steady. Turning quickly, locomotating; has an awkward shuffling gait —

TREMORS, Hands, Marked — Tongue, Marked —

Facial Muscles, at times General, Some tendency to — Nerves specially of neck and head; jerking of head —

REFLEXES, Patellar, Equal; exaggerated; 7 or 8. 5th Pt Scale —

Other Reflexes,

ARTICULATION, Hesitating, Somewhat Slurred, yes

FACIAL EXPRESSION, dull; tendency to blankness.

SENSIBILITY, Seems normal

HEART, Seems normal

LUNGS, Seem good; Girth 36½ in Expansion — in

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, About Constipated, Irregular,

APPETITE, Good, Yes Medium, Poor,

SLEEP, Good, a little restless first part Poor, of night, but says Irregular, he sleeps well.

PULSE, Seems to be RESP., " " TEMP., " "

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 2 years or more ONSET GRADUAL OR SUDDEN, Gradual

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, don't think mother living; was not healthy; was in hospital

Father or Pat. Relations, father dead — old age —

Brothers or Sisters, has several brothers & sisters - don't know where they are; says all were healthy

1892

This man was brought here by Deputy-Sheriff Ole Johnson, with following history. Occupation is a laborer, but has passed most of past 2 years in the workhouse. Habits not known. Insanity is hereditary; mother was sent to an Asylum at Indianapolis, Ind. Cause of this attack, heredity. Form is Chronic, Paranoysmal. No accompanying bodily disorder. First symptoms manifested 2 years ago. This is not 1st attack; there have been at frequent interval during past 2 years. He is now seized with a violent desire to injure somebody; has shown a disposition to injure others from sudden passion. Is not suicidal. Destroys his clothing. Not subject to any bodily disease, epilepsy &c. Has been confined in workhouse as above stated. Has not been under medical treatment. He realizes when the acute attack is coming on and will go to the City-lockup and ask to be locked up until the attack ceases.

Dec 2 Dec 2/92. Was quite, rested well, sleeping 8 hours, last night. Am. Pulse 76. Te) 98.8. Is pale & put on tonics. About bedtime, had a "spell"; in which he scratched his own face severely, was ugly & threatened to kill those about him.
" 3 Dec 3/92. Quite noisy for an hour & restless, sleeping 7 hours, last night. 930 Am. Pulse 76. Te) 100.2
" 4 Dec 4/92. Was quiet, rested well & slept 8 hours, last night. 9 Am. Pulse 64. Te) 99. Dec 5/92 Wt 136 lbs.
" 5 Dec 5/92. Slept 8 hours last night. 9 Am. Pulse 68. Te) 98.2 Dec 6/92. Was quite noisy and restless for a couple of hours last night, ugly, picking a quarrel with his room-mate and fighting with him. Slept 6 hours. 830 Am. Pulse 76. Te) 100.8. Dec 7/92. Slept 8 hours last
" 8 night. 9 Am. Pulse 66. Te) 99.8. Dec 8/92. Slept 8 hours last night. Am. Refused to participate in the ward work this morning; got angry; interfering with the workers, and it was necessary to take hold of him. Pulse 70. Te) 98.2. Dec 9/92. Slept 8 hours last night. —
" 10 830 Am. Pulse 64. Te) 98.6. Dec 10/92. Slept 8 hours last night. Am. Pulse 72. Te) 99.6. —
" 12 Dec 12/92. Has slept 8 hours in each of past 2 nights. Pulse (Am). 76 and 72. Yesterday and this morning respectively. —

1893
Jan 3 Jan 3/93. Wt 136½ lbs. Pulse 73. Jan 5/93. Has been uniformly quiet, resting & sleeping well at night. Has been quiet, clean, tidy & well-behaved, (with the exceptions noted above) for the past 2 or 3 weeks. Sits about, saying very little, unless approached or addressed, when he replies usually in a few words. Usually, apparently good-natured; does not complain of feeling ill. Is rather pale & anaemic in appearance. Does sound work. Jan 15/93. Tore up clothing yesterday. Says he would have hung himself if he had a spot". Has "spells" by night when he scratches
" 23 his face &c. Jan 23/93. Last night was restless & out of bed for about 3 hours, and quite noisy for an hour; had another bad "spell" in which he scratched his face till the blood ran. Was very
Febr ugly. Night-nurse had to get help to hold patient. Feb 4/93. Since last note, no further "spell" has been reported. Is now quiet, apparently resting & sleeping well at night. By day, has been
" 11 quiet, clean, tidy & well behaved. In other respects is about as described in note of 5th ult. Does a little work on the yard. Is gaining some in weight. Feb 11/93. To-day had a spell of scratching his face.
Mar 15 March 15/93. Has been comparatively quiet lately, both at night & by day. Works considerable.
Apl 1 Health fairly good. Apl 1/93. Had another spell of scratching his face last night, doing so excessively & requiring to be restrained until restrained. Apl 8/93. Is quiet at night, & with the exceptions noted above, has seemed to rest well.
" 22 Notes. Talks some when engaged in conversation. Is fairly well-behaved by day. April 22/93. Had a bad spell last night, scratching his face. Desisted only when restrained.

NAME. Charles Vance

DATE. 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	136½	73	½	
Feby 3d	140	78	3½	
Mar 2d	140½	78	½	
April 4th	139½	64		1
May 3d	136	83		3½
June 3d	135	76		1
July 1st	133	72		2

d since the 1st of April 22d — Keeps about as usual.
scratched his face until it began to bleed.
. Quiet & well-behaved by day. Still shows delusions.
mentioned; at times, is very nervous. Talks quite
plays Cards. Habits clean. Makes some in the yard. —
hing his face, today. June 22/93. Again scratched his face

t. Is very nervous when these "spells" are upon him,
can be by himself. Appetite continues good save
& good worker in the yard. July 30/93. Had one of these
0th & 27th last.
well-behaved, being only very nervous when these
s tidy & of good personal habits. Has willingly
Appetite has been uniformly good, for some time,
& plays games &c, seeming interested in them.

	22nd	Patients	Pulse 88.	Resp. 18. Temp. 99°.
	23rd	Pulse taken at	6.30 Am. 80.	Resp. 15 Temp. 97 4/10 lbs
		Do	at 6.30 Pm.	Pul. 72. Resp. 15. Temp. 97 5/10 lbs
	24th	Do	at 7 Pm.	Pul. 88. Resp. 17. Temp. 97 6/10 lbs.
	25	Do	at 6 Am.	Pul 80 Resp. 16 Temp. 99°
		Do	at 6.30 Pm.	Pul. 88. Resp. 20 Temp. 99 3/5
	26th	Do	at 6.30 Am.	Pul. 70. Resp. 16 Temp. 97 4/10 lbs

; & have lost all mental power & is oblivious to his surroundings; uninterested. Was dirty 6 days, during the month. — Appetite is good; tho' he is losing some in flesh. —

Mar 31 March 1/94. Wt 132 lbs. Pulse 78. Mar 31/94. No very material Change — Was dirty 5 Days, during the month.
Apl 30 April 1/94. Wt 134 " " 92. April 30/94. Patient has undergone no radical Change since report of
July 28th, but there appears a gradual weakening of his whole system. Is daily becoming more helpless & very filthy.
May 1 (was dirty 15 Days during this month). ——— May 1/94. Wt 135 lbs. Pulse 75. May 2/94. Has some chlo-
-ride of lime, which was in urinal in Water Closet. Patient's stomach had to be pumped out & cleaned.
" 20 May 20/94. Fell off the seat onto the floor & skinned his forehead. May 21/94. Was ordered to be put to bed to-day, on
" 29 account of General debility & to prevent injuring self. May 29/94. Patient remained in bed, until Yesterday. Had
been in bed 7 Days. Was got up by nurse by 5th H. dressed & put in hall. (See attached recd). May 30/94. Appetite
" 31 good; bowels irregular. Improved a little, physically, while in bed; but is weak & frail & tottering. Does not
talk any; makes no complaints. Mentally, is failing very much. (Was 10 Days dirty, during the month).
June 1 June 1/94. Wt 136 lbs. Pulse 104. June 30/94. No special Change; was dirty 30 Days during this month.
July 31 July 1/94. Wt 133 " " 92. July 31/94. Patient's condition remains about same. Habits very filthy. —

(Carried to Transfer Book A" page 136)

…by Deputy-Sheri…
…at of last 2 yr…
…Asylu…

for
years
now very
sudden pain
Has been confined
when the acute att.
the attack ceases.

Dec 2 Dec 2/92. Was quiet, re… pale & put on tonics.
About bedtime, had a "Spell"; m… ened to kill those about him
" 3 Dec 3/92. Quite noisy for an… Am. Pulse 76. T 100.2
" 4 Dec 4/92. Was quiet, rested well … 6A. T 99. Dec 5/92 W 135 lbs.
" 5 Dec 5/92. Slept 8 hours last night … /92. Was quite noisy and
restless for a couple of hours last nigh… el with his room-mate and
" 7 fighting with him. Slept 6 hours. 8.30 A… 8. Dec 7/92. Slept 8 hours last-
" 8 night. 9. Am Pulse 66. T 99.8. Dec 8/92 … last night. Am. Refused to partici-
-pate in the ward work this morning; got angry … ferencing with the nurses, and it was
" 9 necessary to take hold of him. Pulse 70. T 98.2. Dec 9/92. Slept 8 hours last night.—
" 10 8.30 Am. Pulse 64. T 98.6. Dec 10/92. Slept 8 hours last night. Am. Pulse 72. T 99.6.—
" 12 Dec 12/92. Has slept 8 hours in each of past 2 nights. Pulse (Am). 76 and 72. Yesterday and
1893 this morning respectively.—

Jan 3 Jan 3/93. Wt 135½ lbs. Pulse 73. Jan 5/93. Has been uniformly quiet, resting & sleeping well
at night. Has been quiet, clean, tidy & well-behaved, (with the exceptions noted above), for the past
2 or 3 weeks. Sits about, saying very little, unless approached or addressed, when he replies
usually in a few words. Usually, apparently good natured; does not complain of feeling ill.
" 15 Is rather pale & anaemic in appearance. Does some work. Jan 15/93. Tore up clothing yester-
-day. Says he would have hung himself if he had a spot". Has "Spells" by night when he scratches
" 23 his face &c. Jan 23/93. Last night was restless & out of bed for about 3 hours, and quite noisy for
an hour; had another bad "Spell" in which he scratched his face "till the blood ran"- Was very
Febr ugly. Night-nurse had to get help to hold patient. Feb 1/93. Since last note, no further "Spell"
has been reported. Is now quiet, apparently resting & sleeping well at night. By day, has been
" 21 quiet, clean tidy & well behaved. In other respects is about as described in note of 5th inst. Does a little
work on the yard. Is gaining some in weight. Feb 21/93. To-day had a Spell of scratching his face.
Mar 16 March 16/93. Has been comparatively quiet lately, both at night & by day. Works considerable. Health
Apl 1 fairly good. Apl 1/93. Had another Spell of scratching his face last night, doing so excessively & refusing to desist
" 8 until restrained. Apl 8/93. Is quiet at night, & with the exceptions noted above, has seemed to get on pretty well.
" 22 Works. Talks some when engaged in conversation. Is fairly well-behaved by day. April 22/93. Had a bad Spell last night,
& scratching his face. Desisted only when restrained.

May 4/93. Has changed a very little.
May 18/93. No "Spell" has been reported since the use of April 22d. Keeps about as usual.
" 19 May 19/93. Had use of his "Spells" last night; scratched his face until it began to bleed.
" 31 May 31/93. Appetite Good. Bowels normal. Quiet & well-behaved by day. Still shows delusions.
Has occasional "scratching Spells", as above mentioned; at times, is very nervous. Talks quite
sensibly; reads quite a good deal, and plays Cards. Habits clean. Works some in the yard.—
June 19 June 19/93. Had another spell of scratching his face, today. June 22/93 Again scratched his face
last night, making it bleed.
July 18 July 18/93. Another such "Spell" last night. Is very nervous when these "Spells" are upon him,
and, generally, seeks a place, where he can be by himself. Appetite continues good and
" 30 bowels normal. Good personal habits. A good worker in the yard. July 30/93. Had one of these
"Spells" on each of the days of the 20th & 27th inst.
" 31 July 31/93. Patient has been quiet & well-behaved, being only very nervous when these
"Spells" are upon him. Has been clean, tidy & of good personal habits. Has willingly
done any work required of him. Appetite has been uniformly good, & for some time,
and bowels normal. Has read some & plays games &c, seeming interested in them.
Was to-day, with several others, transfered to Fergus Falls Hospital.—

From page 232. Joseph Winkelmann.

Dec 30/93. Is getting more helpless day by day. Unable to dress or undress himself, does not understand
Jany 1/94 what is said to him. Habits dirty. 12 days during month. Jany 31/94 Wt 134 lbs. Pulse 80. Jany 31/94
" 31 No change. Dirty on 20 days during month. Is gradually & very perceptibly failing.
Feb 1/94 Feb 1/94. Wt 132 lbs. Pulse 80. Feb 26/94 Patient was vaccinated today. Feb 28/94. Patient is gradually
becoming weaker in his limbs; he now stumbles around the ward; trips up & falls quite frequently & is unable
to get up without assistance. He is quiet & harmless; makes no complaints; talks scarcely any; answers questions
with difficulty & after much hesitation. Seems to have lost all mental power & is oblivious to his surroundings;
uninterested. Was dirty 6 days, during the month. Appetite is good; tho' he is losing some in flesh.—
March 1 March 1/94. Wt 132 lbs. Pulse 78. May 31/94. No very material change. Was dirty 8 days, during the month.
April 30 April 1/94. Wt 134 " " 92. April 30/94. Patient has undergone no radical change) hence repeat of
Febry 28th, but there appears a gradual weakening of his whole system. Is daily becoming more helpless & very filthy.
May 1 (was dirty 18 days during this month). May 1/94. Wt 135 lbs. Pulse 75. May 2/94. Has some chlo-
-rids of lime, which was in urinal in Water Closet. Patient's stomach had to be pumped out & cleaned.
" 20 May 20/94. Fell off the seat on to the floor & skinned his forehead. May 21/94. Was ordered to be put to bed to-day, on
" 24 account of general debility & to prevent injuring self. May 24/94. Patient remained in bed, until yesterday. Had
been in bed 7 days. Was got up by order of Dr H. Dressed & put on hall. (See attached record). May 31/94. Appetite
" 31 good; bowels irregular. Improved a little, physically, while in bed; but is weak & gait is tottering. Does not
talk any; makes no complaints. Mentally, is failing very much. (Was 10 days dirty, during the month).
June 1 June 1/94. Wt 136 lbs. Pulse 104. June 30/94. Is special Charge; was dirty 30 days during this month.
July 31 July 31/94. Wt 133 " " 92. July 31/94. Patient's condition remains about same. Habits very filthy.—

(Carried to Trans fer Book "I" page 136)

Personal and Medical History of Edward Robbins

Whole No. 3196

No. for Year, 108

Residence, St Paul

Date Admission, 1st December 1892.

Admitted by, Dr Phelps Hour, 7 Pm.

How Sent, John. B. Olivier, Jof P., Ra

Sex, male

Age, 47

Civil Condition, married

Children, none

Age Youngest Child,

Occupation, clerk

Degree Education,

Profession Religion, not a Church Mem

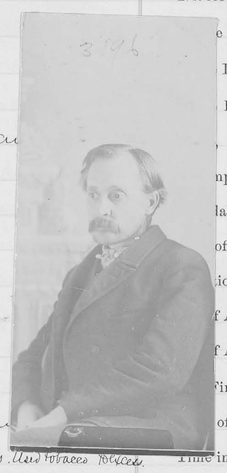
Habits, addicted to Alcohol for several years. Used tobacco freely.

Nativity, Kentucky

Physicians Committing, J. C. Markoe & Arthur Sweeny

Correspondents, Mrs Belle Robbins (wife) 497 W. Taylor St Chicago Ills.

Note. Has $40.00 deposited at City & County Hospital.



e Relatives, none; Insanity not hereditary

Exciting, Intemperance

Predisposing,

Melancholia — Acute

npanying Bodily Disorder, No.

lal or Not, not

of this Attack, not stated

ion, not known

f Attack, 1st

f Admissions,

First Attack, ?

of Leaving,

Time in Hospital,

Result,

3/19/93 (?) Irvin. E. Rockwell 51 & 53 LaSalle St Chicago.

Came check from St. Luke's Asst to Mrs Robbins. Jany 29/93

EXAMINATION ON ADMISSION.

Exd by Dr Baker Dec 10/92

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, of medium activity

MEMORY: Cannot test, as he wont talk

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY: Cannot test; wont talk

Alert or Dull,

Correct or Illusive,

REASONING POWER: Cant test; wont talk

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Will not try some of the tests for co-ordination, considering himself unable to do so; has to be urged and coaxed to get up, to speak at all, to take food; moves very slowly. Clenches his fists firmly shuts his mouth, at times, accompanied by a kind of shudder or an act of spasmodic nature, as if in intense suffering. Eyeballs stand out prominently a look of a vacant, distant look.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Extremely

DELUSIONS:

Systematized or Not,

Special Subjects, That he is very unworthy; ruined &c

Transitory or Not,

HALLUCINATIONS: wont talk; cant ascertain

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent, as far as it goes

Voluble or Reticent, Very reticent; answers questions sometimes not at all; at other times after a good deal of hesitation, in monosyllables.

Personal and Medical History of Edward Robbins

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7 in WEIGHT, 12/10 Wt. 133½ pds — 128 lbs fds. usually 140 lbs NUTRITION, much below normal.

WOUNDS OR ABNORMALITIES, Probably none

TONGUE, Tremors, Coarse Coatings, much; large, flabby Promptness Movement, slow & jerky

PUPILS, Equality, Equal Size, about normal

Response Light, Some Accommodation, Yes

SIGHT, probably good

HEARING, probably good

COORDINATION, Arms, Finger to nose, Eyes shut, refuses to try.

Legs, Standing on feet, refuses to try. Standing, Eyes shut, fairly steady. —

TREMORS, Hands, almost none Tongue, Coarse

Facial Muscles, none General,

REFLEXES, Patellar, Equal; much exaggerated; 9-10 D Pt Scale

Other Reflexes,

ARTICULATION, Hesitating, ~~Slurred~~, In conversation, seems fairly clear

FACIAL EXPRESSION, Sad

SENSIBILITY, ——

HEART, Seems good

LUNGS, Seem good; Chest 34 in; Expansion 1½ in

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,	
BOWELS, Normal,	Constipated, Yes	Irregular,	
APPETITE, Good,	Medium,	Poor, Yes	
SLEEP, Good, fairly	Poor,	Irregular,	
PULSE, See record	RESP., " "	TEMP., " "	

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ? ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Says mother dead; wont answer further questions

Father or Pat. Relations, Father dead; wont answered further

Brothers or Sisters, Cant get any information from him.

1892

This patient was brought by Deputy Sheriff Courtian, with the following history. Has been addicted to alcohol for several years; used tobacco to excess; supposed cause of this attack is intemperance; form is chronic, depressed. No accompanying bodily disorder. First symptoms were manifested by despondency in regard to financial affairs; time not stated. This is 1st attack. Insanity is now manifested in that he believes himself and all connected with him to be ruined. Has shown no disposition to injure others. Is not suicidal. Not filthy or destructive. No peculiarities as previously shown. Has not been restrained or confined. Has been treated at the County Hospital for insomnia & headache.

Dec 2 Dec 2/92. Has restless for 6 hours last night, sleeping but 2 hours. AM. Tongue is coated & teeth marked; says he is constipated. Ate no breakfast. Dec 3/92. Has restless for a couple of hours last night, sleeping 6 hours. AM. Eat almost nothing. Tongue coated & foul; refused laxative pills. Attacked, suddenly, a fellow patient, and fought the attendants hard when they interfered, scratching one of them. Has put in seclusion for a time. Claims "all this row due to him; all these people were sent here on his acc"; "thinks he deserves the worst punishment & will get it here"; "that he never will get out alive". Dec 4/92. Restless for 4 hours, sleeping 4, last night. Took no breakfast, but drank some milk given by the Dr. PM Drank some mod milk & eggnog to day. Bowels moved through the action of salts. Dec 5/92. Restless 3 hours, sleeping 5, last night. Eats very poorly, taking food, chiefly milk, only when much urged. Says "he has to undergo torture". Wt 137 pounds. Dec 14/92. Has appeared to rest fairly well & to sleep quite well since the last note. Has been up & around the ward daily. Has taken food, in the form of eggnog, in small quantities, and unwillingly, standing & holding the glass in his hand for minutes at a time without touching it, and taking it only in small quantities & with very evident displeasure. At times, cannot be persuaded to take anything. Dec 15/92. Slept well last night. Is constipated & was given rectal injection of oil. Dec 17/92. Has been somewhat restless the past 2 nights, sleeping 6 & 7 hours each. Has been taking food more & more reluctantly & scantily, until he was today fed by the stomach-tube. Has put to bed.

" 19 Dec 19/92. Slept fairly well the past 2 nights. Is being fed twice daily. Wt (in underclothing) 119 pounds. (Suit weighs 8 pounds.). Each feeding consists of about 3/4 of a quart of milk & 2 eggs.

" 24 Dec 24/92. Usually only slightly restless at night; was, last night, slightly noisy & restless for 4 hours. Has been kept in bed since the 17th inst. Lies there very quietly, and apparently willingly, the greater part of the time. Has spells of excitement, when he gets up and runs wildly about the hall. Feeding twice daily of 1 quart of milk & 2 eggs has been continued; one tablespoonful of Mosquera beef meal is added for each feeding. Dec 26/92. Wt (in underclothing)

" 26

" 28 118 pounds. Dec 28/92. Is still in bed, lying quietly there the greater part of the time. Yesterday and today, has taken Eggnog with considerable urging and some forcing. Feeding by stomach-tube discontinued.

1893 Jan 3/93 Jan 3/93. Wt (in underclothing) 117½ pounds. Jan 7/93. Since the 24th ult. was, for a time, quite restless at night, sleeping rather poorly; gradually became more restful and is now sleeping quite well. Is still kept in bed, although he desires to have his clothes and get up. Is taking food fairly regularly, eating fairly well of fluids and solids. While up & about the wards, stoops or walked about, looking, with a startled, frightened air; talking only when

NAME. Ed. Robbins
* (in underclothing)

	DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
*	Jany 3d	117½			½
*	" 10th	120	80	2½	
*	" 17	120		—	
	" 24	132		11	
	Feby 1	133½		1½	
	" 9	134		½	
	" 16	135½		1½	
	" 24	135½		—	
	Mar 1	136½	66	1	
	Apl 4th	136½	76	—	
	May 3d	135	86		1½
	June 5th	136	—	1	
	July 4th	—	—		
	Aug 30th	129½	—	6½	
	Sep 8th	128	—		1½
	Oct 3d	129	70	1	

F MR. E. Robbins
SIS.
January 11 93.
OTHER DATA.
Bowels moves
ite fairly good
wels moves
ite good
wels move regular
ite good
wels move regular
wels move regular.

Sep 30/93 Oct 3/93. Another slight loss in flesh. Otherwise no change. Sep 30/93. Depressed. Otherwise about same. Oct 3/93. Has made a very slight gain in weight. Oct 31/93 Continues depressed. Talks but little.

(carried to 320)

1892

This patient was brought by Deputy Sheriff Cou
Has been addicted to alcohol for several years; lastest
this attack is intemperance; form is chronic, def
First symptoms were manifested by despon
tune not staked. This is 1st attack. Insanity
-self and all connected with him to be rem
le not suicidal. Not filthy or destructive.
restrained or confined. Has been treate

Dec 2 Dec 2/92. Was restless for 6 hours last ni
" 3 says he is constipated. Ate no breakfast
sleeping 6 hours. AM. Eat almost no
suddenly, a fellow patient, and
of them. Was put in seclusion
sent here on this afc"; "think
" 4 will get out alive". Dec 4/92.
but drank some milk given by
" 5 through the action of salts. Dec 5/92
poorly, taking food, chiefly milk, only when
" 14 Wt 137 pounds. Dec 14/92. Has appeared dress
last note. Has been up & around the ward daily. Has
small quantities, and unwillingly, standing & holding
at a time without touching it, and taking it only in sm
" 15 displeasure. At times, cannot be persuaded to take anything. Dec 15/92. Slept well
" 17 last night. Is constipated & was given rectal injection of oil. Dec 17/92. Has been some-
what restless the past 2 nights, sleeping 6 & 7 hours each. Has been taking food more & more
reluctantly & scantily, until he was today fed by the stomach-tube. Was put to bed.
" 19 Dec 19/92. Slept fairly well the past 2 nights. Is being fed twice daily. Wt (in underclothing)
119 pounds. (Suit weighs 6 pounds.). Each feeding consists of about 3/4 of a quart of milk & 2 eggs.
" 24 Dec 24/92. Usually only slightly restless at night; was, last night, slightly noisy & restless for 4
hours. Has been kept in bed since the 17th inst. Lies then very quietly, and apparently willingly,
the greater part of the time. Has spells of excitement, when he gets up and runs wildly
about the hall. Feeding twice daily of 1 quart of milk & 2 eggs has been continued; one
" 26 table-spoonful of Mosquera beef-meal is added for each feeding. Dec 26/92. Wt (in underclothing)
" 28 118 pounds. Dec 28/92. Is still in bed, lying quietly there the greater part of the time. Yesterday
and today, has taken Eggnog with considerable urging and some forcing. Feeding by stomach-
1893 tube discontinued. Jan 3/93. Wt (in underclothing) 117½ pounds. Jan 7/93. Since the 7th inst. he
Jan 3/93 was, for a time, quite restless at night, sleeping rather poorly; gradually became more restful
Jan 7/93 and is now sleeping quite well. Is still kept in bed, although he desires to have his clothes and
get up. Is taking food fairly regularly, eating fairly well of fluids and solids. While up & about
the wards, stands or walked about, looking, with a startled, frightened air; talking only when

DETAILED HISTORY OF SICKNESS OF MR. E. Robbins
DIAGNOSIS.

January 11 1893.

DATE	WT.	PULSE: AM	PULSE: PM	RESP.: AM	RESP.: PM	TEMP.: AM	TEMP.: PM	OTHER DATA.
Jan 3	130	80						7 p.m. Bowels moved
" 4		60	60					
" 5	132	84						
" 13		68						
" 14	130	84						appetite fairly good
" 15		76						
" 16	130	80						Bowels moved
" 17		72						
" 18	130	74						appetite good
" 19		68						
" 20	128	78						Bowels move regular
" 21		70						
" 22	130	64						
" 23		74						
" 24	130	92						
" 25		88						appetite good
" 26	130	80						Bowels move regular
" 27		70						
" 28	130	84						appetite good
" 29		72						
" 30	130	86						Bowels move regular
" 31		70						
Feb 1	130	84						appetite good
" 2		72						
" 3	130	86						
" 4		80						
" 5	130	76						Bowels move regular
" 6		86						
" 7	130	80						

Up & about - Has been for the most part quiet - Rather dull & disinclined to talk - No Physical symptom - Mental state a depression with no pronounced delusions

Feb 8/93. Another slight loss in flesh. Otherwise no change. Feb 20/93. Depressed. Otherwise about same
Feb 28/93 Oct 3/93. Has made a very slight gain in weight. Oct 30/93 Continues depressed. Talks but little.

(carried to 220)

DETAILED HISTORY OF SICKNESS OF MR. Edward Robbins
DIAGNOSIS .

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
1892 Dec 2	9		104						
		7.30		88				99.2	
" 3	8		84				99.4		
" 4	8.30		104						
" 5	8.30		90						
" 7	8.30		100						
" 8	8.30		84						
" 9	8.30		90						
" 10	8.30		104						
" 11	8.30		96						
" 12	8.30		88						
" 13	8.30		92						
" 14	8.30		96						
" 15	8.30		100						
" 16	9.30		104						
" 17	8.30		76						
" 18	8.30		—						
" 19	8.30		80						
" 20	8.30		96						
" 21	8.30		92						
" 22	8.30		88						
" 23	8.30		86						
" 24	8.30		92						
" 25	8.30		92						
" 26	8.30		78						
" 27	8.30		At						
" 28	8.30		86						
" 29	8.30		84						
" 30	9		92						
" 31	8.30		91						
1893 Jan 1	8.30		82						
" 2	8.30		68						
" 3	8.30		92						
" 4	8.30		80						
" 5	8.30		96						
" 6	8.30		82						
" 7	8.30		84						
" 8	8.30		82						
" 9	8.30		78						
" 10	8.30		80						
" 11	8.30		76						
" "		8		76					

" 17 [illegible]
what
reluctantly
" 19 Dec 19/92.
119 pounds. (Last
" 24 Dec 24/92. Usually
hours. Has been kept in bed
the 17th inst. Lies there very quietly, and apparently willingly,
the greater part of the time. Has spells of excitement, when he gets up and runs wildly
about the hall. Feeding twice daily of 1 quart of milk & 2 eggs has been continued; one
" 26 table-spoonful of Nestlé's beef meal is added for each feeding. Dec 26/92. Wt (in underclothing)
" 28 116 pounds. Dec 28/92. Is still in bed, lying quietly there the greater part of the time. Yesterday
and today, has taken Eggnog with considerable urging and some forcing. Feeding by stomach-
1893 Jan 3/7 tube discontinued. Jan 3/93. Wt (in underclothing) 117½ pounds. Jan 7/93. Since the 24th ult.
was, for a time, quite restless at night, sleeping rather poorly; gradually became more restful
and is now sleeping quite well. Is still kept in bed, although he desires to have his Clothes, and
get up. Is taking food fairly regularly, eating fairly well of fluids and solids. While up & about
the wards, stoops or walked about, looking, with a startled, frightened air; talking only when

to witness
all these
, has had
wildly about.
very little
easier
daily by
& about
symptoms
ood and
hours)
ted, on
17 days,
attacked).
y days is
lso in
, though
better spirits
ment in
ly, reading
addressed,
s beginning.
ing. Eats
A.
looking
g and
the others;
food.
ully good.
el.
ps with
but
ressed
good.

Jan 30 Jan 30/93. Another slight loss in flesh. Otherwise no change. Feb 30/93. Depressed. Otherwise about same.
Oct 31/93 Oct 3/93. Has made a very slight gain in weight. Oct 31/93 Continues depressed. Talks but little.

(Carried to 220)

1892

" 24 Dec.
hours. Has a
the greater part of
about the hall. Feeding
" 26 table-spoonful of Mosquera beef-
" 28 118 pounds. Dec 28/92. Is still in bed, up
and today, has taken Eggnog with considerable
1893 Jany 3/ tube discontinued. Jan 3/93. Wt (in underclothing) 117½ pounds. Jan 7/93. Since the 4th inst.
was, for a time, quite restless at night, sleeping rather poorly; gradually became more restful
and is now sleeping quite well. Is still kept in bed, although he desires to have his Clothes, and
get up. Is taking food fairly regularly, eating fairly well of Meats and Solids. While up & about
the wards, stoops or walked about, looking, with a startled, frightened air; talking only when

Personal and Medical History of Edward Robbins

addressed, giving expression by clenched fist, gesture, look of countenance and by word to intense mental agony & suffering, says "that he was the most wretched & wicked of men" and "that all these were suffering & perishing on his account" — Then, and since confinement to his bed, has had sudden spells of in which he gave vent to loud piercing Shriek or cry and rushed wildly about. Has, occasionally, talked fairly freely about old acquaintances. Usually, however, talks very little. Is clean and tidy and is troubled with constipation. Jan 11/93. In order to render closer
Jan 11 observation was today moved to C². Jan 20/93. For the past 10 days, has been visited daily by
" 20 his wife. Jan 27/93. Says he is now "feeling first-rate". Jan 30/93. Has been up, dressed & about
" 30 ward for past 2 weeks. Is rather dull and disinclined to talk. There are no physical symptoms but a mental state of depression with no prominent delusions. Appetite has been good and he has continued uniformly quiet & well-behaved & to eat and sleep well (8 hours) each night since his removal. Bowels have, though somewhat inclined to be constipated, on the whole been more regular. Pulse, taken each morning & evening, has, for the past 17 days, ranged from 68 to 90 in the morning and 68 to 86 in the evening (as per Record attached).
Feby Feb 7/93. Continues uniformly quiet & restful & sleeps well at night, apparently. By day is quiet, clean and well-behaved. Has become more active, working some in the ward & also in the dining-room. Talks more freely & answers greetings & questions more promptly, though never commences a conversation. Says he is feeling well. Seems brighter and in better spirits though occasionally feels depressed. Is desirous to go home. Has made improvement in bodily health & has gained in weight.
Mar 18 Mar 18/93. Passed quiet & apparently restful nights, sleeping fairly well. Sups daily, reading some, moving about, looking out of the windows, talking but little except when addressed, and still looking gloomy & depressed. Has a good appetite, however, & seems to be gaining.
Apl 12 Apl 12/93. Does not always sleep well at night. Works in the dining-room. Goes walking. Eats well. Still depressed, however. Is worrying about his family, but will not write.
May 11 May 11/93. Has during the past 2 or 3 weeks seemed a trifle brighter. Was today moved to A².
" 12 May 12/93. Today, appeared a little excited, quite gloomy & depressed; keeping by himself & looking
" 18 vacantly out of the window. Was sent back to B³. May 18/93. Seems, of late, to be resting and sleeping quite well at night. Appetite good & bowels regular. Still keeps apart from the others; saying nothing, doing nothing; and, most of time, looks sad & gloomy. Bodily health quite good.
" 31 May 31/93. Appetite good, bowels normal. No cough noticed. Sleep & rest at night, apparently good. Gets out walking. Still keeps apart from the others. Is somewhat depressed. Works in C² Hall.
June 30 June 30/93. No special change to note. Still has a depressed look & manner.
July 31 July 31/93. Is quiet & well-behaved. Quiet at night, apparently resting well. Helps with work in the C² Hall. Always inclined to keep apart from his fellow-patients. Talks but little. Still wears a gloomy & depression & pressive. —
Aug 3/ Aug 3/93. Has lost 6½ pounds in past 2 months. Aug 30/93. Seems to be quite depressed.
" 31 Aug 31/93. Appetite good. Still very depressed. Works in C². Bodily condition seems good.
Sep 8/30 Sep 8/93. Another slight loss in flesh. Otherwise no change. Sep 30/93. Depressed. Otherwise about same.
Oct 3/31 Oct 3/93. Has made a very slight gain in weight. Oct 31/93 Continues depressed. Talks but little.

(carried to 320)

Personal and Medical History of George Stewart

Whole No. 3197.
Residence, St Paul, Minn
Date Admission, 1st December 1892.
Admitted by, S. Phelps Hour, 7 P.M.
How Sent, John B. Olivier, Jo P., Ramsey County
Sex, male
Age, 32 years
Civil Condition, single
Children, no
Age Youngest Child,
Occupation, Bill-Clerk, R R office
Degree Education,
Profession Religion, Is a church member
Habits, Exemplary
Nativity, Ireland
Physicians Committing, Geo. J. Hanley and J. A. Quinn
Correspondents, T. F. Myron (friend of patient)
Martha Stewart (mother) 9 Great Nor. Ry.
28 Thomas Street
Cortadown, Co. Armagh. Ireland.

No. for Year, 109
Insane Relatives, none; insanity not hereditary
Cause Exciting, Overwork & alcohol
Cause Predisposing,
Form, Mania — acute
Accompanying Bodily Disorder, No
Suicidal or Not, not
Date of this Attack, November 26th
Duration, about 5 days
No. of Attack, 1st
No. of Admissions,
Age First Attack, 32 years
Time of Leaving, Jan. 13th 93
Time in Hospital, 1 mo. 18 ds.
Result, Improved

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS. Exd by Dr Baker Dec 10/92.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, quite active

MEMORY:
Past Events,
Recent Events, fairly good
Special Subjects,

PERCEPTIVITY:
Alert or Dull, does not observe very closely —
Correct or Illusive, seems fairly Correct

REASONING POWER:
Ordinary Subjects, seems fairly good
Own Mental State, will not talk about it.
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Movements are quick & nervous. Has an enlarged gland on the right side of neck; has some eruption on skin, Especially on chest. Says he never had a sore on penis. Has occasionally been somewhat drunk. About 18 days ago began hearing voices "hears them also here; does not know what these voices mean — will have to wait"

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, somewhat
Depressed, is restless & nervous

DELUSIONS:
Systematized or Not,
Special Subjects, That two people were going to shoot him
Transitory or Not,

HALLUCINATIONS: "has" of hearing"

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, few in answer to questions

Personal and Medical History of George Stewart

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8½ in. has weighed as much as 170 lbs WEIGHT, 163 lbs (11/10 st 14½ lbs) NUTRITION, Fair
WOUNDS OR ABNORMALITIES, Probably none.
TONGUE, Tremors, marked at times Coatings, Considerable Promptness Movement, rapid; quick.
PUPILS, Equality, Equal Size, about normal
Response Light, Yes Accommodation, Yes
SIGHT, near sight quite good; far sight slightly impaired.
HEARING, left ear good; right ear much impaired; cannot hear watch on contact.
COORDINATION, Arms, Finger to nose, Eyes shut, good.
Legs, Staying on foot, fairly good somewhat unsteady, Standing, Eyes shut, sways some. Turns fairly promptly & sways a little.
TREMORS, Hands, Slight Tongue, marked at times
Facial Muscles, Slight, on intention General,
REFLEXES, Patellar, very slightly unequal; both exaggerated — 7 on 8 Dr. P's Scale.
Other Reflexes,
ARTICULATION, Hesitating, little or no Slurred, almost no slurring.
FACIAL EXPRESSION,
SENSIBILITY, Seems good
HEART, active quite rapid; sounds clear.
LUNGS, Seem good. Girth 37½ in; Expansion 2½ in (about).
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, Now	Constipated, Have been	Irregular,
APPETITE, Good,	Medium, Yes	Poor,
SLEEP, Good, at times	Poor,	Irregular, Yes
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably quite long ONSET GRADUAL OR SUDDEN, probably gradual

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living — in Ireland; claims in good health
Father or Pat. Relations, Father died — don't know age; got hurt & died from effect
Brothers or Sisters, Seem had any brother; only 1 sister, living; claims healthy; only eyesight defective

Personal and Medical History of George Stewart

1892

This man was brought by Deputy Sheriff Courteau with the following history of case. Habits are exemplary; supposed cause of attack is overwork & alcohol; form is acute & paroxysmal No accompanying bodily disorder. Symptoms first manifested Nov. 26th by hallucinations; imagined he was pursued by men and wants to shoot him; great fear. This is 1st attack. Insanity now manifested by his hearing voices. Has shown no disposition to injure others. Not suicidal. Not filthy or destructive. Dont know as to any peculiarities &c being previously shown. Think not subject to any bodily disease. Has not been restrained until now, since the 26th inst. Has not been under medical treatment.

Dec 2 Dec 2/92. Was, on admission, put on B2. Was restless for 5 hours, sleeping 3 hours, last night.—
" 3 Am. Sup this morning, walking the hall. Pulse 72. 730 Pm. Pulse 72. Te 98.4. Dec 3/92. Was restless for 2 hours, sleeping 5 hours, last night. Am. Pulse 76. Te 100. Semi bed. Says "his nerves and did not sleep". Tongue is badly coated & brown. Bowels are sluggish. Dec 4/92. Seemed to
" 4 rest well last night, sleeping 7 hours. Am. Is up. Tongue heavily coated. Pulse 80. Dec 5/92. Appeared
" 5 to rest well last night, sleeping 6 hours. Am. Pulse 72. Wt 150 pounds. Dec 6/92. Appeared
" 6 to sleep well last night. Dec 7/92. Slept 7 hours last night. 830 Am. Pulse 76. Dec 8/92. Slept
" 7/8 7 hours last night. 830 Am. Pulse 86. Is walking the floor rapidly and has an excited restless way. Approaches the Dr. & writes on a tablet, in a nervous, rapid manner, "donot talk more". "Everything said here is heard at home; it is a miracle". Writes in a jerky, tremulous way. Talks a little,
" 13 when spoken to, however. Dec 13/92. Has been somewhat restless for 3 or 4 nights past.
1893 Jan 3 Jan 3/93. Wt 151 pds. Pulse 82.
" 9 Jan 9/93. Has been uniformly quiet at night, and since the 13th ult°, has seemed to rest and sleep well. By day, has been uniformly quiet, clean, tidy & well-behaved. Has, at all times, taken care of his personal toilet. At first, had quite frequent spells of restlessness, during which he walked the floor rapidly & seemed excited. Has grown calmer, however. Did not often give expression to definite delusions, and has expressed none for some time. Has talked freely & fairly coherently. Plays games. Does no work. Claims now that he is well.
" 13 Has eaten quite well & regularly. Jan 13/93. Has continued to improve; resting and sleeping well at night; well behaved, calm & quiet by day. Talking freely & quite coherently and rationally.

Was, today, visited by a brother and taken home by him on trial.

Discharged May 3rd '93.

Personal and Medical History of H. H. Chamberlain

(from 291)

Aug 7/10 Complains a good deal of attendants & others. Is quite quarrelsome, at times. Aug 10/93. Fought
" 31 with a fellow-patient, (Carl Asp), today. Aug 31/93. Appetite & tongue is good. Bowels regular; Complains of having "sick spells", but attendants have not seen them. Has been quite well-behaved, the past 3 weeks. Habits are clean.
Sep 4/10 Sep 4/93. Complains of his hearing as failing. Sep 20/93. Complains of having "bad spells"—
" 30 Sept 30/93. Has continued quiet & well-behaved now for some time. Not so fault-finding, of late.
Oct 3 Oct 3/93. He seems to have a number of ailments; is being given treatment for his ears. Acts
" 28 very manly at times. Is of a rather disagreable & fault-finding disposition, again. Oct 28/93. He, today, complains of being sick & went to bed. Claims he hurt himself, lifting a patient.—
" 29/31 Oct 29/93. Up today. Oct 31/93. Appetite fair. Habits clean. Complains of not feeling very well, at present. Claims he had 5 fits during the month. Is hard to get along with, at times.
Nov 1/4 Nov 2/93. Has made quite a gain in weight, the past 2 weeks. Nov 11/93. Appetite good. Bowels regular; habits clean. Is fairly well behaved. Is very quick-tempered. Quick & report against attendants, any little thing that happens onward. Complains of having fits quite often
" 16 but Attendants fail to see them. Others seen, however, they are light fits. Nov 16/93. Patient, today, had trouble with a fellow-patient (Charles Burg); struck Burg on the jaw; then quarreled with another patient (Charles Olsen); struck him once, on the side. Attendants separated them; then quarreled with another fellow patient (Fred Johnson), who struck Chamberlain 3 times in the face. Attendants then put Chamberlain in seclusion. During balance of day, & night was very noisy. Destroyed
" 17 his clothes & tore up all the bedding in his room. Was very dirty, also. Nov 17/93. Was taken out
" 18/20 of seclusion at 9. Am. Nov 18/93. Was very quarrelsome, this morning. Nov 20/93. Has been
" 21 very troublesome & difficult to get along with all day. Nov 21/93. Fought with Attendants at 2 Pm & this fall was put in seclusion, at that time. Tore up his good clothes, during seclusion.
" 25/30 Nov 25/93. Very quarrelsome in morning. Was kept in seclusion all day. Nov 30/93. Patient has been in seclusion since 25th. Eats but very little; seems to be failing in strength; still quarrelsome & destructive; tears up his bedding; Speech thick; mind more dull.
Dec 2/4 Dec 2/93. Weight 109 pounds (a very marked loss in weight); Pulse 90. Dec 4/93. Is still
" 5 in restraint. Eats but little. Seems to be failing. Dec 5/93. Patient is failing fast. Was taken out of restraint at 9. A.M. Failed rapidly and died at 2.35. Pm.

Death was seemingly without fever or special symptoms, aside from the mental Confusion. He had been similarly low before, in his Epileptic state, but, this time, he suddenly failed, at the last.

— Died —

His wife was advised of his condition — she came & removed the remains.

Whole No. 3200

Residence, London

Date Admission, 7th December 1892.

Admitted by, Dr. Baker Hour, 1.20 Au

How Sent, Steman Blackmer Jeff. Jc

Sex, Male

Age, 38

Civil Condition, Married

Children, 5 Children

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Yes. Lutheran

Habits, Good

Nativity, Denmark

Physicians Committing, G. W. Barck & Sc

Correspondents, Peter Jensen, Myrtle. P.O.
Mrs Hans C Larson (wife)
Myrtle P.O. Freeborn Co. Minn.



No. for Year, 112

...ne Relatives, Father hung himself

...se Exciting, Despondency

...se Predisposing, Heredity probably?

...n, Melancholia - Acute

...mpanying Bodily Disorder, No.

...idal or Not, Not known

...e of this Attack, about a year ago

...ation, about a year

...of Attack, 2

...of Admissions,

First Attack, about 3 y.

...e of Leaving, Aug. 29. 1893

...e in Hospital,

In probate Court for Freeborn County in
Mnday 8th July 1895 - at 10. a.m. - at
Albert Lea, Minnesota; there will be
heard the verified petition of P. C. Nielson
for appointment of Guardian for
Hans. C. Larson.
Dated, albert Lea, May 27/95
(95) Heman Blackmer
Justice Probate Court

EXAMIN

Exd by D. Baker 16th Dec 1892.

MENTAL ACTIVITY:

Clear or Confused, Fairly Clear

Quick or Sluggish, Active

MEMORY:

Past Events, Seems good

Recent Events, Seems good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Fairly alert, tho' not a close observer.

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Seems to be fairly good

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Says he was frightened about coming here. Says this was the reason he jumped off train. "Was awfully frightened". Was sorry immediately after he had done the act. Says drinks a little but was drunk much.

DELUSIONS:

Systematized or Not, None definite detected.

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None detected

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in WEIGHT, 168½ pds (1/16. Wt 165 pds) NUTRITION, Fairly good

WOUNDS OR ABNORMALITIES, bruises w/rt. temple & on rt. Knee; scar on left knee; cut when a boy. Abnormalities Probably none

TONGUE, Tremors, Rather Coarse Coatings, Considerable; tooth marks Promptness Movement, quick

PUPILS, Equality, Equal Size, about normal

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Fairly Good

COORDINATION, Arms, Finger to nose, Eyes shut, good.

Legs, Standing on foot, very steady. Standing, Eyes shut, Stands firmly

TREMORS, Hands, Slight Tongue, Rather Coarse

Facial Muscles, almost none. General,

REFLEXES, Patellar, Equal; much exaggerated - 8 or 9 (Dr. Pts Scale)

Other Reflexes,

ARTICULATION, Hesitating, probably due Lack of knowledge of Eng. Slurred, not much slurred.

FACIAL EXPRESSION, Fairly intelligent & bright

SENSIBILITY, to touch, Seems good.

HEART, Seems Sound

LUNGS, Seem good; Chest 38 in Expansion 41 in

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, yes	Constipated,	Irregular,
APPETITE, Good, yes, now	Medium,	Was Poor, before coming here
SLEEP, Good, Now	Poor, Has been	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Quite long ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; about 60; Claims good health.

Father or Pat. Relations, Father not living.

Brothers or Sisters, 1 brother living; health good; 2 sisters living, health poor; 1 sister died 2 or 3 yrs ago - died in Childbirth.

Personal and Medical History of Hans C. Larson

Whole No. 3200

Residence, London

Date Admission, 7th December 1892.

Admitted by, Dr. Baker Hour, 1.20 Au

How Sent, Steman Blackmer Joff, F

Sex, Male

Age, 38

Civil Condition, Married

Children, 5 Children

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Yes. Lutheran

Habits, Good

Nativity, Denmark

Physicians Committing, G. W. Barck & A. L. Helen

Correspondents, Peter Jensen, Myrtle P.O.
Mrs Hans C. Larson (wife)
Myrtle P.O. Freeborn Co. Minn.



No. for Year, 112

...me Relatives, Father hung himself

...se Exciting, Despondency

...se Predisposing, Heredity probably?

...n, Melancholia - Acute

...mpanying Bodily Disorder, No.

...idal or Not, Not known

... of this Attack, about a year ago

...ation, about a year

...of Attack, 2

...of Admissions,

... First Attack, about 37.

...e of Leaving, Aug. 29. 1900

...e in Hospital,

Result, Transfered to Hastings

JKSpm

EXAMINATION ON ADMISSION.

Exd by Dr. Baker 16th Dec 1892.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Fairly Clear

Quick or Sluggish, Active

MEMORY:

Past Events, Seems good

Recent Events, Seems good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Fairly alert, tho' not a close observer.

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Seems to be fairly good

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Says he was frightened about coming here. Says this was the reason he jumped off train. "Was awfully frightened". Was sorry immediately after he had done the act. Says drinks a little but never drunk much.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Has been; is more cheerful now.

DELUSIONS:

Systematized or Not, None definite detected.

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None detected

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free.

Personal and Medical History of Hans C. Larson

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in WEIGHT, 168½ pds (1/16. Wt 165 pds) NUTRITION, Fairly good

WOUNDS OR ABNORMALITIES, bruises w/rt. temple & on rt. Knee; scar on left knee, cut when a boy. Abnormalities, Probably none

TONGUE, Tremors, Rather Coarse Coatings, Considerable; tooth marks Promptness Movement, quick

PUPILS, Equality, Equal Size, about normal

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Fairly Good

COORDINATION, Arms, Finger to nose, Eyes shut, good.

Legs, Standing on foot, very steady. Standing, Eyes shut, Stands firmly

TREMORS, Hands, Slight Tongue, Rather Coarse

Facial Muscles, almost none. General,

REFLEXES, Patellar, Equal; much exaggerated - 8 or 9 (Dr. P's Scale)

...up) of Syl's Slurred, not much slurred.

...ight.

...ancein H in

HABITS, Dirty, ..., Yes Careless,

BOWELS, Normal, yes Constipated, Irregular,

APPETITE, Good, yes, now Medium, was Poor, before coming here

SLEEP, Good, now Poor, Has been Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, quite long ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, mother living; about 60; Claims good health.

Father or Pat. Relations, Father not living.

Brothers or Sisters, 1 brother living; health good; 2 sisters living, health poor; 1 sister died 2 or 3 years ago - died in Childbirth. —

1892 This man was brought here by J.L. Jorgerson, deputy, and H. P. Olsen, friend. The following is his history. Habits are good. Cause of attack supposed to be despondency; form is Chronic, depressed and paranoynal. No accompanying bodily disease or disease. First symptoms of disease was manifested about one year ago; became despondent; stopped work on the farm; refusing to do anything; talked about destroying his family and killing himself. Insanity is now shown in about same way as stated in preceding paragraph. Has only threatened to injure others. As to suicide, not known. No filthy or destructive habits. Has not been restrained or confined. Has had some medical treatment, but with no apparent benefit.

(Note By M.D.). On way here, jumped from train, without warning. Deputies got off later & went in search. Patient had walked a few miles. Is quite badly bruised about the face.

Dec 7/92 Dec 7/92. Came in at 1.30 last night & slept 2½ hours. 8.30am R. 98. P. 84. T. 100.4. 5 P.M. R. 98. P. 78. T. 98.4 100. Dec 8/92. Has quiet restful last night, sleeping 8 hours. AM. Pulse 76. R. 20. T. 99.8. Tongue is Coated. 7.30 PM. Pulse 86. R. 20. T. 100.2. Dec 9/92. Has rested & slept well as past 2 nights. Pulse 76. yesterday morning and to this morning. Dec 19/92. Has been quiet, restful & slept well, nights, since the last note. Pulse has been 72. 70. 68. 80. 70. 70. 70 in the past 5 and present mornings. Bowels have been loose the past 2 days. Dec 27/92. Was visited today by friends. Jan 3/93. Wt 164½ pounds. Pulse 72. Jan 11/92. Has continued uniformly quiet, and has seemed to rest and sleep well at night, since the last note on this subject. Has, ever since admission, been clean tidy and well-behaved. Quiet, free from excitement, apparently calm, moving about quite freely, talking freely & coherently; not expressing definite delusions, ordinarily. Has, at all times, seemed rather sad; and, in a few occasions, has cried. Has been very anxious to go home. Has written letters to his friends. Has taken food regularly, but has lost some in weight.

Feb 11 Feb 11/93. Uniformly quiet, apparently resting and sleeping well at night. Quiet, clean, tidy & well-behaved by day. Quite free, pleasant & coherent in conversation. Calm but still somewhat sad in appearance.

" 15 Has regained his loss in weight & seems in good physical health. Feb 15/93. Visited today by brother in law.

Mar 16 March 16/93. Kept to bed this afternoon; will not speak, even when asked how he feels. Indicates, by nod, that he has headache; tongue is some coated; no vomiting — Pulse 60.

" 23 March 23/93. Since the 15th inst, has been up & down from his bed frequently; almost daily going to bed once or twice for several hours. Has passed into almost complete stuporous state, making no response even when pressed with questions, scarcely indicating by signs wants, and very slowly responding to requests to do anything. Looks quite fleshy & has quite a good color — Takes food fairly well.

Apl 13 Apl 13/93. Has continued to be up & down from his bed, since last note. The past week, the greater part of the time, remaining almost steadily in bed. Has also been refusing food, eating very little. Has for some time been stuporous, lying in bed almost motionless, with his eyes closed, paying no heed to any effort to arouse him.

" 14/20 Apl 14/93. Up this morning. Apl 17/93. In bed this morning. Apl 20/93. Takes no solid food, but drinks 2 or 3 quarts of milk daily. Apl 22/93. Was up yesterday & is up today. Apl 25/93. In bed again today, getting up however, once or twice during the day. Apl 28/93. Up today.

May 18 May 18/93. Lies quiet at night & usually sleeps well. While up, about the ward, is quiet & silent; looks gloomy & depressed. Seldom talks, unless addressed & then only answers in a few words.

NAME. Hans. C Larson

DATE. 189 .	WEIGHT.	PULSE.	GAIN.	LOSS.	
Jan 3d	164½	72	....	4	
Feb 3d	171	84	6½	....	
Mar 2d	172	80	1	....	
Apl 4th	174½	74	2½	....	
(in bed) " 11th	161½	—	....	5	(Estd)
(in bed) " 18th	158	—	....	3½	
(in bed) " 26th	159	—	1	....	
(up some) May 3d	171	60	3	3	(est)
" June 5th	176	—	5	....	
" July 4th	179	—	3	....	
Aug 3d	176	—	....	3	
Sep 8th	179	—	3	....	
Oct 3d	180	70	1	....	

ually regular. no cough noticed. Occasionally takes the works on ward, at times. Talks now. Gloomy & depressed. h, the past 3 months. June 22/93. Visited by a friend. bowels normal. Once a twice a month get the idea that nurse except to request writing paper. Works some on ward.

Appetite only medium, of late. Bowels seem regular. ne depressed. Seems growing somewhat worse. nues last note, except that he seems more melancholy - l at. Aug 31/93. Appetite good: bowels generally free. ows on ward. Is quite stupid & much depressed. 93. Has made a slight gain in weight, in the past month. ; wears a very pad & melancholy expression, always. Oct 31/93. Reads some. Works on ward. Otherwise, no change working for past few days. Sits on seat most of the time. Complains talk at all. Nov 30/93. Same. Dec 31/93. Wt 180 lbs. Appetite good. Works on ward. Phys cond good. No complaints. Talks, walks, works, reads some. Appetite good

28/94. Seems somewhat better; is some brighter & more cheerful of late; works on the ward; habits clean. Complains occasionally, of backache. 31/94. About the same for the past 3 months. Physical condition good. 3/94. Slept poorly, last night; troubled with tooth-ache. — , last night. April 30/94. Complains, at times, of rest. Reads some & helps willingly with the ward-work. —

May 1/31 May 1/94. Wt 170 lbs. Pulse 70. May 31/94. Complains of headache, at times. Talks but little; June 1/ Seems despondent. Works some on ward. Physical health seems good. June 1/94. Wt 179 lbs. " 30 pulse 70 — June 30/94. No special change to note. Appetite good; works on the ward. —

July 1/31 July 1/94. Wt 178 lbs. July 31/94. Behaves well; talks none: is somewhat demented-

Aug 1/28 Aug 2/94. Wt 174½ " Pulse 69. Aug 28/94. Patient received a visit from some friends, Friday.

" 31 Aug 31/94. Quiet & well-behaved. Is depressed - Talks but little. Reads some. Keeps with the ward-work.

Sep 1/30 Sep 1/94. Wt 174 lbs. Pulse 84. Sep 30/94. No special change. Quiet; will not talk. Is depressed.

Oct 1/31 Oct 1/94. Keeps in good flesh & physical condition — Oct 31/94 no change to note from date of last month.

Nov 1 Nov 1/94. Wt 175 lbs. Pulse 76. Dec 1/94. Wt 176 lbs. Pulse 72. Jany 1/95. Wt 176 lbs. Pulse 72.

Dec 1895 Jan 2/31 Jany 31/95. Appetite good; he complains of slight headache, at times. Is quiet & well-behaved; reads some; talks quite sensibly when addressed. Sits in seat, by himself, nearly all the time when not at work. Is clean & tidy. Helps some with the work. Goes out & walking quite regularly.

Feb 1/28 Feb 1/95. Wt 174½ lbs. Pulse 80. Feb 28/95. No change noticeable. Feb 28/95. Quiet; well-behaved; melancholy. talks but little; reads some; Works some, on ward, but is very peculiar about his work; does just so much & cannot be induced to do any more, would say, if stopped. clean & tidy; makes no complaints. March 1/95. Wt 175 lbs. Pulse. March 31/95 no change noted.

Mar 1/31 Apl 1/30 Apl 1/95. Wt 175 lbs. Pulse 84. April 30/95. Quiet & depressed. Otherwise no change noted.

carried to Transfer Book "A" page 108

1892

This man was brought here by J.L. Torgerson, deputy
is his history. Habits are good. Cause of attack supposed
and paroxysmal. No accompanying bodily disease or de
manifested about one year ago; became despondent
anything; talked about destroying his family
in about same way as stated in preceding paragraph
to suicide, not known. No filthy or destructive
Has had some medical treatment, but with n
(Note Page No. 13). On way here, jumped from train, walk
had walked a few miles. Is quite badly bruised

Dec 7/93 Dec 7/93. Came in at 1.30 last night + slept
8 hours. Am. Pulse 76. Temp 99.8. Tongue
" 10 rested + slept well on past 2 nights. Pulse 7
" 19 been quiet, restful + slept well, night
" 27 the past 5 and present mornings.
1893 Jan 3/94 rested today by friends. Jan 3/
uniformly quiet, and has seems
subject. Has, ever since admission,
apparently calm, moving about quite freely,
demeanors, ordinarily. Has, at all times, seemed
Has been very anxious to go home. Has written letters
has lost some in weight.

Feb 11 Feb 11/93. Uniformly quiet, apparently resting and sleeping well at night. Quiet, clean, tidy + well-behaved
by day. Quite free, pleasant + coherent in conversation. Calm but still somewhat sad in appearance.
" 15 Has regained his loss in weight + seems in good physical health. Feb 15/93. Visited today by brother in law.
Mar 16 March 16/93. Went to bed this afternoon; will not speak, even when asked how he feels. Indicates, by nod,
that he has headache; tongue is some coated; no vomiting — Pulse 60.
" 23 March 23/93. Since the 16th inst, has been up + down from his bed frequently; almost daily going
to bed once or twice for several hours. Has passed into almost complete stuporous state, making
no response even when pressed with questions, scarcely indicating by signs or reply, and very
slowly, responding to requests to do anything. Looks quite fleshy + has quite a good color —
Takes food fairly well.

Apl 13 Apl 13/93. Has continued to be up + down from his bed, since last note. The past week, the greater part
of the time, remaining almost steadily in bed. Has also been refusing food, eating very little. Has for some time
been stuporous, lying in bed almost motionless, with his eyes closed, paying no heed to any effort to arouse him.
" 14/17/20 Apl 14/93. Sleeps this morning. Apl 17/93. Dubed this morning. Apl 20/93. Takes no solid food, but drinks
" 25/26 2 or 3 quarts of milk daily. Apl 25/93. Was up yesterday + is up today. Apl 25/93. Dubed again today, sleeping
" 28 up, however, once or twice during the day. Apl 28/93. Slept today.
May 18 May 18/93. Lies quiet at night + probably sleeps well. While up, about the ward, is quiet + silent; looks
gloomy + depressed. Seldom talks, unless addressed + then only answers in a few words.

May 31/93 Appetite, as a rule, good: bowels generally regular. No cough noticed. Occasionally takes the
notion that he wants to go back to bed. Works on ward, at times. Talks now. Gloomy + depressed.
June 5/93 June 5/93. Has been gaining in flesh, the past 3 months. June 23/93. Visited by a friend.
" 30 June 30/93. Appetite is generally good: bowels normal. Once or twice a month gets the idea that
he wants to go back to his bed. Talks none except to request writing paper. Works some on ward.
Seems becoming more depressed. —
July 4 July 4/93. Continues to gain in weight. Appetite only medium, of late. Bowels seem regular.
Works but little. Talks none. Is more depressed. Seems growing somewhat worse.
" 31 July 31/93. No very noticeable change since last note, except that he seems more melancholy.
Aug 2/31 Aug 3/93. Weight fluctuates some but at Aug 31/93. Appetite good: bowels generally free.
Bodily health seems good. Works some on ward. Is quite stupid + much depressed.
Sept 4/6 Sept 4/93. Pulse 70. Temp 99.4. Sept 8/93. Has made a slight gain in weight, in the past month.
" 30 Sept 30/93. Very reticent; talks none; wears a very sad + melancholy expression, always.
Oct 3/31 Oct 3/93. Another slight gain in flesh. Oct 31/93. Reads some. Works on ward. Otherwise, no change.
Nov 1/93 Wt 177 lbs. P. 70. Nov 10/93 Has not been working for past few days. Sits on seat most of the time. Complains
" 30 of headache. Appetite good. Dresses + talks at all. Nov 30/93. Same. Dec 1/93 Wt 180 lbs. Ope. Dec 31/93
Dec 31/93 Better than he was. Talks freely. Appetite good. Works on ward. Phys. cond. good. No complaints.
Jany 2/94 Wt 175½. Pulse. Jany 31/94. Talks, walks, works, reads some. Appetite good.
Feb 1/31/94 Wt 175½ lbs. Pulse 68. Feb 28/94. Seems somewhat better; is some brighter + more cheerful, of late;
read some; talks quite freely; helps with work on the ward; habits clean. Complains occasionally, of backache.
Mar 1/31 March 3/94. Wt 176½ lbs. Pulse 80. March 31/94. About the same for the past 3 months. Physical condition good.
Apr 1/13 April 7/94. Wt 178 lbs. Pulse 84. April 13/94. Slept poorly, last night; troubled with tooth-ache.
" 23/30 April 23/94. Tooth-ache again troubles him, last night. April 30/94. Complains, at times, of not
feeling well: but is about as usual. Reads some + helps willingly with the ward-work.
May 31 May 1/94. Wt 176½ lbs. Pulse 70. May 31/94. Complains of headache, at times. Talks but little;
June 1/ seems despondent. Works some on ward. Physical health seems good. June 1/94. Wt 179 lbs.
" 30 pulse 70 — June 30/94. No special change to note. Appetite good; works on the ward.
July 31 July 1/94. Wt 178 lbs. July 31/94. Behaves well; talks none: is somewhat demented.
Aug 1/28 Aug 2/94. Wt 174½ " Pulse 69. Aug 28/94. Patient received a visit from some friends, today.
" 31 Aug 31/94. Quiet + well-behaved. Is depressed. Talks but little. Reads some. Helps with the ward-work.
Sep 1/30 Sept 1/94. Wt 174 lbs. Pulse 84. Sept 30/94. No special change. Quiet; will not talk. Is depressed.
Oct 31 Oct 1/94. Keeps in good flesh + physical condition. Oct 31/94. No change noted from above for month.
Nov Nov 1/94. Wt 175 lbs. Pulse 76. Dec 1/94. Wt 176 lbs. Pulse 72. Jany 1/95. Wt 176 lbs. Pulse 72.
Dec 1895 Jany 31/95. Appetite good; he complains of slight headache, at times. Is quiet + well-behaved;
Jan 1896 reads some; talks quite sensibly when addressed. Sits in seat, by himself, nearly all the time when
not at work. Is clean + tidy. Helps some with the work. Goes out walking quite regularly.
Feb 1/29/96 Feb 1/95. Wt 174½ lbs. Pulse 80. Feb 28/95. No change noticeable. Feb 28/95. Quiet; well-behaved;
Melancholy. Talks but little; reads some; works some, on ward, but is very peculiar about
his work; does just so much + cannot be induced to do any more; would cry, if stopped.
Mar 1/31 clean + tidy; makes no complaints. March 1/95. Wt 175 lbs. Pulse. March 31/95. No change noted.
Apl 1/30 Apl 1/95. Wt 175 lbs. Pulse 84. April 30/95. Quiet + depressed. Otherwise no change noted.

carried to Transfer Book "A" page 108

Personal and Medical History of Paul Johnson

Whole No. 3202.

Residence, Granger, Wyoming.

Date Admission, 9th December 1892

Admitted by, Dr. Kilbourne Hour, 7 PM.

How Sent, J. R. Corrigan, Jop@, Hennepin Co

Sex, male

Age, 44

Civil Condition, married

Children, two

Age Youngest Child,

Occupation, Ranchman & Horse-dealer

Degree Education,

Profession Religion, Not a church-member

Habits, Good

Nativity, Denmark

Physicians Committing, J. T. Moore & E. T. Gibson

Correspondents, (wife). Josephine Johnson, Granger, Wyom. Ter.
John Peter Sorensen (brother) Glenville, Minn.

No. for Year, 1144.

Insane Relatives, Not known (as to heredity, Not known)

Cause Exciting, Sunstroke

Cause Predisposing, not given

Form, Mania-Acute

Accompanying Bodily Disorder, No.

Suicidal or Not, Believed not — not known

Date of this Attack, not stated. (probably recurrent)

Duration, — " —

No. of Attack, not 1st — had one 3 years ago.

No. of Admissions,

Age First Attack, 41 Years.

Time of Leaving, Dec. 19" 92

Time in Hospital, 10 ds.

Result, Improved

EXAMINATION ON ADMISSION.

Exd by Dr. Baker Dec 16/92.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear at present; Lacken much confused

Quick or Sluggish, active

MEMORY:

Past Events, good, he says.

Recent Events, probably Confused

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, Illusive

REASONING POWER:

Ordinary Subjects,
Own Mental State,
Special Subjects,
} Perverted

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes

Depressed,

DELUSIONS:

Systematized or Not, Unsystematized - numerous

Special Subjects, Definite detected

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Incoherent

Voluble or Reticent, Voluble

GENERAL DESCRIPTIVE REMARKS:

As to his making the row in Minneapolis, tells a fairly accurate story of his travels. While so doing, however, grows incoherent, wandering off inside issues. Claims that while taking a bath in a hotel at Minneapolis, a light struck his eyes suddenly & seemed to render him incapable of doing anything or moving. Denies having been noisy or disturbed while in hotels. Talks as voluble about any subject on which he is questioned. Is much more coherent & rational than at time of admission

Personal and Medical History of Paul Johnson

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in WEIGHT, 142½ lbs; usually 140 to 150 lbs. NUTRITION, Below normal. Is thin yet.

WOUNDS OR ABNORMALITIES, Bruise on left temple: hasfiles; left elbow movement impaired; old fracture (when 6 yrs old)

TONGUE, Tremors, Some coarse Coatings, slight coating Fairly clean (mod.) Promptness Movement, Prompt

PUPILS, Equality, Very slightly unequal; right larger Size, Slightly dilated

Response Light, dilatation in light seems sufficient Accommodation, Yes.

SIGHT, Good

HEARING, Impaired

COORDINATION, Arms, Finger to nose, Eyes shut, Fairly Good.

Legs, Standing unfort, Fairly steady. Standing, Eyes Shut, Ataxy some.

TREMORS, Hands, almost none Tongue, Some coarse

Facial Muscles, None General,

REFLEXES, Patellar, Equal; about normal; somewhat sluggish.

Other Reflexes,

ARTICULATION, Hesitating, Slightly Slurred, Clear

FACIAL EXPRESSION, somewhat haggard

SENSIBILITY,

HEART, Seems all right

LUNGS, Good. Chest 37 in Expansion 3 in

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated,	Irregular, yes
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular, now
PULSE, 72 irreg. (on ad).	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short probably ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother dead; about 70.

Father or Pat. Relations, Father died 30 or 40 years ago; cant say cause.

Brothers or Sisters, 3 brothers all living; claim Healthy; 5 sisters living; says healthy.

Personal and Medical History of Paul Johnson.

1892

This man was brought here by J.E. Mullaney, and H.H. Shaag, with following history. Habits are good. Cause of this attack is sunstroke; form is paroxysmal; no accompanying bodily disorder. This attack was announced by his flourishing a revolver and declaring himself to be "The Terror of the West". After 24 hours' confinement, he became quiet and was allowed his liberty. He went to a public building, and took off all his clothing. This is not the first attack. Had one, 3 years ago; he was sent to an Asylum; remained 10 days, & the patient says. Insanity is now manifested by excitable talk; wild actions. Has not shown disposition to injure others. As to suicide, not known; believed not. Not filthy or destructive. As to bodily disease, not known. After leaving that asylum, became able to resume his business. The sunstroke occurred 3½ years ago.

Dec 9 Dec 9/92. Was, mad missing, spent on B³. Was wildly talkative.

" 10 Dec 10/92. Was very noisy for 6 or 7 hours last night. Out of bed; sleeping but 2 hours. AM. Was up & dressed. Incoherent; talking incoherently & almost constantly; & presenting delusions. Attention can be obtained. Ate but fairly. Gave his wife's name & address. Pulse 90.

" 11 Dec 11/92. Was very noisy last night; destructive & pugnacious; sleeping 5 hours. AM. Pulse 105. T(o) 100.6.

" 12 Dec 12/92. Was extremely noisy last night, and destructive, and slept none at all. Today, is very restless & excited. Put on hyoscin.

" 13 Dec 13/92. Quite noisy last night and restless, sleeping 4 hours. Dresses self today.

" 14 Dec 14/92. Quite noisy nearly all night, last night. Is very excited and noisy today — Hyoscin ordered given every 2 hours.

" 15 Dec 15/92. Quite noisy and restless for 5 hours last night, sleeping 4 hours. 9 AM. Pulse 98. Is constipated.

" 16 Dec 16/92. Was quiet and rested well last night, sleeping 8 hours. 9 AM. P. 76.

" 17 Dec 17/92. Again passed a quiet, restful night, sleeping 8 hours. Was today visited by his wife

" 19 Dec 19/92. For the past 2 nights has been perfectly quiet. Has rested well, & slept well. — For several days past, has been quiet, orderly & well-behaved. Talking quite freely & calmly and coherently. Has realized where he is. Wide-awake; observing surroundings. Has not given expression to delusions until today, when he gave expression to the delusion that this institution was run by a certain order or fraternity & expressed a desire to join it.

Has permitted to go with his wife, who purposes to take him to his home in Wyoming

Discharged May 8th '93.

Personal and Medical History of William J. Abbott.

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NOTES IN THE CASE OF William J Abbott

1893

DETAILED HISTORY						NSP: NOTES BY NURSE	NOTES BY PHYSICIAN.
1893						Gave bath.	
						Ate a reasonable amt	
						of nourishment.	
DATE	HOUR		PULSE		R	Chiefly egg nog.	
Oct	A.M.	P.M.	A.M.	P.M.	A.M.		
22	7	5	102	98			
23	7	5	98	84		Weight 74 lbs.	
24	7	5	102	92		Bowels Costive	
25	7	5	98	92			
26	7	5	102	102		Continually passing urine in bed.	
						Bowels Costive	
27	7	5	100	104			
28	7	5	84	104		Bowels moved freely	
29	7		84			Gave bath	
30	7	5	108	106		Gave bath	
						Has to be watched & fed.	
31	7	5	100	116		Same as before	
						appetite good.	
						Bowels moved	
						Slept nightly from 9 PM to 7 AM	
						an average of 1 to 2 hours	
						Bowels moved & Vomiting	
						Looks pale & Thin	
						Pulse at pres. good	
						sweat	
						Appears much better than	
						yesterday.	
						Gave bath.	
						Very restless and noisy	
						Has to be watched & fed eating	
						about 2 minutes	
						Gave bath.	
						Coughing more than	
						usual.	
						Slept nightly from 9 to 12 PM	
						average 1 & hours 2 nights	
						not sleeping any.	

Respiration very rapid, at times. Bed Sores about the same, slightly improved.

" 01 Dec 6/93. Restless & noisy, the greater part of the day. Dec 7/93. No further improvement

(Carried to 376)

Personal and Medical History of Paul Johnso

1892

This man was brought here by J.E. Mullaney, and H.H
Habits are good. Cause of this attack is sunstroke; form
bodily disorder. This attack was announced by his
himself to be "The Terror of the West". After 24 hou
allowed his liberty. He went to a public build
first attack. Had one, 3 years ago; he was
Says Insanity is now manifested by excit
-jure others. Ac to suicide, not kno
Asian ce, not known. After b
-stroke occurred 3½ years

Dec 9 Dec 9/92. Was, maxim

" 10 Dec 10/92. Was very
-up & dressed
-tention c

" 11 Dec 11

" 1

" 15

" 16 Dec

" 17 Dec 17/9

" 19 Dec 19/92

ily
The sun-

ght 2 hours. Am. Was
; & pressing delusions. At-
address. Pulse 90.
ous; Sleeping 5 hours. Am. Pulse 105.

structive, and slept none at all. Today,

restless, sleeping 4 hours. Dresses self today
t, last night. Is very excited and noisy today -
hours.
ers for 5 hours last night; sleeping 4 hours. 9 am. Pulse 98.

d rested well last night, sleeping 8 hours. 9 am. P. 76.

passed a quiet, restful night, sleeping 8 hours. Was today visited by his

the past 2 nights has been perfectly quiet. Has rested well, & slept well. -
For several days past, has been quiet, orderly & well-behaved. Talking quite freely & calmly
and Coherently. Has realized where he is. Wide-awake; observing surroundings. Has not given
& pression to delusions until today, when he gave expression to the delusion that this Insti-
-tution was run by a certain order or Fraternity & expressed a desire to join it.
Has permitted to go with his wife, who purposes to take him to his home in Wyom

Discharged May 8th '93.

Personal and Medical History of William J. Abbott

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DETAILED HISTORY & NOTES IN THE CASE OF William J. Abbott

1893

DATE	HOUR	PULSE	R.	NOTES BY NURSE	NOTES BY PHYSICIAN.
Sep	A.M. P.M.	A.M. P.M.	A.M.		
25	7	76		Gave bath	
26	7 5	114 112		Takes a reasonable amt of nourishment	
27	5	120		Chiefly egg nog.	
28	7	118		Weight 74 lbs.	
29	7 5	100 108		Bowels Costive	
30	7 5	104 108		Continually pawing urine in bed.	
Oct 1	7	96		Bowels Costive	
2	7	92			
3	7 5	96 104		Bowels move freely. Gave bath	
4	7	100		Shave to-day	
5	7 5	86 90		Has taken nourishment fairly well	
6	7 5	104 108		Same as before. Appetite good.	
7	7 5	102 106		Bowels moved. Slept nightly from 1st to 9th an average of 10 hours	
8	7	92			
9	7 5	96 90		Bowels move freely. Vomiting looks pale & thin very much. Does not present any sweat	
10	7 5	100 114		Appears much better than yesterday.	
11	7 5	104 112		Gave bath	
12	7 5	82 90		Very restless and noisy	
13	7 5	88 72		Has had twitching of feet lasting about 2 minutes	
14	7 5	104 94		Gave bath	
15	7 5	96 108		Coughing more than usual	
16	7 5	88 92		Slept nightly from 7 to 10 hrs average 8 hours 2 nights not sleeping any	
17	7 5	100 82			
18	7 5	84 86			
19	7 5	84 88			
20	7 5	90 104			
21	7 5	100 100			

" 9 Dec 6/93. Restless & noisy, the greater part of the day. Dec 7/93. No further improvement
(Carried to 362)

1892

This man was brought here by J.E. Mullaney, and H.H
Habits are good. Cause of this attack is sunstroke; for
bodily disorder. This attack was announced by
himself to be "The Terror of the West". After 3
allowed his liberty. He went to a public
first attack. Had one, 3 years ago;
says Insanity is now manifested
- five others. Ag toxicicide
disease, not known
- stroke occurred

Dec 9 Decreased 24

" 10 D

[illegible] night 2 hours. Am. Has
unity; & pressing delusions. at-
name & address. Pulse 90.
gracious; sleeping 5 hours. Am. Pulse 105
and destructive, and slept none at all. Today,
in.
ept and restless, sleeping 4 hours. Dresses self today.
all night, last night. Is very excited and noisy today -
every 2 hours.

" 15 [illegible] and restless for 5 hours last night, sleeping 4 hours. 9 am. Pulse 98.

" 16 Dec 16 [illegible] as quiet and rested well last night, sleeping 8 hours. 9 Am. P. 76.

" 17 Dec 17/92. Again passed a quiet, restful night, sleeping 8 hours. Has today visited by his wife

" 19 Dec 19/92 For the past 2 nights has been perfectly quiet. Has rested well, & slept well. - For several days past, has been quiet, orderly & well-behaved. Talking quite freely & calmly and coherently. Has realized where he is. Wide-awake; observing surroundings. Has not given & pression to delusions until today, when he gave expression to the delusion that this Institution was run by a certain order or Fraternity & expressed a desire to join it.

Has permitted to go with his wife, who purposes to take him to his home in Wyoming

Discharged May 3rd 93.

Now page 376.

Vol 30
39 38

1893

NOTES IN THE CASE OF William J. Abbott

1893

MO.	DA.	R.	PULS	RESP.	NOTES BY NURSE	NOTES BY PHYSICIAN.
Sep.	6	7	84	20	Gave bath. Takes a reasonable amount of nourishment. Chiefly egg nog.	
		5	78			
	7	7	100	22	Weight 74 lbs.	
		5	102	24		
	8	7	100	22	Bowels. Costive.	
		5	78	20		
	9	7	84	20	Continually passing urine in bed.	
		5	80	24		
	10	7	74	26	Bowels. Costive.	
		5	84	28		
	11	7	80	22	Bowels moved freely. Gave bath.	
		5	80	20		
	12	7	76		Gave bath.	
	13	7	90		Restless through night.	
		5	88		Same as before.	
	14	7	100	16	Appetite good.	
				20	Bowels moved.	
	15	7	86	20	Slept nightly from 8 to 9 hrs.	
		5	84		an average of 10 to 12 hours	
	16	7	100	20	Bowels moved. Vomiting.	
				20	Looks pale. Appetite poor.	
					Quiet at present time.	
					Weak.	
	17	7	88	20	Appears much better than	
					yesterday.	
	18	7	78	24	Gave bath.	
				20		
	19	7	92	24	Very restless and noisy.	
	20	7	92	24	Had twitching of left eye lasting	
		5	90	20	about 2 minutes.	
	21	7	102	22	Gave bath.	
	22	7	108	26	Coughing more than	
		5	106	26	usual.	
	23	7	102	26	Slept nightly from 7 to 8 hr.	
	24	7	96	20	average 8 hours 2 nights	
		5	98		not sleeping any	
				20		

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Dec 6/93. Restless & noisy, the greater part of the day. Dec 7/93. No further improvement (carried to 376)

Personal and Medical History of Paul Johns

1892

This man was brought here by J.E. Mullaney, and H
Habits are good. Cause of this attack is sunstroke
bodily disorder. This attack was announc
himself to be "The Terror of the West". At
allowed his liberty. He went to a p
first attack. Had one, 3 years
Says insanity is now manif
- fure others. At tos
disease is not
- stroke -

Dec 9

spring but 2 hours. Am. Was
Faulty; & pressing delusions. at-
his name & address. Pulse 90.
pugnacious; sleeping 5 hours. Am. Pulse 105.

pt, and destructive, and slept none at all. Today,
Hyoscin.
straight and restless, sleeping 4 hours. Dresses self today.
early all night, last night. Is very excited and noisy today --
given every 2 hours.

" 15 a noisy and restless for 5 hours last night, sleeping 4 hours. 9 Am. Pulse 98. -
Is dated.

" 16 Dec 16/92. Was quiet and rested well last night, sleeping 8 hours. 9 Am. P. 76.

" 17 Dec 17/92. Again passed a quiet, restful night, sleeping 8 hours. Was today visited by his boy

" 19 Dec 19/92. For the past 2 nights has been perfectly quiet. Has rested well, & slept well. -
For several days past, has been quiet, orderly & well-behaved. Talking quite freely & calmly and Coherently. Has realized where he is. Wide-awake; observing surroundings. Has not given
& pression to delusions until today, when he gave expression to the delusion that this Institution was run by a certain order or Fraternity & expressed a desire to join it.
Has permitted to go with his wife, who purposes to take him to his home in Wyoming

Discharged May 8th '93.

Personal and Medical History of William J. Abbott

From page 376.

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3938.
1893

MEDICAL NOTES IN THE CASE OF William J. Abbott

1893

MONTH	DAY	R.	PULS.	NOTES BY NURSE	NOTES BY PHYSICIAN.
Aug	19	7	82	Gave bath	
		5	70	Takes a reasonable amount of nourishment	
	20	7	92	Chiefly egg nog	
				Weight 124 lbs	
	21	7	84	Bowels inactive	
		5	72		
	22	7	80		
		5	80	Continually pressing urine in bed	
	23	7	84	Bowels inactive	
		6	76		
	24	7	78		
				Bowels move freely	
	25	7	70	Gave bath	
		5	70		
				Gave bath	
				Has twitching of fields	
				Answers before	
				appetite good	
	26	7	76	Bowels moved	
		5	70	Slept nightly from 9 to 12	
				on an average of 1 to 2 hours	
	27	7	88		
		5	80		
				Bowels move & urinating	
	28	7	74	Looks pale on finger &	
		5	70	Pulse at present very	
				weak	
	29	7	70	Appears much better than	
		5	70	yesterday	
	30	7	74	Gave bath	
		5	70		
				Very restless and noisy	
	31	7	74		
		5	78		
				Has twitching of feet lasting	
Sept	1	7	94	about 2 minutes	
		5	80		
				Gave bath	
	2	7	92		
		5	76		
				Coughing more than	
	3	7	76	usual	
	4	7	96	Slept nightly from 7 to 12	
		5	90	average 1 1/2 hours 2 nights	
				not sleeping any	
	5	7	90		
		5	86		

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" 17 Dec 6/93. Restless & noisy, the greater part of the day. Dec 7/93. No further improvement
(carried to 1621)

Personal and Medical History of Paul Johns

1892 This man was brought here by J.E. Mullaney, and H...
Habits are good. Cause of this attack is sunstroke ...
bodily disorder. This attack was announced ...
himself to be "The Terror of the West". After ...
allowed his liberty. He went to a fire ...
first attacks. Had one, 3 years ago ...
days. Insanity is now manifest ...
June others. Ketosuria ...
disease, not Kn... ...
-stroke occu...

Dec 9 Dec ... ...ping last 2 hours. Am. Was ...
...ulty; & pressing delusions, at ...
...name & address. Pulse 90.
...gracious; sleeping 5 hours. Am. Pulse 105
... and destructive, and slept none at all. Today, ...
...oscin.
...ight and restless, sleeping 4 hours. Dr. was ... today.
...y all night, last night. Is very excited and noisy today. —
...en every 2 hours.
" 13 ...oisy and restless for 5 hours last night, sleeping 4 hours. 9 Am. Pulse 98. —
...ed.
" 16 Dec ... Was quiet and rested well last night, sleeping 8 hours. 9 Am. P. 76.
" 17 Dec 17/92. Again passed a quiet, restful night, sleeping 8 hours. Was today visited by his wife
" 19 Dec 19/92. For the past 2 nights has been perfectly quiet. Has rested well, & slept well. —
For several days past, has been quiet, orderly & well-behaved. Talking quite freely & calmly and Coherently. Has realized when he is, fide-awake; observing surroundings. Has not given
& pressin to delusions until today, when he gave expression to the delusion that this Institution was run by a certain order or Fraternity & expressed a desire to go in it.
Was permitted to go with his wife, who purposes to take him to his home in Wyoming

Discharged May 8th '93.

Personal and Medical History of William J. Abbott

(Now Page 376.)

...d. Pulse is
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...spoken of — moving —
...at times. Bed sores about the same, slightly improved.
Dec 6/93. Restless & noisy, the greater part of the day. Dec 7/93. No further improvement
(Carried to 376)

CLINICAL NOTES IN THE CASE OF William J. Abbott

1893

MO:	DA:	TP.	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
Aug	1	7	72			Gave bath.	
		5	74			Pulse appears reasonable and	
						want of nourishment.	
	2	7	82			Chiefly egg nog.	
		5	86				
	3	7	68			Weight 74 lbs.	
		5	84				
	4	7	80			Bowels active	
		6	78				
	5	7	76			Continually passing	
		6	86			urine in bed.	
	6	7	70			Bowels active.	
		5	73				
	7	7	78			Bowels moved freely.	
		6	70			Gave bath.	
	8	7	68			Gave bath.	
		5	88				
	9	7	74			Has eaten nothing solid.	
		5	102			Same as before.	
						Appetite good.	
						Bowels moved.	
	10	7	98			Slept nightly from 8 to 12	
		5	84			in an average of 1 to 2 hours	
	11	7	80			Bowels active & fluctuating	
		6	84			looks Pale on the upper	
						Cheek at present time	
						appears to better than	
	12	7	76			yesterday.	
		6				Gave bath.	
	13	7	84				
	14	7	80			Very restless and noisy.	
		5	76				
	15	7	86			Had twitching spell lasting	
		5	74			about 2 minutes	
						Gave bath.	
	16	7	78				
		5	74				
	17	7	76			Coughing more than	
		5	78			usual.	
	18	7	86			Slept nightly from 10 to 12	
		5	76			average 1 hours 2 nights	
						not sleeping any.	

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Personal and Medical History of William J. Abbott

from page 376.

1893
Aug 11 to have "twitching spells", as above noted. Aug 11/93. Has been vomiting; looks pale & haggard. Pulse is
" 12/14 also very weak. Aug 17/93. Appears somewhat better today. Aug 14/93. Is very restless and noisy.
" 15/17 Aug 15/93. Had a twitching spell, lasting about 2 minutes, today. Aug 17/93. Is coughing, today,
" 18 more than usual. Aug 18/93. Rest & sleep at night continue about as last described. For 2 nights
this month, not sleeping any. Appetite continues good, but bowels are irregular & constipated, at times
19/21 (See Clinical record attached). Aug 19/93. Talking & very restless. Aug 21/93. Has still those "twitching
spells". Appetite continues good; Bowels in fairly good condition. Passes urine in bed, continually.
" 24/5 Aug 24/93. Very restless & talkative. Visited by mother, today. Aug 25/93. Appears somewhat brighter, of late. Eyes
" 26 are red & inflamed; back covered with red pimples caused from his passing urine in bed. Aug 26/93. Very restless,
" 27/29 and destructive, today. Aug 27/93. Mother again visited him, today. Aug 29/93. Again visited by mother,
" 31 yesterday & today. Aug 31/93. Since last noted, rest & sleep at night have been much broken & disturbed,
patient only sleeping from 1 to 3 hours, nightly. Bowels have been irregular. He has been quite often
restless by day. At times, also destructive.
Sep 5/9 Sept 6/93. Bed-sore is progressing. Sep 9/93. Back is becoming quite sore. During visit is very
" 15 restless while his mother is with him. Sep 16/93. Bed-sore does not improve any. Has also some
" 18 swelling in left arm. Very restless & noisy, at times. Sep 18/93. Bed-sore keeps about the same; arm
" 23/24 is improving. Sep 23/93. Bed-sore doing fairly well; arm much better. Sep 24/93. Of late, is very noisy, &
" 27 talking almost all the time. Visited by mother nearly every day. Sep 27/93. Very noisy; continually
" 30 talking. Has small blister on left heel. Sep 30/93. Has been sleeping poorly this month, only from 1 to 2 or 3 hours
Oct 3 each night. Otherwise, continues as above-described. Oct 3/93. Passes his water, still, in bed. Takes
" 5 what nourishment is given him. Bed-sore is doing nicely. Oct 5/93. Bowels are not in very good
" 8 condition: passages generally lumpy & quite hard. Oct 8/93. Patient is now quiet, of late. Bed-sore
" 16 is doing well. He has been visited every other day, since 1st visit, by his mother. Oct 16/93. Bed-sore
" 18 keeps about the same. Very noisy & restless this afternoon. Oct 18/93. Is destructive today.
" 31 Oct 31/93. During past 4 weeks, patient has continued rest & sleep as poorly as in the past.
He has been restless & noisy quite often, by day: very talkative at times: continually throwing his
clothes off & scratching himself. Answers all questions asked him quite promptly. Bed-sore improving
(see attached clinical records of nurse).
Nov 1 Nov 1/93. Weight 73 pounds (Continues to lose in flesh). Takes what nourishment is
" 7/8 given him. Is restless and noisy, at times. Nov 7/93. Has a sore on his heel. Nov 8/93. Is
" 8 noisy & destructive today. Bowels somewhat constipated. Nov 8/93. Bed-sore improving.
" 16 Nov 16/93. Takes food offered him: at times, has difficulty in swallowing. Bowels constipated.
" 19 Noisy & destructive, quite frequently. Nov 19/93. Is continually picking his clothing and
" 23/27 scratching himself. Nov 23/93. Has a beginning bed sore, at each hip. Nov 27/93. Sores dressed
" 29 each morning & evening; are doing nicely. Nov 27/93. Appetite quite good. Patient sleeps
some during the day. Nov 29/93. Bed-sores now forming at back.
Dec 1/3 Dec 1/93. Has also a small sore, on face. Dec 1/93. Noisy & restless the greater part of morning.
" 3/6 Dec 3/93. Has been noisy & restless, almost all day. Dec 4/93. Has spells of choking-
Respiration hard & rapid, at times. Bed sores about the same (slightly improved).
" 6/7 Dec 6/93. Restless & noisy, the greater part of the day. Dec 7/93. No further improvement

(carried to 762)

Personal and Medical History of Jens Johnson

alias Jens Jeiling Jensen

Whole No. 3203.

Residence, 1202 Dartmouth Ave, Minneapolis

Date Admission, 12th December 1892.

Admitted by, Dr. Phelps Hour, 7 Pm

How Sent, J.R. Corrigan Jof P, Hennepin County

Sex, Male

Age, 34 years

Civil Condition, Married

Children, Three

Age Youngest Child,

Occupation, Moulder

Degree Education,

Profession Religion, Not a church-member

Habits, Intemperate

Nativity, Denmark

Physicians Committing, A. N. Acton and W. J. Byrnes

Correspondents, Soran Peterson
1202 Dartmouth Ave, Minneapolis

No. for Year, 115.

Insane Relatives, — not hereditary as known

Cause Exciting, not known

Cause Predisposing, not stated

Form, Mania — Acute

Accompanying Bodily Disorder, No

Suicidal or Not, Not

Date of this Attack, Abnt 2 weeks ago; (4 previously)

Duration, " "

No. of Attack, not the 1st (at various times in last 5 years)

No. of Admissions,

Age First Attack, 29. probably

Time of Leaving, Feb. 17 '93

Time in Hospital, 2 mos. 5 ds.

Result, Recovered

EXAMINATION ON ADMISSION.

= Exd by Dr. Moore - Jany 7/93 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, seems clear; tho' some hesitation in af of not understanding English

Quick or Sluggish, quite quick

MEMORY:

Past Events, seems good

Recent Events, Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, quite Correct

REASONING POWER:

Ordinary Subjects,

Own Mental State, Thinks he is all right now - was sick before he came here - but well when he came

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has had some drinking habit - Could not "stand much" he says - "was on spree" got crack in head" - Went to bed for 8 days took up - he was all right when he came here. When sick says he "saw some nice things on the floor" - Don't know what they were. Denies having ever torn up bed clothes as stated in Commitment papers. Says he laid in bed quietly. Also denies ever being over religious, as stated -

EMOTIONAL STATE:

Normal, Calm, to some extent

Indifferent,

Exalted, Somewhat

Depressed,

DELUSIONS:

Systematized or Not, None detected

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None detected now.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Talks only when questioned.

Personal and Medical History of Jens Johnson

alias Jens Jeiling Jensen

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6½ in WEIGHT, 148 lbs (used to weigh 155 lbs) NUTRITION, Seems fair

WOUNDS OR ABNORMALITIES, Slight scar on chin: abnormalities, probably none.

TONGUE, Tremors, None perceptible Coatings, none Promptness Movement, Prompt

PUPILS, Equality, Equal Size, Slightly dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Seems good

COORDINATION, Arms, Finger to nose, Eyes shut, Good.

Legs, Standing in foot. good. Standing, Eyes shut, good. Turning quickly, does well.

TREMORS, Hands, Slight of fingers Tongue, None perceptible

Facial Muscles, None General,

REFLEXES, Patellar, Equal; exaggerated (about 6. Dr. P's scale) —

Other Reflexes,

ARTICULATION, Hesitating, Slurred, Foreign accent

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Seems good

LUNGS, Seem good. Girth 39 in Expansion about 1½ in

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Yes Constipated, Irregular,

APPETITE, Good, Yes Medium, Poor,

SLEEP, Good, Yes Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Sudden

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living — 60 - in old Country; seems well —

Father or Pat. Relations, Father living — 70 - in old Country — in fair health.

Brothers or Sisters, 1 brother dead - 2 broken offering; 1 claims good health — 1 sister living - in good health; 1 sister dead

Personal and Medical History of Jens Johnson.

alias Jens Jiling Jensen

NAME. Jens Johnson

DATE. 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	114 9	84		1
July 3d	1151/2	63	1½	

1892

This man was brought here by Deputy Sheriff J.E
Habits have been intemperate; as to heredity, Not known
form is Chronic, paranoyal; no accompanying
of disease were manifested by hallucinations; destroy
previously. This is not 1st attack; has had them at vari
manifested in the subject of religion. Is not disposed
destructive in habits. Has not been restrained or confi

Dec 13 Dec 13/92. Has restless for a couple of hours last night
" 14 Pulse 72. T. 99. Dec 14/92. Has quiet, restful, and slep
" 15/19 7.30 PM. Pulse 60. T. 100. Dec 15/92. Slept 8 hours last ni
quiet at night, resting and sleeping well. Pulse has be
" 27 Mornings. Dec 27/92. Has today transferred from B2 to
1893 Jan 3/ Jan 3/93. Wt 114 lbs. Pulse 84. Jan 11/93. Has contin
and sleeping well. By day, has been up daily; ha
an person; has been quiet and well-behaved; has walk
his fellow-patients quietly. Has been pleasant in his
them greetings and questions, apparently desiring to
and talk English well. Has, at all times, claim
to go home. Has been free from apparent excitem
delusions have been detected so far. Health i
" 27 Jan 27/93. Has been obstinately constipated for pas
Febry Febry 14/93. Uniformly quiet, resting & sleeping well
and well-behaved. Converses fairly freely with the
of timidity in conversation, owing probably to his im
and seems to take an interest in his surroundin
days he feels perfectly well & is anxious to go home. Is in good bodily health.
" 17 Febry 17/93. Went home to day, Alone.

Discharged May 8th '93.

Personal and Medical History of John Schroeger Jr.

from page 308

May 8 Quiet 30 in C3. Is very anxious to go home. Has lost considerably & gradually in flesh & is now getting quite weak. — May 30/93. No material change in patients condition.
June 5 June 5/93. Has made a decided gain in flesh the past 4 weeks (14¼ pounds.) —
" 12 June 12/93. Slept but 4 hours last night; was quite restless when awake. Has suicidal ideas. —
" 22 June 22/93. Has been working outside at the grounds, quite well, of late. Has been very anxious to go home.
" 25 Was today put back on his ward & kept from work. June 25/93. Seems greatly changed for the better. Does some work on ward. Has given up his idea of picking locks & running away, though he is
" 26 still very anxious to get home. — June 26/93. Visited by brother. Leaved to go home. —
" 30 June 30/93. Appetite continues good. Bowels normal, at times; again they are done constipated. Works on ward & also at on the Lawn. Talks freely & quite sensibly — Wants a great many privileges & be given him; thinks he should have them.
July July 4/93. Has gained 10¼ pounds in weight in past month: Is in good Physical Health. Has been working at the horse-stables the past couple of days, but was taken & put back on the hall; the reason being fears of his escape & a letter proposing marriage to a girl he knew.
" 21 July 21/93. Has continued quiet & restful at night — by day, has also been quiet & well-behaved, With the exceptions above noted. Is in good physical condition.

Has taken home by his father today, on trial

Discharged

1894 From 228.

Martin Madden (or mead)

Feb 28 Cantt Is failing in weight; complains, of late, of not feeling well — Remains in his room, most of the time drawing pictures or reading. Sometimes, from time to time, to show his mean temper & disposition.
Mar 1/9 Mar 1/94. Wt 142 lbs — Pulse 74. Mar 19/94. Is fairly well behaved, while on the ward. Still however of a disagreeable disposition & manner. Requires to be humored a good deal, in order to be got along with. Has been working outside with the painters for some days. Habits are clean

Went away today.

Discharged

Personal and Medical History of Jens
alias Jens Je

1892

This man was brought here by Deputy Sheriff J. E[illegible]
Habits have been intemperate; acto heredity. Not known; Cause of this attac[illegible]
form is Chronic, paroxysmal; no accompanying bodily disorder or disease; first Symptoms
of disease were manifested by hallucinations; destroying bed clothes &c, about two weeks ago &
previously. This is not 1st attack; has had them at various times for last 5 years. Insanity is now
manifested in the subject of religion. Is not disposed to injure others; not suicidal; is filthy &
destructive in habits. Has not been restrained or confined. Has not been under medical treatment.

Dec/13 Dec/13/92. Has restless for a couple of hours last night, sleeping 6 hours. Am. Pulse 68. Tº/100. 130 Pm
" 14 Pulse 72. Tº/99. Dec/14/92. Has quiet, restful, and slept 8 hours last night. Bo Am. Pulse 66. Tº/98.8
" 15/19 730 Pm. Pulse 60. Tº/100. Dec/15/92. Slept 8 hours last night. Dec/19/92. Has been uniformly
quiet at night, resting and sleeping well. Pulse has been 72. 74. 60 68 and 72, in the past and present
" 27 mornings. Dec 27/92. Has today transferred from B² to B¹. —
1893 Jan 3/ Jan 3/93. Wt 149 pds. Pulse 84. Jan 14/93. Has continued uniformly quiet at night, resting
and sleeping well. By day, has been up daily; has been clean, very tidy; has taken care of his
own person; has been quiet and well-behaved; has walked about quite freely, conversing with
his fellow-patients quietly. Has been pleasant in his relations with the officers, answering
their greetings and questions, apparently desiring to converse, but being unable to understand
and talk English well. Has, at all times, claimed that he felt well & has been desirous
to go home. Has been free from apparent excitement and depression and no definite
delusions have been detected so far. Health is good.
" 27 Jan 27/93. Has been obstinately constipated for past 2 days. Has given medicine.
Febr 4 Febr 4/93. Uniformly quiet, resting & sleeping well at night. By day, has continued clean, tidy
and well-behaved. Converses fairly freely with the officers & his fellow patients, but has an air
of timidity in conversation, owing probably to his imperfect knowledge of English. Plays games &
reads & seems to take an interest in his surroundings. Writes occasional letter to his relatives.
Says he feels perfectly well & is anxious to go home. Has good bodily health.
" 17 Febr 7/93. Went home to day, Alone.

Discharged May 8th '93.

Personal and Medical History of John Schrunger Jr.

From page 308.

[illegible] in Cº. Is very anxious to go home. Has lost considerably & gradually in flesh & is now getting
April 30 quite weak. — May 30/93. No material change in patient's condition.
June 5 June 5/93. Has made a decided gain in flesh the past 4 weeks (14¼ pounds.) —
" 12 June 12/93. Slept but 4 hours last night; was quite restless when awake. Has suicidal ideas. —
" 22 June 22/93. Has been working outside on the grounds, quite well, of late. Has been very anxious to go home.
" 28 Was today put back on his ward & kept from work. June 28/93. Seems greatly changed for the better.
Does some work on ward. Has given up his idea of picking locks & running away, though he is
" 26 still very anxious to get home. — June 26/93. Visited by brother. Ceased to go home. —
" 30 June 30/93. Appetite continues good. Bowels normal, at times; again they are now constipated.
Works on ward & also on the Lawn. Talks freely & quite sensibly — Wants a great many
privileges & be given him: thinks he should have them.
July Sept July 4/93. Has gained 10¼ pounds in weight in past month: Is in good Physical health.
Has been working at the horse-stables the past couple of days, but was taken & put back on the
hall; the reason being fears of his escape & a letter proposing marriage to a girl he knew.
" 21 July 21/93. Has continued quiet & restful at night — By day, has also been quiet & well-behaved,
with the exceptions above noted. Is in good Physical condition.
Has taken home by his father today, on trial

— Discharged —

Martin Madden (or mead)

1894 Feb 24 From 228.
Is failing in weight; complains, of late, of not feeling well — Remains in his room, most of
the time, drawing pictures or reading. Continues, from time to time, to show his mean temper & disposition.
Mar 1/94 Mar 1/94. Wt 142 pds. Pulse 74. Mar 19/94. Is fairly well behaved, while on the ward: Still
however of a disagreeable disposition & manner. Requires to be humored a good deal, in order to
be got along with. Has been working outside with the painters for some days. Habits are clean
Went away today.

Discharged

Whole No. 3205
Residence, Almon, Winona County, Minn.
Date Admission, 13th December 1892.
Admitted by, Dr. Phelps Hour, 7 PM.
How Sent, W. L. Buck, Jof P., Winona County
Sex, Male
Age, 29 years
Civil Condition, Single
Children, —
Age Youngest Child,
Occupation, Farmer
Degree Education,
Profession Religion, Roh a church member
Habits, Good
Nativity, Minnesota
Physicians Committing, J. B. McGaughey and D B. Pritchard
Correspondents, John Schoniger Sr. Almon, Winona Co. Minn

No. for Year, 117
Insane Relatives, One sister
Cause Exciting, Prospective loss of property
Cause Predisposing, Heredity possibly
Form, Melancholia — acute
Accompanying Bodily Disorder, No, except eczema
Suicidal or Not, Yes; acute — propensity now active
Date of this Attack, 3 weeks ago
Duration, 3 weeks
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 29 years
Time of Leaving, July 21st '93.
Time in Hospital, 7 ms. 8 ds.
Result, Recovered.

EXAMINATION ON ADMISSION.

Exd by Dr. Moore, Jany 7/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Seems clear
Quick or Sluggish, quite active

MEMORY:
Past Events, Seems good
Recent Events, Seems good
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct

REASONING POWER:
Ordinary Subjects, Seems good
Own Mental State, Fairly good, but thinks he could take care
Special Subjects, Of himself if he were to go on the farm

EMOTIONAL STATE:
Normal, Calm,
Indifferent, somewhat
Exalted,
Depressed, slightly

DELUSIONS:
Systematized or Not, None detected
Special Subjects,
Transitory or Not,

HALLUCINATIONS: None detected

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Talks in answer to questions

GENERAL DESCRIPTIVE REMARKS:

Says that in looking at an object on a bright day seems to "see double" — also, dizzy way in hall — Admits he took aconite — did not know what he was doing at the time — Thinks he took about an ounce of the tincture. Had syphilis 6 years ago, took medicine for about a year past. Says he has not slept well for 2 months or so: says, is not feeling as well as when he first came to this Hospital. Thinks if he got worse that he would not have such good care as he is given now in safe of the Large No. of Patients here.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11 in WEIGHT, 158 lbs. (has weighed 180 lbs) NUTRITION, below normal.
WOUNDS OR ABNORMALITIES, probably none —
TONGUE, Tremors, Slight Coatings, None Promptness Movement, fairly prompt
PUPILS, Equality, unequal; right smaller Size, dilated
Response Light, Yes Accommodation, Yes
SIGHT, Says "not good: has double-vision" —
HEARING, Good
COORDINATION, Arms, Fingei to nose, eyes shut, fairly good.
Legs, Standing a foot, quite unsteady. Standing, eyes shut, sways unsteadily. Turning quickly — Does heel station —
TREMORS, Hands, None Tongue, Slight
Facial Muscles, None General,
REFLEXES, Patellar, equal — both absent.
Other Reflexes,
ARTICULATION, Hesitating, Slurred, good.
FACIAL EXPRESSION, about normal
SENSIBILITY,
HEART, Good
LUNGS, good
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, Constipated, somewhat Irregular,
APPETITE, Good, Yes Medium, Poor,
SLEEP, Good, Poor, Says he does not sleep well. Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, probably sudden

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother dead — of cancer of womb — about 65.
Father or Pat. Relations, Father living — 67 — fair health —
Brothers or Sisters, 3 brothers living — apparently in good health — Ascita insane — at this hospital —

1892 This man was brought here by Sheriff Braley, with following history. Is a farmer; of good habits; insanity not hereditary, except in one instance, that of mesister; supposed cause of this attack is prospective loss of property; fears loss of land for not strictly complying with laws relating to tru-clamis; form of attack is acute, depressed; no accompanying bodily disease or disease except eczema; first symptoms of disease were manifested 3 weeks ago, by depression of spirits, sleeplessness & fear of loss of property. This is 1st attack. Insanity is now manifested in financial subjects. Is constantly depressed; general symptoms of melancholia. Has attempted suicide by aconite. Propensity now active. Not disposed to filthy or destructive habits. Has not been restrained or confined. Has been under medical treatment. Sedatives given on 2 or 3 occasions; some rest secured as the only result.

(Note Dr T.) States had syphilis (a chancre) 6 years ago, and thinks now he gives syphilis to family by using same towel &c; also that he has sores now; (the above account looks rather doubtful). —

Dec On admission was quiet and put on B2.

" 11 Has restless for 3 hours last night, sleeping 6 hours. AM. Ate no breakfast. Says "Let me rest and I will Eat". 8.30 AM. Pulse 104. Te 99. 7.30 PM. Pulse 100. Te 99.6. Is constipated.

" 15 Dec 15/92. Has restless for 6 hours last night, sleeping but 3 hours. AM. Pulse 92. Te 100. Says "he is in pretty bad shape". When asked what was the matter replied "there is a sight of matter down here" (pointing to his abdomen). Says he has pox. Also says he had a sore on his penis about 6 years ago. There is an indistinct scar on penis. Bones ache, especially in legs. Pupils are markedly unequal, the left dilated, right about normal. 7.30 PM. Pulse 86. Te 98.6.

" 16/17 Dec 16/92. Slept 8 hours last night. 9.30 am. Pulse 88. Dec 17/92. Got up last night, wanting to dress, saying "they (the patients around him) were all going to get up & raise hell". Slept but 5 hours. 8.30 am. Pulse 88. Dec 18/92. Rested well, sleeping 8 hours last night. —

" 19 Dec 19/92. Slightly restless last night, sleeping 7 hours. 8.30 am. Pulse 76. Sees double, when looking at an object at any little distance. Dec 27/92. Is somewhat restless very 3d or 4th night, sleeping rather poorly; the balance of the nights, sleeps well. Pulse has been 92. 100. 80. 88. 106. 108. [illegible] in the past 7 mornings respectively & is 120 this morning. Patient is up and seems about as usual. —

1893

Jan 3 Jan 3/93. Lies quietly and appears to rest and sleep well, but says he sleeps poorly. Ht 167 pds

" 10 Pulse has been 92. 90. 102. 93. 88. 97 & 108 in the past 6 and present mornings. Jan 10/93. Is uniformly quiet at night, and appears to rest and sleep well. Pulse has been 98. [illegible] 94. 98. 97. 88. [illegible] in the past 6 and present mornings. Complains to day of a bad headache & pain in his stomach. Bowels

" 15 are sluggish. Jan 15/93. Complains of a pain in his stomach and says he is constipated. Was visited

" 16 on 6th inst by his sisters. Has a sister here always a patient. Jan 16/92 Continues quiet at night. Is almost never restless and seems to sleep well. Has been uniformly quiet & well-behaved. Clean, tidy & able to attend to his own personal wants & care. Has been up & around daily. Has taken food well since the first day. Bowels have been constipated. Complains of loss of head ache & usually of a pain in the stomach & of feeling ill. At first was very much agitated, restless and fearful of harm; has grown calmer and less fearful. Still, however, always talks gloomily & complains of ill-feeling. Talks quite freely when approached.

1893

NAME. John Schonger Jr. In undercloathing *

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	167	108	.....	.....
Feby 3d	168 1/2	107	1	.....
* Mar 2d	159	82	3	3 (total)
† Apl 4th	148 1/2	101	.....	.....
" 11th	150	—	.....	.....
" 18th	144 1/2	—	.....	5 1/2
" 20th	140	—	.....	4 1/2
May 3d	141	91	1	.....
June 1st	135 1/2	.....	11 1/2	.....
July 4th	125 1/2	.....	10	.....

ed this morning. 11 Am. Pulse 84. Is constipated; has visited today by his father & friend.

Am. Has a delusion that he is going to be held down by a must not move, and in that way he will soon die. He also fears ess what they are, but says that he must cheer up. He ay by his sisters. Feb 16/93. Uniformly quiet, apparently l quiet, clean, tidy and well-behaved by day. Occasionally . Now above note it will be seen he still holds delusions; very much so. Bodily health seems good.

y, probably spoke now, and showed a tendency to depression day, even "Yes or no" failed. Was up & about. Yesterday "Good morning" & seemed quite cheerful. Today, is in . March 2/93. Pain persists & is distributed a little cause. March 3/93. Spots of redness appeared on inside nation — poulticed. March 4/93. Pain increasing to head. March 6/93. Pain is severe as to cause opium. T(e) (twice taken) has not been over 99.5. g freely. Was today visited by his sisters. — for a time, has gradually lessened until it is now ing well. March 10/93. Is up today. Mar 13/93. Is March 16/93 Has been in bed a good deal the past ne. Arm is almost healed but leaves discoloration ous vein. March 25/93. Is up the greater part x ble. Inclined to be depressed. Talks some, however, in answer to questions. Is anxious to go home. Pupils unequal, loosely. Ipation Specific treatment of Iodides & mercury.

Apl 2 Apl 2/93. Is in bed this morning complaining of constipation. Ate little dinner, but no supper.

" 3/14 Vomited. Apl 3/93. Jumped into a pond, attempting to drown himself, today. Apl 14/93. Has

" 18 refused a great many meals. Eating very poorly, for 2 weeks past. Apl 18/93. Quiet, somewhat restless & sleepless at night. Treating a triple bottle but is still very much depressed. Is on potassium Iodide, increasing doses; now taking about 40 grains, 3 times a day & is receiving injections of blue ointment.

May 13 May 1/93. Declines to give same or sample of urine (for testing). May 13/93. Yesterday unlocked a screen

" 16 with a wire, and, again, today. Has moved to C3, (where he is now kept in day time). May 16/93. Was

" 18 visited by sister today. May 18/93. Sleeps each night, has been quite good: 7 to 8 hours; though he is inclined to be restless for a while after retiring. During the latter part of April, appetite was very poor, patient occasionally refusing meals. Eggnog was added to his diet & this he also, after a time, refused. While in the ward, sits quietly on a bench, apart from others; seems depressed, at times, very much so. Talks when spoken to. Is fairly active mentally. In day time, is still kept under close watch

(carried to 309)

1892 This man w
good habits; his
attack is proper
relating to tru-
or disease except co
of spirits, sleeplessn
an financial subject
attempted suicide by ac
He has not been restrained
3 occasions; 2 once rest seen
(Note Dr P) States had syphilis (a
Same towel &c; also that he has sores now; (the above account looks rather doubtful). —

Dec 9 On admission was quiet and put on B2.
" 11 Has restless for 3 hours last night, Sleeping 6 hours. AM. Ate no breakfast. Says "Let me rest and I will Eat". 8.30 AM. Pulse 102. Te 99. 7.30 PM. Pulse 100 Te 99.5. Is constipated.
" 15 Dec 15/92. Has restless for 6 hours last night, Sleeping but 3 hours. AM. Pulse 92. Te 100. Says "he is in pretty bad Shape". When asked what was the matter replied "there is a sight of matter down here" (pointing to his abdomen). Says he has for. Also says he had a sore on his penis about 6 years ago. There is an indistinct scar on penis. Bones ache, especially in legs. Pupils are markedly unequal, the left dilated, right about normal. 7.30 PM. Pulse 86. Te 98.6.
" 16/17 Dec 16/92. Slept 8 hours last night. 9.30 am. Pulse 88. Dec 17/92. Got up last night, wanting to dress, saying "they (the patients around him) were all going to get up & raise hell". Slept
" 18 but 5 hours. 8.30 am. Pulse 88. Dec 18/92. Rested well, sleeping 8 hours last night. —
" 19 Dec 19/92. Slightly restless last night, sleeping 7 hours. 8.30 am. Pulse 76. Sees double, when
" 27 looking at an object at any little distance. Dec 27/92. Is somewhat restless very 3d or 4th night, sleeping rather poorly; the balance of the nights, sleeps well. Pulse has been 92. 100. 80. 88. 106. 108. last 7 in the past 7 mornings respectively & is 120 this morning. Patient is up and

1893 seems about as usual. ——
Jan 3 Jan 3/93. Lies quietly and appears to rest and sleep well, but says he sleeps poorly. Ht 167 pds
" 10 Pulse has been 92. 90. 102. 92. 88. 97 & 108 in the past 6 and present mornings. Jan 10/93. Is uniformly quiet at night, and appears to rest and sleep well. Pulse has been 98. 94. 98. 97. 88. last in the past 6 and present mornings. Complains to day of a bad headache & pain in his stomach. Bowels
" 15 are sluggish. Jan 15/93. Complains of a pain in his stomach and says he is constipated. Was visited
" 16 on 6th inst by his sisters. Has a sister here always a patient. Jan 16/92. Continues quiet at night. Is almost never restless and seems to sleep well. Has been uniformly quiet & well-behaved. Clean, tidy & able to attend to his own personal wants & care. Has been up & around daily. Has taken food well since the first day. Bowels have been constipated. Complains often of headache & usually of a pain in the stomach & of feeling ill. At first was very much agitated, restless and fearful of harm; has grown calmer and less fearful. Still, however, always talks gloomily & complains of ill-feeling. Talks quite freely when approached.

Jan 18 Jan 18/93. 8.30 Am. Pulse 98. Tg 99. Says he is bed this morning. 11 Am. Pulse 84. Is constipated; has
" 20 headache & general pains. Jan 20/93. Visited today by his father & friend.
Feb 3/4 Feb 3/93. Ht 168 pds. Pulse 102. Feb 4/93. Am. Has a delusion that he is going to be held down by a couple of large dumb-bells, so that he cannot move, and in that way he will soon die. He also fears a number of other things. Does not express what they are but says that he cannot cheer up. He
" 10/16 is quite depressed. Feb 10/93. Visited today by his sisters. Feb 16/93. Uniformly quiet, apparently resting and sleeping well at night. Still quiet, clean, tidy and well-behaved by day. Occasionally complains of headache and constipation. Now above note it will be seen he still holds delusions; Continues gloomy & depressed, at times very much so. Bodily health seems good.
" 25 Febr 25/93. Visited today by friends.
Mar 1 March 1/93. During last week in February, probably spoke now, and showed a tendency to depression and reticence - all efforts to get him to say even "Yes or no" failed. Was up & about. Yesterday brightened up & approached the Dr with "Good Morning" & seemed quite cheerful. Today, is in
" 2 bed complaining of pain in his hip. March 2/93. Pain persists & is distributed a little
" 3 farther down the leg; no detectable cause. March 3/93. Spots of redness appeared on inside
" 4 of thigh; looks like some deep inflammation - poultriced. March 4/93. Pain increasing.
" 5/6 March 5/93. Inflamed part is coming to a head. March 6/93. Pain so severe as to cause crying out. Gets ease & sleeps only on opium. Te (twice taken) has not been over 99.5. Sore has ruptured & is discharging freely. Was today visited by his sisters. —
" 9 March 9/93. Still in bed. Pain severe for a time, has gradually lessened until it is now
" 10/13 slight; sore discharges freely & is doing well. March 10/93. Up to day. Mar 13/93. Is
" 16 lying in bed; sore still bothers him. March 16/93. Has been in bed a good deal the past few days: leg somewhat painful & lame. Sore is almost healed but leaves discoloration
" 25 and scar. Lies over the long saphenous vein. March 25/93. Up the greater part of the time. Leg gives but little trouble. Inclined to be depressed. Talks some, however, in answer to questions. Desirous to go home. Pupils unequal, heavily
Spoken Specific treatment of Iodides & mercury.
Apl 2 Apl 2/93. Is in bed this morning complaining of constipation. Ate little dinner, but no supper.
" 3/14 Vomited. Apl 3/93. Jumped into a pond, attempting to drown himself, today. Apl 14/93. Has
" 18 refused a great many meals. Eating very poorly, for 2 weeks past. Apl 18/93. Quiet, somewhat restless & sleepless at night. Seating a trifle better but is still very much depressed. Is on potassium Iodide, increasing doses, now taking about 40 grains, 3 times a day & is receiving
injections of blue ointment.
May 1/3 May 1/93. Declines to give same sample of urine (for testing). May 13/93. Yesterday unlocked a screen
" 16 with a wire, and, again, today. Has moved to C3, (where he is now kept in day time). May 16/93. Was
" 18 visited by sister today. May 18/93. Sleeps each night, has been quite good: 7 to 8 hours; though he is inclined to be restless for a while after retiring. During the latter part of April, appetite was very poor, patient occasionally refusing meals. Eggnog was added to his diet & this he also, after a time, refused. While in the yard, sits quietly on a bench, apart from others; seems depressed, at times, very much so. Talks when spoken to. Is fairly active mentally. In day time, is still kept under close watch

(carried to 304)

* Mother's address 375 Herkimer Street Buffalo N.Y.

Whole No. 3207.

No. for Year, 119.

Residence, Farmington, Minn, for last 5 years

Date Admission, 15th December 1897.

Admitted by, D. Linton Phelps Hour, 2 P.M.

How Sent, E. H. Pye, Court Commr. A

Sex, Male

Age, 40

Civil Condition, Single

Children, —

Age Youngest Child,

Occupation, Laboring-man

Degree Education,

Profession Religion, Not a Church-member

Habits, Has been a hard-drinker of late y

Nativity, New York

Physicians Committing, E. E. Brubaker & A. J. Schmidt

* Correspondents, Chas. H. VanBuren, ~~130 Olive Street~~ (Brother) St Louis, Mo



Insane Relatives, none, as far as Known; (ask Hereditary, not known)

Cause Exciting, Excessive drinking + dissipation; Morphine + opium habit

disposing, Intemperance probably.

Mania-Acute

ying Bodily Disorder, No

Not, Yes. + Propensity now active

is Attack, about Dec 1st

about 2 weeks

ack, not Known

issions,

Attack, not Stated

aving, Apr. 26. 1900

spital,

Transferred to Hastings.

J.K.Fm

* Mother's name Julia Vanderveer (Vanderveer on mother's)

EXAMINATION ON ADMISSION.

Exd by D. Baker Jany 10/93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear at present

Quick or Sluggish, quite active

MEMORY:

Past Events, } probably fair - mind preoccupied

Recent Events, } with his own ideas —

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct - fairly -

REASONING POWER: perverted —

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not,

Special Subjects, That the Almighty is going to destroy him by human agency — Someone is going to Electrocute him

Transitory or Not,

HALLUCINATIONS: ?

ILLUSIONS: ?

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free in answer to questions.

GENERAL DESCRIPTIVE REMARKS:

Has had inflammatory rheumatism - last winter - Still has the old idea that some one is going to injure him - Cannot read a newspaper without imagining that articles in it have reference to him and his case. Thinks that Almighty God is going to destroy him, but how he will select for that purpose he does not know and cannot say; has had the habit of drinking a good deal. Has used morphine. Says, has taken what he considered as much as 3 2-grain capsules of Morphine a day time. "Stomach sick". Thought it would help his rheumatism —

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7½ in. WEIGHT, 144 lbs. NUTRITION, fair

WOUNDS OR ABNORMALITIES, Wounds of scrotum; of testicles (abnormalities?)

TONGUE, Tremors, Considerable fine Coatings, Slight Promptness Movement, Prompt

PUPILS, Equality, Equal Size, about normal

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Left ear somewhat impaired; right good.

COORDINATION, Arms, Finger to nose, Eyes shut, good.

Legs, Standing unfoot, well; Standing, eyes shut, sways slightly.

TREMORS, Hands, Some Tongue, Some

Facial Muscles, General,

REFLEXES, Patellar, Equal; slightly impaired —

Other Reflexes,

ARTICULATION, Hesitating, Prompt Slurred, distinct

FACIAL EXPRESSION, about normal

SENSIBILITY, Sense about normal

HEART, Sounds normal

LUNGS, Girth 36½ in Expansion 2½ in. Lungs good.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Yes Constipated, Irregular,

APPETITE, Good, Yes Medium, Poor,

SLEEP, Good, Was Poor, medium now. Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, probably sudden

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother was living when here was. Claims fair health.

Father or Pat. Relations, Father dead

Brothers or Sisters, one brother living; health good so far as known—

one sister " " " " " Has also some ½ brothers - all living—

1892

This patient was brought here by H. E. Hibbard, Deputy, and Peter Pitts, with following history. Has been a hard-drinker of late years; supposed cause of this attack is excessive drinking & dissipation, morphine & opium habit; form is paroxysmal; no accompanying bodily disorder or disease; he wandered from home Dec 1st, & came to Northfield; tried to commit suicide by cutting his throat, and finally castrated himself with broken plate; not known as to no. of attack; insanity is now manifested in that he thinks he is about to be destroyed by some one. There is shown no disposition to injure others. Attempted suicide, as above; propensity still active. Is not filthy or destructive. Has been confined in jail since Dec 2d. Has been under medical treatment only for mutilating himself, as above stated.

Dec On admission, was put upon B3 and put to bed. Pm. Lies quietly in bed. Pulse 63. Says "God spare my life"; "Are you going to burn me up? or will any body or God burn me up?" — Has a wounded
" 16 of the scrotum. 7.30 Pm. Pulse 74. Te 99.6. Dec 16/92. Has quiet, but restless, sleeping 2 hours,
" 17 last night. 9.30 am. Pulse 68. Te 99.4. 5.30 Pm. Pulse 66. Te 99. Dec 17/92. Quiet, but restless,
and sleeping but 4 hours, last night. 8.30 Am. Pulse 62. Te 99.2. 7 Pm. Pulse 70. Te 99.6. Still
" 18 keeps his bed. Dec 18/92. Has restless all night, sleeping none. 8 Am. " 66 " 99. Is
" 19 constipated. Testicle is dressed daily. Dec 19/92. Restless all night, sleeping none at all,
1893 last night. 8.30 Am. Pulse 68.
Jan 3 Jan 3/93. Up to the night of the 28th ult, was very restless and slept almost none at night.
Has since rested and slept fairly well. Pulse has been 80. 88. 96. 104. 88. 90. 96. 100. 96. 110. 110.
103. 112. 102. 96 on the past 14 and present mornings respectively. Got up about the date of the
" 17 last note and has been up daily since. Wt today 147 pds. Jan 12/93. Pulse has been 108. 104.
" 18 106. 106. 104. 104. 102. 98. 108 on the past 8 and present mornings respectively. Jan 18/92. Is uniformly quiet at night, apparently resting and sleeping quite well. Since getting up from bed, as noted above, has been up daily about the hall; clean and tidy; quiet and well-behaved. Answers questions and greetings promptly and pleasantly. Many times daily asked the attendants & officers: "There is'nt any one going to harm me today, is there?" When asked if he really thought there was any danger, he said he could not get over the impression or feeling that there was. Took food regularly & well. Gradually began working and now works very well indeed, at the ward. Talkative. Is gaining in flesh, and the sense of impending danger seems to have less strong hold upon him.
" 21 Jan 21/93. Visited by a friend, today.
Feb 3 Feb 3/93. Wt 145 pds. Pulse 81. Quiet and restful at night, apparently. By day, is up & around,
" 18 neat, tidy and well-behaved. Apparently still holds to his delusions of fear of being harmed, though he does not now express them so often. Does some work at the ward. Bodily health is good & has made a decided gain in weight in past 4 weeks.
Mar 3 March 3/93. Is uniformly quiet & restful at night, apparently. Has made improvement in physical health: gained in mental activity & cheerfulness. Most recently, has seemed a little quieter and
" 30 more inclined to be depressed. Mar 30/93. Is constipated.
Apl 19 Apl 19/93. Recently, has refused a few meals & seemed more depressed. Has made decided gain, physically, and
" 25 marked improvement mentally, but is inclined to be depressed & gloomy, still. Apl 25/93. Eating poorly today.

NAME. H. Van Buren

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jan 5th	141	96	3	
Feb 3d	145	81	8	
Mar 7?	161	88	6	
Apl 11th	168	78	7	
" 26th	164	—		4
May 5th	166	76	2	
June 5th	150½	—		9½
July 4th	161?	—	11½	
Aug 3d	162	—	1	
Sept 8th	167	—	5	
Oct 3d	167½	100	½	

...reported as restless from while on only 2 or 3 nights, appa-
...up & about daily. Is not depressed now: smiles & is very
...ly. Appetite & health very good May 31/93. Appetite good;
...seat or in his room, most of the time, apart from his
...sed.
...past month, without apparent cause. Does not complain any-
...ks but little yet answers questions & greetings - heads
...weight. Looks good flesh. July 31/93. Sleeps well at
...food & bowels normal. Talks quite freely, at times,
...what brighter, of late.
...h. Aug 31/93. Patient does not change much, from month to month.
...Continues to increase in weight. Sep. 30/93 Appetite
...eal & condition good.
...wed. Works quite willingly in the hall.
...them addressed. Reads some, but takes no part in games.
...phone deliveries. Nov. 1.93. Wt 166½ P. 88 Nov. 8/93
...talks - reads. Physic'n good. Behavior good.
...1.93. Wt. 168. 172 P. 92. Dec 31/93 Nochango Jany 2/94 Wt 170
...ior. Behavior good. Phys'n cond. good. Seems to be in good
...1/94. Was not weighed today, but is in about usual flesh.
...s freely & rationally. Has continued to work with the painters.
...ch 26/94. Thinking he wanted a rest, today, I stopped work-
...ing with painters. March 31/94. Is about as usual. Always quiet & well-behaved. —

Apl 2 April 2/94. Wt 171 pds. Pulse 96: Commenced working again, with the painters, today.
" 30 April 30/94. Has continued with the painters, daily, working quite intelligently. Otherwise, about same
May 1/31 as usual. May 1/94. Wt 170 pds. Pulse 88. May 31/94. Quiet & well-behaved. Has "spells" when he will talk
to himself in a vulgar manner. Lacks of spirits "occasionally". Works part of time with painters.
June 1/30 Was transferred to B3 on 15th inst. July 1/94. Wt 163 pds. Pulse 87. June 30/94. No change
to note. Works on two of the time, with the painters. Seems, however, to like of this work.
July 1/31 July 1/94. Wt 162½ pds. Pulse 68. July 31/94. Quiet; well-behaved; civil & obliging. Lately,
has been working more regularly with painters. Has, still his peculiar spells, (about twice a
week). Is clean & neat in appearance. Pleasant in manner. Health is good. —
Aug 1/31 Aug 1/94. Wt 169 pds. Pulse 84. Aug 31/94. Quiet & well-behaved. At times, laughs & talks a great
Sept 1/30 deal to himself. Works daily, as usual, with the painters. Sept 3/94. Wt 155 pds. Pulse 83.
" 2/30 Sept 2/94. Kept in ward, today; would not go out this work. Sept 30/94. Has become quite noisy,
of late. Talks to himself, about all the time. Has many delusions. Seems contented here.
Oct 2/31 Oct 2/94. Wt 154½ pds. Pulse 66. Oct 31/94. Is about the same. Has "spells" about
Nov 2/30 twice a week, when he laughs & talks to himself & becomes noisy. Nov 1/94. Wt 164 pds. Pulse 96. —

carried to Ledger Book "A". Page 147

1892

This patient was brought here by H. E. Hibbs
Has been a hard-drinker of late years; suffered
Morphine & opium habit; from is Paro
wandered from home Dec. 1st, & came
and finally castrated himself w
now manifested in that he thi
disposition to injure others. A
destructive. Has been confine
for mutilating himself,

Dec- On admission, was pa
ruing life"; "are you
" 16 of the scrotum. T
" 17 last night. 9.30 am. Pu
and sleeping but 4 hours,
" 18 Keeps his bed. Dec 18/92. Was
" 19 Constipated. Testicle is dressed
last night. 8.30 Am. Pulse 78.

1893
Jan 3 Jan 3/93. Up to the right of the 28th ult., wa
Has since rested and slept fairly well. Pulse ra
103. 112. 102. Am 96 on the past 14 and present morning
" 12 last note and has been up daily since. Wt today 147 pds. Jan 12/93. Pulse has been 108. 104.
" 18 106. 106. 104. 104. 102. 98. Am 108 on the past 8 and present morning respectively. Jan 18/92. Is uniformly quiet at night, apparently resting and sleeping quite well. Since getting up from bed, as noted above, has been up daily about the hall; clean and tidy; quiet and well-behaved. Answers questions and greetings promptly and pleasantly. Many times daily asked the attendants & officers "There is'nt anyone going to harm me today, is there?" When asked if he really thought there was any danger, he said he could not get over the impression or feeling that there was. Took food regularly & well. Gradually began working and now works very well indeed, on the ward. Looks well. Is gaining in flesh, and the sense of impending danger seems to have less strong hold upon him.
" 21 Jan 21/93. Visited by a friend today.
Feb 3 Feb 3/93. Wt 158 pds. Pulse 81. Quiet and restful at night, apparently. By day, is up & around, neat, tidy and well-behaved. Apparently still holds to his delusions of fear of being harmed, though he does not now express them so often. Does some work on the ward. Bodily health is good & has made a decided gain in weight in past 4 weeks.
Mar 3 March 3/93 Is uniformly quiet & restful at night apparently. Has made improvement in physical health; gained in mental activity & cheerfulness. Most recently, has seemed a little quieter and more inclined to be depressed. Mar 30/93. Is constipated.
Apl 19 Apl 19/93. Recently, has refused a few meals, seemed more depressed. Has made decided gain, physically, and marked improvement mentally, but is inclined to be depressed & gloomy, still. Apl 25/93. Eating poorly today.

1893
Apr 26 Apl 26/93. Wt today 164 pds. (Some loss).
May 8 May 18/93. During the past 4 weeks, has been reported as restless few while on only 2 or 3 nights, apparently eating & sleeping well, as a rule. Looks about daily. Is not depressed now: smiles & is very
" 31 good natured. Still keeps improving mentally. Appetite & health very good May 31/93. Appetite good; bowels regular; no cough noticed. Sits in a seat in his room, most of the time, apart from his fellow-patients. Seems somewhat depressed.
June 5 June 5/93. Has lost greatly in weight the past month, without apparent cause. Does not complain any.
" 30 June 30/93. Continues about the same. Talks but little yet answers questions & greetings. Reads some. Seems quite depressed.
July 4/31 July 4/93. Has regained some of his lost weight. Looks in good flesh. July 31/93. Sleeps well at night, apparently. Appetite continues good & bowels normal. Talks quite freely, at times, but shows delusions. Seems also somewhat brighter, of late.
Aug 31 Aug 3/93. Maintains his increase in flesh. Aug 31/93. Patient does not change much, from month to month.
Sept 8/30 Sept 8/93. Pulse 136 T(c) 101. Sept 8/93. Continues to increase in weight. Sept 30/93 Appetite good. Works some onward. Physical condition good.
Oct 10 Oct 10/93. Always quiet & well behaved. Works quite willingly on the hall.
" 31 Oct 31/93. Continues well-behaved. Talks when addressed. Reads some, but takes no part in games. Physical health good. Works. Still shows delusions. Nov. 1.93. Wt 166½ P. 88 Nov. 8.93 Works on ward-walks-deluded-talks-reads. Physic Co. good Behavior good. Nov 30.93 Works on ward. No change. Dec 4.93 Wt. 168 P. 92. Dec 31.93 No change Jan 7.94 Wt 169½ Dec 4/93
Jan 31.94 Commenced working with painters. Behavior good. Phys. Cond. good Seems to be in good
Feb 1 spirits. Talks freely & sensibly. Feby 1/94. Was not weighed today, but is in about usual flesh.
" 28 Feb 28/94. Quiet & well-behaved. Talks quite freely & rationally. Has continued to work with the painters.
Mar 1/26 March 2/94. Wt 170 pds. Pulse 92. March 26/94. Thinking he wanted a rest, today, stopped work-
" 31 -ing with the painters. March 31/94. Is about as usual. Always quiet & well-behaved.
Apl 2 April 2/94. Wt 171 pds Pulse 96: Commenced working again, with the painters, today.
" 30 April 30/94. Has continued with the painters, daily, working quite intelligently. Otherwise, about same
May 1/31 May 1/94. Wt 170 pds. Pulse 88. May 31/94. Quiet & well-behaved. Has "spells" when he will talk to himself in a vulgar manner. Talks of spirits "occasionally. Works part of time with painters.
June 1/30 Was transferred to B1 on 15th inst. June 1/94. Wt 163 pds. Pulse 87. June 30/94. No change to note. Works entire some of the time, with the painters. Seems, however, to tire of his work.
July 4/31 July 4/94. Wt 162½ pds. Pulse 68. July 31/94. Quiet; well-behaved; civil & obliging. Lately, has been working more regularly with painters. Has, still his peculiar spells, (about twice a week). Is clean & neat in appearance. Pleasant in manner. Health is good.
Aug 1/31 Aug 1/94. Wt 159 pds. Pulse 64. Aug 31/94. Quiet & well-behaved. At times, laughs & talks a great
Sept 3 deal to himself. Works daily, as usual, with the painters. Sept 3/94. Wt 155 pds. Pulse 83.
" 21/30 Sept 21/94. Kept in ward, today; would not go out to his work. Sept 30/94. Has become quite noisy, of late. Talks to himself, about all the time. Has many delusions. Seems contented here.
Oct 1/31 Oct 1/94. Wt 157½ pds. Pulse 66. Oct 31/94. Is about the same. Has "spells" about
Nov twice a week, when he laughs & talks to himself & becomes noisy. Nov 1/94. Wt 164 pds. Pulse 92.

carried to Hamilton book A. Page 147

Whole No. 3208.
Residence, St Paul, Minnesota.
Date Admission, 10th December 1892
Admitted by, Dr Kilbourne Hour, 7 PM.
How Sent, Jno. B. Olivier, Jof P, Ramsey County
Sex, male
Age, 36 years
Civil Condition, single (?)
Children, none
Age Youngest Child,
Occupation, Laborer
Degree Education,
Profession Religion, not a church member
Habits, unknown
Nativity, Sweden
Physicians Committing, Geo. J. Hanley & W. H. J. O'Brien
Correspondents, ("He thinks his friends used to live in Kewaskum")
Mother's address Helena Anderson, Birchdale Minn

No. for Year, 120
Insane Relatives, not known - as to heredity nothing known
Cause Exciting, not stated
Cause Predisposing, not stated
Form, Mania - Chronic
Accompanying Bodily Disorder, Unknown
Suicidal or Not, not
Date of this Attack, unknown
Duration, not stated
No. of Attack, unknown
No. of Admissions,
Age First Attack, not known
Time of Leaving,
Time in Hospital,
Result,

See letter from Mother recently 4/1/93
Exd by Dr Baker Jan 10/93 =

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Fairly clear. Somewhat uncertain
Quick or Sluggish, Sluggish
MEMORY: was very poor, but says better now.
Past Events,
Recent Events, Somewhat uncertain but seems to approximate facts
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Medium
Correct or Illusive, Fairly Correct

REASONING POWER:
Ordinary Subjects, Seems to have some exercise of reasoning faculty
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Thinks he began getting sick about September. First got sore; could not walk; has lain upon bed for a few days. Thought it was blood poisoning. Got up & "travelled" for a few days & first got well. Went from Jersey America to Chesta; worked there ½ a day & got sick again; then went to N. E. St. Paul, & was sick abed there, some 60 or 9 days. Had no physician. Expresses uncertainty about a good many things. Says he is in doubt & only approximates dates & facts -

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Yes
DELUSIONS:
Systematized or Not, Has had fears of harm & thought
Special Subjects, Seems Justice of the Peace
Transitory or Not,
HALLUCINATIONS: May have had, "of hearing" -
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Rather reticent; brought out only on questioning is rather slow & deliberate -

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11½ in WEIGHT, (1/2/93). 153 pds. NUTRITION, Fairly good
WOUNDS OR ABNORMALITIES, Wounds; seems to be none, except slight scar on left hand. Abnormalities, probably none.
TONGUE, Tremors, Coarse, irregular movement Coatings, Slight; tooth marked. Promptness Movement, fairly prompt
PUPILS, Equality, Equal Size, about normal
Response Light, Yes, but dilatation seems incomplete. Accommodation, Yes
SIGHT, Good
HEARING, Fair
COORDINATION, Arms, Finger to nose, Eyes shut, good.
Legs, Standing in front, somewhat unsteady. Standing, Eyes shut, Sways considerable.
TREMORS, Hands, Tongue, Coarse
Facial Muscles, Some of, unintentional. General,
REFLEXES, Patellar, Equal; Somewhat exaggerated - 6 on Dr P's scale.
Other Reflexes,
ARTICULATION, Hesitating, Slightly Slurred, indistinct
FACIAL EXPRESSION, Sad & melancholy
SENSIBILITY,
HEART, Seems all right
LUNGS, Seem good. Girth 36½ in. Expansion 35 in
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, Constipated, Irregular, Yes
APPETITE, Good, Medium, Has been Poor, but is fair now.
SLEEP, Good, Now Poor, as before. Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Says he got sick in September ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living, he thinks. —
Father or Pat. Relations, Father dead - of kidney Disease
Brothers or Sisters, Had 2 brothers; don't know if living or in good health. 2 sisters; thinks all living in Kewaskum County. Knows nearly.

1892

This man was brought here by deputy Sheriff Courteau, with the following history, which is very meagre. In regard to his habits, heredity, vices and relations, accompanying bodily disorder, how & when first symptoms were manifested, no particulars seem to be known. Supposed cause of this attack is not stated; form is chronic; as to its being first attack, unknown. Insanity is now manifested by his being stupid. Has shown no disposition to injure others; is not suicidal; no filthy or destructive habits. As to peculiarities of temper or previously shown, unknown; not subject to any bodily disease. Has not been restrained or confined, nor under medical treatment. (Note by D.K.) Was living on Westside; has been sick; was picked up on street, had a revolver; "Not known as a Justice of the Peace". He thinks his friends used to live in Renville —

Dec 17 Dec 17/92. Was quiet, rested well and slept 8 hours, last night. 8.30 Am Pulse 66. Tem 99. —

" 18 7 Pm. Pulse 56. Tem 99. Dec 18/92. Quiet & rested well last night. 8. Am " 84 " 99. 6. —

" 23 Dec 23/92. Has been uniformly quiet at night, resting and sleeping well. Pulse has been 88. 80. 92. 82. and 92. at the past 4 and present mornings respectively. Today complains a good deal of headache & pains in the chest. Throat was sore yesterday; is all right now. Dec 31/92. Has been quiet, resting and sleeping well at night. Pulse has been 90. 88. 84. 72. 96. 84. 72. and 78 as the past 7 and present mornings respectively.

1893 Jan 3/30 Jan 3/93. Wt 153 pds. Pulse 78. Jan 7/93. Is constipated. Jan 20/93. Has been uniformly quiet, apparently resting and sleeping well every night. Has been up every day since admission. Has been clean, fairly tidy, quiet and well-behaved. Has taken food well. — Bodily functions seem normal, as far as known. Has lounged around a good deal on the benches, inclined to inactivity. Slow in movement. Rather dull & depression of countenance & slow of speech. Complains somewhat of feeling ill. Never initiates conversation. Is not inclined to work. Jan 21/93. Complains of tooth-ache.

" 21 Feb 3/30 Feb 3/93. Wt 169½ pds. Pulse 84. Has gained 16½ pds in past month. Feb 20/93. Continues uniformly quiet; and keeps by herself & sleeps well at night. Keeps around daily, quite clean tidy & well behaved. Is somewhat more communicative. Still retains his dull depression. Quiet; inactive; doing little or no work.

" 21 March Bodily health quite good. Feb 21/93. Transferred from B² to B¹, today. —

March 3/93. Uniformly quiet at night. Quiet & well-behaved by day. Sits, the greater part of the time, in his room, apart from others. Talks only when addressed.

April 20/93. As described in last note. —

May Mayo May 3/93. Sits less by himself in his room, now. Is quiet & well-behaved. Has been working outside some, of late. Is very anxious to go home & has made effort to escape. Appetite is good; health quite so. Is very quiet, speaking only when addressed. Seems a little more active, than formerly. May 31/93. Is quiet & well-behaved. Dull; sluggish in movements. Appetite only medium. Complains some of rheumatism & pain in back. Works some about the barn & grounds. Shows delusions. Says "some one comes to his door & talks with him, at night."

June 5/30 June 5/93. Weight fluctuates; health, however, seems quite good. June 30/93. No material change. Does not work outside now: there were fears of his making his escape. —

July 31 July 31/93. Quiet & well-behaved. Does not work outside, but helps some on the ward. Is dull & inclined to be inactive; sluggish in all his movements. Keeps apart from others, while at the hall, remaining in his room most of the time. Not much inclined to talk. Health about as usual.

NAME. Saml Anderson

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 3d	153	78	—	—
Feby 3d	169½	84	16½	
Mar. 2d	167	101		2½
April 4th	165½	87		1½
May 3d	162½	81		3
June 5th	160	82	3½	
July 14th	162½	102		3½
Aug 2d	159	90		3½
Sept 4th	161	82	2	
Oct 4th	164½	97	3½	

"spells". Always keeps by himself; remains in his room, with hall-work. Aug 31/93. Does not seem to change any. contented here.

low in all his movements. Inclined to be dull & inactive. tside, walking, is picking up little stones & things ockets.

Appetite good. Oct 31/93. Still disinclined to talk or Hard to get out of bed in mornings. Somewhat stupid.

Very slovenly & cloudy. Will not do any work. Slow in rising mornings. in Bowels reg. Dec. 2. 93. Wt 164 lb. P 80. Dec 29 93. Mean Has no ambition for anything. Sleeps in chair all day, if allowed. 94 Wt 158 P. 102. Jany 31/94. Always the same. 4 Wt 158½ P 88. Feb 28/94. A quiet patient, never speaks t/wont eat. Is slow in movements & action. When not walking, stones. Is inclined to be mean & contrary, at times, and ts are clean & tidy. Physical health seems quite good. change & note since last month's report, above — 6/94. Commenced working with the painters, today — e has silly ways about him; keeping his pockets filled with baking. Works outside daily, with the painters. — s to day working with the painters. Was transferred to A¹ today. terested in his surroundings; will sit in one place, all rubbish & puts it in his pockets; inclined to be slovenly , since 18th May; Drinclined & talk only when spoken to.

June 1/94. Wt 150 pds. Pulse 71. June 12/94. While out walking to day, refused to come back with the rest. Says he don't have to stay here, if he don't want to". Was brought back by force — June 30/94. Has been well behaved since 12th inst & in all respects, about the same —

July 30 July 9/94. Wt 148½ pds. Pulse 72. July 31/94. No change in Condition to Dr Edward Routh.

Aug 31 Sept 30 Oct 31 During these 2 months, no special change has been observed - He keeps in good health & physical Condition. (Wt Aug 31 150½ pds: Sept 30 151 pds: Oct 31 154 pds. Pulse has been about normal.). He is a quiet & orderly patient. Talks quite freely, when spoken. Inclined to be lazy & slow in his movements; will sit in one place, for hours at a time. Still keeps his pockets filled with old papers & trash. Helps some with work. Habits clean.

Nov 1 Dec 3. Jany 31/95 Feb 2 Mar 2 April 30 May 2 June 1 July 31 Nov 1/94. Wt 150 pds. Pulse 72. — Dec 3/94. Wt 159 pds. Pulse 80. Jany 31/95. Wt 157 pds. P 68 Jany 31/95. Appetite good; bowels regular. Is very quiet. Does not talk very much. Lies about on chairs & seats. Inclined to be slow & lazy, but will do work if asked. Health is good. Feb 2/95. Wt 154 pds. Pulse 82: March 2/95. Wt 153 pds. P 70: April 1/95. Wt 152½ pds. Pulse 80. April 30/95. No improvement noted, during this quarter. He is very stubborn & selfish, at times; refuses to go out walking, for a long while, without being forced. Works some on the ward. May 2/95. Wt 152½ pds. P. 82. June 1/95. Wt 152½ pds. P 100. July 31/95. Wt 154 pds. Pulse 72. July 31/95. Always about the same. Slow & lazy in action. Lies about on the benches; stubborn & selfish. Carries old papers & trash in his pockets. No improvement noticed in any way

carried to Transfer Book A. 1 page 232

1892

This man was brought here by deputy [illegible]
very meagre. In regard to his habits, [illegible]
how & when first symptoms were m[illegible] use
of this attack is not stated: h[illegible] ity
is now manifested by his be[illegible] t
suicidal; no filthy or dest[illegible]eem, un-
known; not subject t[illegible]or under
medical treatment. [illegible]p on sheet; had
a revolver; shot h[illegible]ve in Kinville-
Dec 17 Dec 17/92. Was quie[illegible]ulse 86. Tr 99. —
" 18 7 PM. Pulse 56. Tr 9[illegible] " 84 " 99.6. —
" 23 Dec 23/92. Has been unif[illegible]ell. Pulse has been 88. 80.
92. 82. [illegible] 92. in the past 24 h[illegible]ay complains a good deal of
" 31 headache & pains in the chest. C[illegible]ight now. Dec 31/92. Pt has been
quiet, resting and sleeping well [illegible] 90. 88. 84. 72. 96. 87. 72. [illegible] 78 in
the past 7 and present mornings resp[illegible]

1893
Jan 3/93 Jan 3/93. Wt 143 lbs. Pulse 78. Jan 7/93 [illegible]pated. Jan 20/93. Has been uniformly
quiet, apparently resting and sleeping well [illegible] night. Has been up every day since ad-
-mission. Has been clean, fairly tidy, quiet and well-behaved. Has taken food well. —
Bodily functions seem normal, as far as known. Has lounged around a good deal on the
benches, inclined to inactivity. Slow in movement. Rather dull expression of countenance &
slow of speech. Complains somewhat of feeling ill. Never initiates conversation. Is
" 21 not inclined to work. Jan 21/93. Complains of tooth-ache.
Feb 3/93 Feb 3/93. Wt 169½ lbs. Pulse 84. Has gained 16½ lbs in past month. Feb 20/93. Continues uniformly
quiet; and keeps herself & sleeps well at night. Gets up & around daily, quite clean tidy & well behaved.
" 27 Is somewhat more communicative. Still retains his dull expression. Quiet; inactive; doing little or no work.
March 3/93 Bodily health quite good. Feb 27/93. Transferred from B[illegible] to B[illegible] today. —
March 3/93. Uniformly quiet at night. Quiet & well-behaved by day. Sits, the greater part of the time, in his
room, apart from others. Talks only when addressed.
April 20/93. As described in last note. ——
May 20/93. Sits less by himself in his room, now. Is quiet & well-behaved. Has been working outside some, of late.
May 31 Is very anxious to go home & has made efforts to escape. Appetite is good; health quite so. Is very quiet, speaking
only when addressed. Seems a little more active, than formerly. May 31/93. Is quiet & well-behaved. Dull; sluggish
in movements. Appetite only medium. Complains some of rheumatism & pain in back. Works some
about the barn & grounds. Shows delusions. Says "Some one comes to this door & talks with him, at night".
June 30 June 3/93. Weight fluctuates; health, however, seems quite good. June 30/93. No material change.
Does not work outside now: there were fears of his making his escape. —
July 31 July 31/93. Quiet & well-behaved. Does not work outside, but helps some in the ward. Is dull & inclined
to be inactive; sluggish in all his movements. Keeps apart from others, while in the hall, remaining in
his room most of the time. Not much inclined to talk. Health about as usual.

1893
Aug 19/93. Does not seem to have any "spells". Always keeps by himself; remains in his room,
Aug 31 most of the time, reading. Helps some with hall-work. Aug 31/93. Does not seem to change any.
Does not care to talk. Appears to be quite contented here.
Sept Sept 14/93. Keeps in quite good flesh. Slow in all his movements. Inclined to be dull & inactive.
" 20 Sept 20/93. Has silly ways. While outside, walking, is picking up little stones & things
off the road & putting them in his pockets.
Oct 14/93 Oct 14/93 Is gaining some, in weight. Appetite good. Oct 31/93. Still disinclined to talk or
31 work. Keeps by himself, a good deal. Hard to get out of bed in mornings. Somewhat stupid.
Nov 1/93 Wt 162 P 91 Nov 28/93 About the same. Very slovenly & dowdy. Will not do any work. Slow in rising mornings.
Dec 2/93 Likes to be alone. Has little to say. Appetite fair. Bowels reg: Dec 2/93. Wt 164 lb. P 80. Dec 29/93. Mean
patient about the same all the while. Has no ambition for anything. Sleeps in chair all day, if allowed.
1894
Jan 1/94 Appetite good. Bowels reg. Jany 1/94 Wt 158 P 102. Jany 31/94. Always the same.
Feb 7/94 Bowels reg. Appetite fair. Febry 2/94 Wt 158½ P 88. Feb 20/94. A quiet patient; never speaks
unless when spoken to. Has "spells" when he wont eat. Is slow in movements & action. Whenever walking
will fill his pockets with rubbish & little stones. Is inclined to be mean & contrary, at times, and
refuses to assist with the work. Habits are clean & tidy. Physical health seems quite good.
Mar 31/94 Wt 153 lbs. Pulse 70. March 31/94. No change to note since last month's report, above —
April 2/94 April 2/94 Wt 150 lbs. Pulse 82. April 10/94. Commenced working with the painters, today —
" 30 April 30/94. A good quiet patient. Still has silly ways about him; keeping his pockets filled with
rubbish &c. Is very reticent; seldom speaking. Works outside daily, with the painters. —
May 31/94 May 3/94. Wt 151 lbs. Pulse 100. May 18/94. Is to day working with the painters. Was transferred to B[illegible] today.
" 31 May 31/94. Quiet; well-behaved; seems uninterested in his surroundings; will sit in one place, all
day; has silly ways & manner; picks up rubbish & puts it in his pockets; inclined to be slovenly
and lazy; has not worked with the painters, since 18th May; disinclined to talk only when spoken to.
June 1/94 June 12/94. Wt 150 lbs. Pulse 71. June 12/94. While out walking to day, refused to come back
with the rest. Says "he don't have to stay here, if he don't want to". Was brought back by force-
" 30 June 30/94. Has been well behaved since 12th inst & in all respects, about the same —
July 31/94 July 9/94. Wt 145½ lbs. Pulsed 72. July 31/94. No change in Condition &c for Dr Ward Books.
Aug 31 During these 2 months, no special change has been observed. He keeps in good health & physical condition.
Sept 30 (Wt 8½ 150½ lbs: ¾ 151 lbs: ½ 154 lbs. Pulse has been about normal.). He is a quiet & orderly patient. Talks
Oct 31 quite freely, when spoken. Inclined to be lazy & slow in his movements; will sit in one place, for hours
at a time. Still keeps his pockets filled with old papers & trash. Helps some with work. Habits clean.
Nov 1 Nov 1/94. Wt 150 lbs. Pulse 72. — Dec 31/94. Wt 159 lbs. Pulse 80. Jany 31/95. Wt 157 lbs. P 68.
Dec 31 Jany 31/95. Appetite good; bowels regular. Is very quiet. Does not talk very much. Lies about
Jany 31/95 on chairs & seats. Inclined to be slow & lazy, but will do work if asked. Health is good.
Feb 28 Feb 28/95. Wt 154 lbs. Pulse 82: March 28/95. Wt 153 lbs. P 70: April 1/95. Wt 154½ lbs Pulse 85.
March 28 April 30/95. No improvement noted, during this quarter. He is very stubborn & selfish, at times:
April 30/95 should not go out walking, for a long while, without being forced. Works some in the ward.
May 2 May 28/95. Wt 156½ lbs. P. 87. June 1/95. Wt 153½ lbs. P 100. July 1/95. Wt 154 lbs. Pulse 72.
June 1 July 21/95. Always about the same. Slow & lazy in action. Lies about on the benches. Stubborn & selfish.
July 21 Carries old papers & rubbish in his pockets. No improvement noticed in any way.

carried to Standard Book A. Page 232

Whole No. 3210.

Residence, St Paul, Minn; 196 Winifred Street

Date Admission, 19th December 1892.

Admitted by, Dr Kilbourne Hour, 7 PM

How Sent, Jno. B. Olivier, Jof P., Ramsey County

Sex, Male

Age, 36

Civil Condition, married

Children, 5

Age Youngest Child,

Occupation, Cigar-maker

Degree Education,

Profession Religion, In a church member

Habits, Good

Nativity, Germany

Physicians Committing, Arthur Sweeny and Ovide Martel

Correspondents, Wife's name, Mary
195 Winifred St. St Paul

(Brother)
Wm Mulgenberg
555 Hall Ave, St Paul.

No. for Year, 122.

Insane Relatives, None; insanity not hereditary

Cause Exciting, Hemiplegic attack

Cause Predisposing, Syphilis possibly (in 1881)

Form, Dementia Syphilitica

Accompanying Bodily Disorder, Syphilis & hemiplegia

Suicidal or Not, Not

Date of this Attack, December 2nd

Duration, about 17 days

No. of Attack, 1st

No. of Admissions,

Age First Attack, 35 years

Time of Leaving, January 20th 1893

Time in Hospital, 1 month 1 day

Result, Died. Organic brain disease.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish,

MEMORY:

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Not examined in detail
on account of sickness in
bed and extreme weakness

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION,

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Coatings, Promptness Movement,

PUPILS, Equality, Size,

Response Light, Accommodation,

SIGHT,

HEARING,

COORDINATION, Arms,

Legs,

TREMORS, Hands, Tongue,

Facial Muscles, General,

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1892

This man was brought here by Sheriff Courteau, with the following history. Habits have been good. Supposed cause of this attack is Hemiplegic attack; form is acute, exalted. Accompanying bodily disorders are Syphelis (contracted in 1881) and Hemiplegia. Had a sudden stroke of paralysis December 2nd; mania developed in 48 hours. This is first attack. Insanity is now manifested by general mania; shouts, talks and cries out incoherently; very noisy. Has shown no disposition to injure others. Is not suicidal. Is filthy in habits; has peculiarities of temper to previously shown. Has been confined to bed to keep him from tumbling out, by wrist and leg straps. Has had specific treatment; no result.

Dec 20 Dec 20/92. Has quite a restlessly noisy and restless for 7 hours last night. Sleeping but 1 hour. Ate but very little breakfast this morning; has sordes on his teeth and lips. 830 Am. P. 82 T(e) 98.4. 530 Pm. Pulse 90. T(e) 98.8. Weight (in underclothing) 106½ pds.

" 21 Dec 21/92. Extremely noisy and restless, sleeping none at all last night. 830 Am. P 100. T(e) 98.4. Is dozing now, when seen by Dr. Tongue is coated & has sordes. 730 Pm. P 84

" 22 T(e) 98.4. Dec 22/92. Quite noisy and restless for 4 hours sleeping 4 hours last night; was given hypnotic during the night. 830 Am Pulse 92. T(e) 97.6.

" 23 Dec 23/92. Has extremely noisy all last night & slept none. 830 Am. Pulse 74. T(e) 98.2. — 7 Pm. Pulse 90. T(e) 98.6. Is somewhat quieter by day, than at night; how sleeping none.

" 24 Dec 24/92. Again noisy and restless all last night, sleeping none. 830 Am. P 70. T(e) 98.4 7 Pm. Pulse 78. T(e) 98.4.

" 25 Dec 25/92. Extremely noisy and restless part of last night, sleeping 2 hours. 830 Am Pulse 72. T(e) 98.6. Bowels are constipated. 7.30 Pm. Pulse 78. T(e) 98.4.

" 26 Dec 26/92. Slept 5 hours last night. Noisy & restless when awake. 830 Am. Pulse 82.

" 27 T(e) 98. Dec 27/92. Slept but a couple of hours last night. 830 Am. Pulse 100. T(e) 100.6. 530 Pm. Pulse 92. T(e) 99.8. Has a beginning bedsore. Is constipated.

" 28 Dec 28/92. Extremely noisy and restless last night, sleeping but one hour. 830 Am. Pulse 108. T(e) 99.2. 7.30 Pm. Pulse 112. T(e) 99.8. For several days after admission, in his extreme restlessness, although suffering from hemiplegia, patient would manage to throw himself around & out of bed. This occurred several times. For a time, slept on a mattress on the floor, and later, was kept in bed by a high bed-board. The left elbow is found quite red and inflamed, at this date. Redness & swelling look almost like erysipelas. This thought that it originated in a bruise received from throwing himself about.

" 29 Was poulticed. Dec 29/92. Extremely restless & noisy all last night. Sleeping none. 830 Am Pulse 120. T(e) 99.6. Is growing more noisy by day. 530 Pm. Pulse 108. T(e) 99.6.

" 30 Dec 30/92. Slept about 5 hours last night. 9 Am. Pulse 104. T(e) 100. Pm. Pulse 104. T(e) 99.8. Inflammation of arm, terminated abscess, was opened & dressed today.

" 31 Dec 31/92. Restless and noisy for 4 hours, sleeping 4 hours, last night. 830 Am P. 98. T(e) 99.6.

1893 530 Pm. Pulse 108. T(e) 98.8. —

Jan 1 Jan 1/93. Slept between 2 and 3 hours last night. 830 am. Pulse 102. T(e) 98.2. Pm. Is very noisy this afternoon; complains of pain in his arm. 530 Pm. Pulse 106. T(e) 98.6.

" 2 Jan 2/93. Quite noisy & restless. Sleeping but 3 hours last night. 730 am. P 90. R 20. T(e) 98.2

1893

5 Pm. Pulse 108. Bowels constipated; moved freely upon laxative.

Jan 3 Jan 3/93. Slept 5 hours last night. 730 Am. Pulse 110. R 20. Quiet most of the day.

" 4 Jan 4/93. Very noisy and restless, sleeping but one hour, last night. 7.30 Am. Pulse 94; — 5 Pm. Pulse 84. The inflammation of the elbow subsided quite well, but a bedsore developed at the site of the wound. Diet consists of milk & eggs, with bovinine, given at frequent intervals. Jan 5/93. Slept about 4 hours last night. 730 Am. Pulse 70. 5 Pm. Pulse 86.

" 6 Is extremely noisy most of the time. Jan 6/93. Slept 2 hours last night. 730 Am. P 82

" 7 5 Pm. P 80. Jan 7/93. Slept but one hour last night. 730 Am. P 84. Refused his breakfast.

" 8 5 Pm. P. 90. Jan 8/93. Slept but one hour last night. 730 Am. P 82. On account of extreme

" 9 and continued noisiness was transferred today to B4. Jan 9/93 Slept but 2 hours last night. Resists so strenuously taking of temperatures, that the taking of them was desisted from.

" 10/11 Jan 10/93. Bedsores are spreading and multiplying. Jan 11/93. Has slept but 3 hours, each of the past 2 nights. Is failing quite rapidly. Friends notified. —

" 12/13 Jan 12/93. Slept 4 hours last night. Jan 13/93. During the past 5 nights, has slept 5. 1. 6. 0. & 2 hours, respectively. Patient is failing. Pulse is feeble. Refuses food quite often, and medicine usually; is growing very thin and haggard.

" 19 Jan 19/93. Has slept 3 hours and 8 hours in each of past 2 nights respectively. — Pm today Pulse 180. Is failing rapidly; can't talk above a whisper. Is dull.

" 20 Jan 20/93. Lay in a quiet stupor yesterday and last night, and died at 315 Am. —

Summary. Patient, on admission, was quite thin, sallow and pale. Had sordes on lips and teeth. Was hemiplegic. Had a tendency to sub-normal temperature and soft & pressible pulse. Was extremely restless and sleepless, as seen from the above notes. Talked a great deal to himself and said much. Attention could be obtained for a time, and some short answers to questions, but patient, quite quickly, reverted to his noisy crying and incoherent talk to himself. Took food usually scantily and occasionally refused it altogether. Not only did bedsores develop at points of pressure, but also quite numerous sores formed around the nails, on the knuckles, and various parts of the limbs. These seemed to be explained only by some profound trophic disturbance. Patient steadily failed under the combined influence of his central nervous trouble, loss of rest, wear-and-tear of excitement and scant taking of nourishment. Friends came & removed the remains — No autopsy held. —

— Died —

Personal and Medical History of George O. Thute

Whole No. 3212.
Residence, Austin
Date Admission, 19th December 1892.
Admitted by, Dr Kilbourne Hour, 7 PM
How Sent, S. S. Washburn Jr. P. Mower County
Sex, Male
Age, 56
Civil Condition, Widower
Children, one
Age Youngest Child,
Occupation, Formerly many; of late years nothing
Degree Education,
Profession Religion, Is a church member
Habits, Strictly moral & temperate
Nativity, Pennsylvania
Physicians Committing, H. L. Hollister & J. E. Daigneau
Correspondents, C. A. Coots, Austin.

No. for Year, 124.
Insane Relatives, None; Insanity not hereditary.
Cause Exciting, Opium habit & the loss of his wife
Cause Predisposing, Not Stated
Form, Dementia from Morphinism
Accompanying Bodily Disorder, He is very Emaciated
Suicidal or Not, not
Date of this Attack, Abnt 2 months ago.
Duration, abnt 2 months
No. of Attack, 1st
No. of Admissions,
Age First Attack, 56
Time of Leaving, January 26th 1893.
Time in Hospital, 1 month & 7 days.
Result, Died. Pulmonary Tuberculosis and exhaustion.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish,
MEMORY:
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of George O. Thute

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION,
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Size,
Response Light, Accommodation,
SIGHT,
HEARING,
COORDINATION, Arms,
Legs,
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of George O. White

1892

This Patient was brought here by Sheriff A. Mollison & patients' son Fred, with following history. Habits have been strictly moral and temperate. Supposed cause of this attack is opium habit, and the loss of his wife. Form is depressed. He is also very Emaciated. First Symptoms of disease were manifested about 2 months ago. This is 1st attack. Insanity is now manifested by his showing an indifference to anything and loss of memory at times. Is not dispos'd to injure others. Is not suicidal. Not filthy or destructive. Has not been restrained or confined. He has been a confirmed invalid for years of a consumptive Character; is a confirmed morphine subject. Note. On admission to Hospital, was carried into it by Sheriff.

Dec 20 Dec 20/92. Has restless and quite noisy all last night, sleeping none. Nourishment consisted in morning Ht (in underclothes today) 72 pds. Pulse is fairly regular and hard. Has sound cough and Expectorates purulent sputa in quite large quantity. Eggnog directed to be given 3 times a day. Is reported by son as having been an invalid for about 10 years, more or less given to complaint; kept up and around until the death of his wife a few weeks ago, since which time he has kept his bed. Has been a user of morphine for years, taking from 5 to 12 grains per day lately. Patient is very thin indeed, and haggard; moans almost constantly. Is quite confused mentally.

" 21 Was put upon bromides & morphine, with a tonic. Dec 21/92. Noisy restless, nearly all last night, sleeping but one hour. Lies comparatively quietly in bed. Takes food poorly.

" 23/24 Dec 23/92. Mosquera beef meal added added to the diet. Dec 28/92. Ht (in underclothing) 71 pds.

" 28 In his moaning & complaining, complains of being cold. Dec 28/92. During the past 7 nights, has slept in all, but about 4 hours. Dozes sound by day. Restless and moaning a great part of the time.

1892 Jan 1 Jan 1/93. Has slept from 1 to 4 hours each night, since the last note. Clinical record of sickness has been kept and is attached. Pulse somewhat accelerated all the time, running up, at times, to 114 and 116. Temperature has ranged from sub-normal to decided feverishness. Appetite, somewhat capricious, has been better, on the whole, lately. Bowels have had a tendency to constipation. Complains much of being cold. Hot sand-bags kept in his bed nearly all the time.

" 3/4 Jan 3/93. Ht (in underclothing) 74 pds. Pulse 98. Jan 4/93. Pulse most rapid and feeble.

" 10/13 Jan 10/93. Ht " " 74½ pds. Jan 13/93. Pulse seems to be failing in strength. Was put on a Stimulant twice.

" 17 Jan 17/93. Ht (in underclothing) 73 pds. Has been eating rather less freely lately.

" 23 Jan 23/93. Since the 1st Inst. Slept from 0 to 4 hours a night, between the 1st & 11th; and has slept from 3 to 7 hours per night since the 11th, as a rule, sleeping 6 or 7 hours. In resting and sleeping well there has been a great gain. Is less restless and moans much less also, both night and day. Has a good appetite, as a rule; Occasionally eating poorly. At first, mentally, very dull & confused, scarcely able to talk or recognize acquaintances, has brightened up, recognizing those about him, and talking sound, and fairly well. Acceleration of pulse persists, and, as a rule, there is some elevation of temperature. Bowels have been irregular, but have moved fairly easily under laxatives. Patient vomited this morning, for the first time; Patient is very frail and it does not seem that it would require but a slight illness to carry him off. Bromide of Sodium, with tincture of Gentian Compound, has been given regularly. Morphine, at the rate of 6 grains a day, was given from the beginning of treatment, in decreasing doses, until,

Died

DETAILED HISTORY OF SICKNESS OF MR. Geo O. White
DIAGNOSIS.

January 1 — 1893

DATE	HOUR A.M.	HOUR P.M.	PULSE A.M.	PULSE P.M.	RESP. A.M.	RESP. P.M.	TEMP. A.M.	TEMP. P.M.	OTHER DATA.
Jan 1	7	5	100	90			100	99.6	Forcibly Taken off. Fanallo soc appearing ont left hip bone.
2	7.30		106				100.5		
		5		95				100.8	
3	7.30		88				98.4		Diet. 1 Egg: milk from ad added to 10 ounces at 9-2-8-6 o'clock each day
		5		100				99	besides regular feeding; 2.30 PM Bowels moved.
4	7.30		118				101.8		Urine passed
		5		106				101.5	Sleeps some.
5	7.30		104				101.2		Urine passed; 2.30 am Bowels moved.
		5		92				99.8	
6	7.30		108				98		Urine passed; Sleeps some during day.
		5		86				97	
7	7.30		104				99.5		
		5		100				100.2	8 P.M. Short spell of coughing.
8	7.30		116				100.6		
		5		111				100.4	6.30 PM Bowels moved
9	7.30		122				102.6		
		5		102				100.8	
10	7.30		120				101		7.30 Bowels moved freely / Bowels moved 3 P. Sleeping
		5		108				100.2	
11	7.30		112				101.2		1.30 Sleeping
		5		109				101.6	
12	7.30		112				99.5		8.30 Spell of coughing
		5		110				100.6	
13	7.30		108				100		Sleeping greater part of morning
		5		108				100	
14	7.30		113				101.2		Appears much brighter than yesterday / 11 P Sleeping
		5		106				99.6	
15	7.30		116				100		Appetite better. Slept nearly all morning
		5		111				100.6	2.30 PM Burning of oil
16	7.30		116				100		Appetite good appears stronger. Bowels moved some
		5		108				99.2	quite hard
17	7.30		108				99		Bowels moved hard. Pale yellow
		5		102				99	Appetite good. 2 P M Sleeping 2.30 Burning of oil
18	7.30		106				99.4		Bowels moved. Sleeping greater part of day
		5		100				99.2	10.30 Bowels moved a good deal 30 Loose
19	7.30		103				99.2		Appetite fairly good. Bowels moved
		5		100				100	dry hard and lumpy
20	7.30		106				101.2		
		5		104				100.8	
21	7.30		106				99.2		Appetite good. 3 P.M. Sleeping
		5		90				99.8	
22	7.30		106				99.2		Ate no first / Last 2 P.M. Vomiting
		5		104				98.4	
23	7.30		94				99.2		2 P.M. Burning of oil 11 A.M. Vomiting
		5		90		29		99	
24	7.30		89				100		2 P.M. Bowels Weak at 8 no Bowels last. Had Passed a Sleeping
		5		94		29		98.8	5 P.M. Coughing discharges considerable 3 P.M.
25	7.30		94		30		99.4		2 P.M. Bad Coughing Spell.
		5		96		36		99.6	
26	7.30		92		28		98.6		Coughing Considerable 2 P.M. Seems Stupid
		5.30		100		36			respiration very hard. quick.
27	7.30								4 very uneasy and constantly
									moving around. 5.30 expired
28	7.30								
29	7.30								

1892 Jan 1 " 31 often, noisy at night; at times, extremely so. Physical condition very good. Behavior mischievous, ugly & annoying. Habits dirty. No change, mentally or physically, observed. Jany 1/93. Ht 5 ft 9½ Wt 172 Jany 31/93. Has continued about as above described for several months past. No improvement to note.

(To Transfer Book A, page 180)

Personal and Medical History of George O. White

DETAILED HISTORY OF SICKNESS OF MR. Geo. White.
DIAGNOSIS.

December 20 — 92.

DATE	PULSE A.M.	PULSE P.M.	RESP. A.M.	RESP. P.M.	TEMP. A.M.	TEMP. P.M.	OTHER DATA.
							Same as usual Dec 19 — to 8 PM.
Dec 20	120	102					8 A.M. Drank a glass of eggnog & a little eggnog
	6	78					3 P.M. eggnog & [illegible]
Dec 21	130	86			99.6		7 P.M. Passed water
		94			98.4		21st Has had a very good day.
22	120	96.8			98.8		
	8	96		24	103.2		
23	136	100			101		2 P.M. Digestion takes reasonable amount
	5	96			99.8		nourishment but continually groaning complains of cold.
24	130	98			98.8		
	5	112			99		Takes nourishment fairly well
25	130	104			99.4		
	5	110			98.4		Keep sand bags to limb but complains of cold
26	120	104			100		Gave injection 10 A.M.
	5	102			99.4		
27	130	98			98.6		Takes reasonable amount of nourishment
	5	102			99.4		(Bowels moved 6 A.M. Same, Late 8.30 has a chill
							1 P.M. Bowels moved freely. was chill 8.20 P.M.
28	120	112			99.2		Rested some this a.m.
	5	104			100.2		Drank about 3 pints of eggnog today
29	130	108			100.4		
	5	96			99.2		
30	130	100			99.2		8 A.M. Bowels Moved
	5	90			99.8		
31	130	106			99.2		4.30 P.M. Bowels moved.
	5	100			100.2		

Jan 3/93. Has been eating rather less
" 10/93. Jan 10/93. Has been eating 7 3 pts. Has been eating rather less
" 17 on a stimulant from
" 23 freely lately. Jan 23/93. Since
and has slept from 3 to 4 hours a night, between the 1st & 11th;
resting and sleeping well there has been as a rule, sleeping 6 or 7 hours. Is
also, both night and day. Has a good appetite, as a rule; Occasionally eating poorly. At first,
mentally very dull & confused, scarcely able to talk or recognize acquaintenances, has brightened
up, recognizing those about him, and talking sound, and fairly well. Acceleration of pulse
persists, and, as a rule, there is some elevation of temperature. Bowels have been irregular,
but have moved fairly easily under laxatives. Patient vomited this morning, for the first time;
Patient is very frail and it does not seem that it would require but a slight illness to carry him off.
Bromide of sodium, with tincture of gentian compound, has been given regularly. Morphine, at the
rate of 6 grains a day, was given from the beginning of treatment, in decreasing doses, until,

Dec 15, 1895 Jan 1 " 31 often, noisy at night, at times, extremely so." (Physical condition very good. Behavior mischievous, ugly & annoying. Habits dirty. No change, mentally or physically, observed. Jan 1/95. Wt 118 3/4 lbs. P 72 Jan 31/95. Has continued about as above described for several months past. No improvement noted.

(to Transfer Book A, page 180)

…noaning.
…spectated
…s reported
…kept up and
…as kept his bed.
…lately. Patient
…nfused mentally.
…restless, nearly all
…akes food poorly.
…ht (in underclothing) 71 pds.
…92. During the past 7 nights,
…and moaning a great part of

Jan
…last note. Clinical record of sickness
…ated all the time, running up, at times,
…nal to, decided feverishness - appetite,
…tely. Bowels have had a tendency to con-
…ot sand-bags kept in his bed nearly all the time.
Ka — Jan 4/93. Pulse rapid and feeble.
to 114 — Jan 5/93. Pulse seems to be failing in strength. Was put
somewhat — (in underclothing) 73 pds. Has been eating rather less
-tipation. Ca… — of late. Jan 23/93. Since
" 3/93 Jan 3/93. Wt (in u… — last note. Slept from 0 to 4 hours a night, between the 7th & 11th.
" 10/93 Jan 10/93. Wt " — and has slept from 3 to 7 hours per night since the 11th, as a rule, sleeping 6 or 7 hours. In
" 17 m w stimulant freely. — resting and sleeping well there has been a great gain. Is less restless and moans much less
" 23 — also, both night and day. Has a good appetite, as a rule; occasionally eating poorly. At first,
mentally, very dull & confused, scarcely able to talk or recognize acquaintances, has brightened
up, recognizing those about him, and talking some, and fairly well. Acceleration of pulse
persists, and, as a rule, there is some elevation of temperature. Bowels have been irregular,
but have moved fairly easily under laxatives. Patient vomited this morning, for the first time;
Patient is very frail and it does not seem that it would require but a slight illness to carry him off.
Bromide of Sodium, with tincture of Gentian compound, has been given regularly. Morphine, at the
rate of 6 grains a day, was given from the beginning of treatment, in decreasing doses, until,

…date, patient is getting about 1/4 th of a grain per diem. Clinical record is attached. —
Jan 24/93. Last night, seemed very weak; was restless 1 hour sleeping 7 hours. Pulse ranged from 88 to 94
during the night. Am. Is feeble; has some dyspnoea. Refused breakfast. Bromides reduced. Son was
advised to stay of patient's serious condition. Wt today (in underclothes) 70 pds. Is steadily losing in flesh.
25 Jan 25/93. Slept only 3 hours last night; pulse at regular intervals during the night was from 100 to
96; quite strong; Coughed a good deal; throat seemed clogged. Was very weak and had some very low spells.
26 Jan 26/93. Restless for 2 hours, sleeping 5 hours, last night. Pulse ranged from 100 to 92 at
regular intervals. Am. Beefmeal ordered to be added to diet. Has yesterday and today vomited bilious fluid.

Patient continued to fail rapidly during the day and died at 5.35 PM. Remains were removed by undertaker. No autopsy held.

Since the note of the 23rd inst, has continued gradually to fail. Has had several spells of Coughing both by night and by day; (some quite severe;) by which patient seemed much exhausted. Appetite has been capricious, he sometimes eating well & at others, taking no food. Bowels have moved fairly freely. Slept some during nearly each day and, at times, appeared somewhat brighter. At night seemed to have rested fairly well, sleeping 6 to 7 hours, though on one night (24th) but 3 hours. Medicines have been given regularly both by night & by day. On the 22d & 23d inst vomited some, each morning. Respiration, at times, was very labored; (see Clinical record attached).

- Died -

Soren Johnson

1894 Cont'd
Feb 28 — From 208 this month, and has received some bruises on face & some scratches. Habits very dirty & destructive. No improvement.
Mar 31 — March 1/94. Wt 179½ pds. Pulse 70. March 31/94. Does not improve in any respect. Continues badly behaved, ugly & quarrelsome; very noisy day & night. Habits are filthy & destructive. Physical condition is very good.
April 30 — April 1/94. Wt 180 pds. Pulse 84. April 10/94. A fellow patient (Mat. Peterson) of Ward B3, without quarrel or
" 25 — any provocation, today, bit a piece off Johnson's ear (right). April 26/94. Was vaccinated today.
" 30 — April 30/94. No noticeable change in patients' condition. Still quarrelsome, ugly, dirty & destructive.
May 31 — During these 3 months, there is no change observable in patients condition - Wt, taken each month has been
June 30 — about 179 pds & physical health is good; he is quite frequently noisy at night; ugly, noisy & troublesome, by day.
July 31 — difficult to manage; occasionally getting into fight when he receives bruises. Habits continue very filthy.
Aug 31 — During this period, patient has continued in good physical health; weight keeps about normal. Mental condition
Sept 30 — does not change) any. No improvement in conduct or behavior. Has quite frequent "ugly spells" when he gets into fights
Oct 31 — with other patients; is annoying to them. Talks very incoherently. Habits as to dirty (& dirty every day in the month).
Nov 1/94 — Nov 1/94. Wt 183 pds. Pulse 68. Nov 6/94. Since last note, has been mischievous, boisterous & dirty.
" 27 — Nov 27/94. Was struck in arm by a stone thrown by Ike Sanders. Nov 30/94. No change. Still
Dec 30 — boisterous & mischievous. Habits very dirty. Dec 1/94. Wt 190 pds. P 72. Dec 31/94. Quite
1895 — often noisy at night; at times, extremely so. Physical condition very good. Behavior mischievous,
Jan 1 — ugly & annoying. Habits dirty. No change, mentally & physically, observed. Jany 1/95. Wt 185 pds. P 72.
" 31 — Jany 31/95. Has continued about as above described for several months past. No improvement noted.

(to Transfer Book A, page 180)

Personal and Medical History of James N. Hay.

Whole No. 3215.

Residence, Austin, Minn

Date Admission, 22nd December 1892.

Admitted by, Dr Kilbourne Hour, 7 PM

How Sent, S. S. Washburn, Supt. Mo

Sex, Male

Age, 35 years

Civil Condition, Single

Children, None

Age Youngest Child,

Occupation, Running billiard Hall.

Degree Education,

Profession Religion, not a church membe

Habits, Drank considerable for last 2 or 3 years

Nativity, Pennsylvania

Physicians Committing, C. H. Johnson and Dr. S. Hollister

Correspondents, D. B. Smith, Austin, Minn



No. for Year, 127

e Relatives, none; insanity not hereditary

Exciting, Congenital

Predisposing, Epilepsy probably

Dementia Epileptic.

npanying Bodily Disorder, Yes; Epileptic fits

al or Not, not

of this Attack, not given - always subject to fits

tion, probably some time

f Attack, not 1st; one about 5 years ago.

f Admissions,

First Attack, 30 (about).

of Leaving, 5th October 1901.

Time in Hospital, 8 Yrs 9 mos 13 Ds

Result, Recovered: Discharged Nov 30/1901.

EXAMINATION ON ADMISSION.

Exd by Dr. Baker Jan 1893

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Fairly clear

Quick or Sluggish, Somewhat sluggish

MEMORY:

Past Events,

Recent Events, (of time of coming here) Good.

Special Subjects, fair

PERCEPTIVITY:

Alert or Dull, Quite alert

Correct or Illusive, Correct

REASONING POWER: Probably somewhat impaired

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has had fits badly for past 7 years. Had them before that but claims he got cured of them for quite awhile. Denies ever having Drink-habit. Saw no reason for his being sent here.

EMOTIONAL STATE:

Normal, Calm, Yes

Indifferent, Somewhat

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, How detected

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None detected.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free

Personal and Medical History of James N. Hay

In case of sickness of James Hay write or telegraph

Austin A. Hay

Buck City

Oct 13 98

Address for Winter (of Patients mother) Ohio.

SSION—(Continued.)

TICS.

NUTRITION, Fair

leg lame,

Promptness Movement, prompt

abnormals

nodation, Yes

COORDINATION, Arms, accurate.

Legs, Standing at foot, Considerable inaccuracy - Standing, Eyes shut, swaying some

TREMORS, Hands, Tongue, Some slight

Facial Muscles, General,

REFLEXES, Patellar, Equal; considerably exaggerated - Sometimes Ds Pts Scale -

Other Reflexes,

ARTICULATION, Hesitating, Some tendency to be. Slurred, Somewhat.

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Says he has had no trouble with it —

LUNGS, Says lungs never troubled him.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, about	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good, Fairly.	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; claims in good health.

Father or Pat. Relations, Father dead.

Brothers or Sisters, 1 brother: claims good health: had 2 sisters who died when young.

Whole No. 3215.

Residence, Austin, Minn

Date Admission, 22nd December 1892.

Admitted by, Dr Kilbourne Hour, 7 Pm

How Sent, S. S. Washburn, Jo P. Mo

Sex, male

Age, 35 years

Civil Condition, single

Children, none

Age Youngest Child,

Occupation, Running billiard Hall.

Degree Education,

Profession Religion, not a church membe

Habits, Drank considerable for last 2 or 3 years

Nativity, Pennsylvania

Physicians Committing, C. N. Johnson and Dr. S. Hollister

Correspondents, D. B. Smith, Austin, Minn



No. for Year, 127

e Relatives, none; insanity

Exciting, Congenital

Predisposing, Epilepsy p

, Dementia Epilepti

npanying Bodily Disorder, Yes; Epilep - fits

al or Not, not

of this Attack, not given - always subject to fits

ion, probably some time

f Attack, not 1st; one about 5 years ago.

f Admissions,

First Attack, 30 (about).

of Leaving, 5th October 1901.

Time in Hospital, 8 Yrs 9 mos 13 Ds

Result, Recovered: Discharged Nov 30/1901.

EXAMINATION ON ADMISSION.

Exd by Dr. Baker Jan 1893

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Fairly clear

Quick or Sluggish, Somewhat sluggish

MEMORY:

Past Events,

Recent Events, (of time of coming here) Good.

Special Subjects, fair

PERCEPTIVITY:

Alert or Dull, Quite alert

Correct or Illusive, Correct

REASONING POWER: Probably somewhat impaired

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has had fits badly for past 7 years. Had them before that but claims he got cured of them for quite a while. Denies ever having Drink-habit. Saw no reason for his being sent here.

EMOTIONAL STATE:

Normal, Calm, Yes

Indifferent, Somewhat

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None detected

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None detected.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ in. WEIGHT, 144½ pds. NUTRITION, Fair

WOUNDS OR ABNORMALITIES, Small scars on head. Left leg lame.

TONGUE, Tremors, None slight Coatings, Slight Promptness Movement, prompt

PUPILS, Equality, Equal Size, about normal

Response Light, Yes Accommodation, Yes

SIGHT, Quite Good

HEARING, Right ear quite deaf; left fairly good.

COORDINATION, Arms, Finger to nose, Eyes shut, quite inaccurate.

Legs, Standing at foot, Considerable inaccuracy - Standing, Eyes shut, Swaying same

TREMORS, Hands, Tongue, None slight

Facial Muscles, General,

REFLEXES, Patellar, Equal; considerably exaggerated - 4 or 5 Dr P's Scale -

Other Reflexes,

ARTICULATION, Hesitating, Some tendency to be. Slurred, somewhat.

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Says he has had no trouble with it —

LUNGS, Says lungs never troubled him.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, about	Constipated,	Irregular,
APPETITE, Good, Yes	Medium,	Poor,
SLEEP, Good, fairly.	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living; claims in good health.

Father or Pat. Relations, Father dead.

Brothers or Sisters, 1 brother: claims good health: had 2 sisters who died when young.

1892

This man was brought here by Sheriff Mollison, with the following history. Has drunk consi-derable for last 2 or 3 years; supposed cause of this attack, Congenital. Form is chronic. It is not stated when first symptoms of disease was manifested. Has always been subject to epileptic fits. This is not 1st attack; had one about 5 years ago. Insanity now manifested not on any subject in particular. Has shown no disposition to injure others. Is not suicidal. Not filthy or destructive. Has not been restrained or confined. Has always taken patent medicine. ——— ——

Dec 23 Dec 23/92. Had a convulsion last night. Was somewhat restless for a couple of hours; sleeping
" 24 about 6 hours. 1 AM (830). Pulse 86 Te 99.8. 7 PM. Pulse 80. Te 98.8. Dec 24/92. Had one convulsion
" 25 last night; was restless for an hours, sleeping 8 hours. 830am. Pulse 82. Te 99. Dec 25/92. Has had
" 27 one or more fits each night. Was restless for a short time, but sleeps well. 830 AM. Pulse 88. Dec 27/92. Slept 7
" 28 hours last night. Am Pulse 100. Dec 28/92. Slept 8 hours last night. 830am Pulse 84. Fits occur
" 31 quite frequently by day. Out on medicine. Dec 31/92. Has slept well the past 3 nights. Pulse
1893 has been 102. 88 and 84, the past 2 and present mornings respectively.
Jan 3/93 Jan 3/93. Wt 143½ lbs. Pulse 92. Jan 5/93. Fits have been occurring very frequently, especially
" 10 Yesterday. Bromides were increased to 50 grains per diem. Jan 10/93. Visited today by friends.
" 25 Jan 25/93. Is uniformly quiet; but slightly restless occasionally, sleeping well at night. Has been up daily neatly dressed, clean and tidy, quiet and well-behaved. Converses very freely, calmly and coherently, with his fellow patients, the attendants & officers. Plays games, cards & billiards. Fairly active physically, although getting around with some difficulty on account of lameness. Fits have been quite frequent, occurring both night and day, and rarely a day, and very slight convulsive movements in many of them. — Health fairly good.

Feb 3/93 Feb 1/93. Was visited today by a friend. Feb 3/93. Wt 148 lbs. Pulse 104.
" 10/18 Feb 10/93. Today visited by his mother. Feb 18/93. Again visited by mother.
" 25 Feb 25/93. Was permitted to visit friends in town today. Is uniformly quiet & restful at night, sleeping almost invariably 8 hours each night. Only 6 nocturnal fits have been reported during past 4 weeks. By day, Continues quiet, clean, tidy & well-behaved. Seems fairly contented here. Converses freely, calmly & coherent. Is gaining some in body weight.

Mar 3/93 March 3/93. Wt 139½ lbs. Pulse 92. March 17/93. Was visited today by a friend.
" 17/29 March 17/93. Today visited by his mother. March 29/93. Nocturnal fits have been rather infrequent. Has, as a rule, rested well & quietly. Has been quiet & well-behaved by days. Last night had 3 convulsions & became maniacal & very noisy & unmanageable for a short time. Is quieter & well-behaved today.

Apl 4/11 April 4/93. Wt 137 lbs. Pulse 92. April 11/93. Has had a fit almost nightly since the 5th inst. —
" 27 April 27/93. Fits are again less frequent. Is about as usual by day.

May 3/4 May 3/93. Wt 136½ lbs. Pulse 88. May 4/93. Has today visited by his mother.
" 22 May 22/93. Unless when disturbed by fits at night, seems at rest and sleeps well. Have had 27 of these convulsions in past 4 weeks, at night, but since 8th inst. there have been 2 & sometimes 3 in a single night, some of them very severe. Fits also occur by day, but seem less frequent now.
" 27 Health, conduct & behavior Continue about as usual. May 27/93. Slept well last night. 5 am had a convulsion

1893

May 30/31 May 30/93. 12:30 AM. Had a convulsion. May 31/93. Had a convulsion during the night. Slept 8 hours. — Appetite Continues good; bowels regular. No cough noticed. Goes out walking regularly. Has had from 4 to 7 Convulsions, each day, during this month.

June 1/2 June 1/93. Slept 8 hours; Had a Convulsion each night. June 4/93. 2 Convulsions last night.
" 5/12 June 5/93. Wt, today, 138½ lbs. June 25/93. Had no convulsion in each of the nights of the 8th, 9th
" 28 10th 11th 12th 15th 17th 19th 21st and 24th inst. June 28/93. Had 2 Convulsions last night. Yet patient has
" 29 slept well (8 hours) on each of these nights. June 29/93. Has had no convulsion since night of 27th inst.
" 30 June 30/93. Slept 8 hours last night; had 1 convulsion. Patient does not seem to have had as many Convulsions, as previously. Appetite good. Bowels regular. Goes out walking. Plays cards &c. Health about as usual. ———

July 4/22 July 4/93. Wt, 135½ lbs. July 22/93. One convulsion has been reported in each of nights of the 1st, 4th
" 23 8th 11th 13th 14th 19th 20th 21st inst. July 23/93. Was taken down town for a short visit with friends,
" 31 today. Returned this evening. July 31/93. Patient apparently sleeps well, at night. He has had 2 convulsions in each of nights of 24th & 25th & one in each of nights of 28th 29th & 31st. Has, as a rule, from 2 to 4 fits during the day. Is on medicines. Appetite good; bowels regular. Goes out for his walk, with the rest. Takes quite an interest in cards & other games. In other respects, about as usual.

Aug 1/3 Aug 1/93. Was today visited by friends. Aug 3/93. Wt 140 pounds. (Has made a slight gain) —
Aug 19 Convulsions are reported as follows. 2 on each night of the 5th inst. 1 on each of nights of 6th 7th & 8th inst.
1 on each of 9th & 10th in day time: 1 each night of the 11th 12th 15th & 21st inst. Friends took him to visit
" 25/26 with them in town on the 13th inst. Aug 25/93. Visited by friends. Aug 26/93. Visited by mother.
" 30 Aug 30/93. Appetite continues good. Has convulsions but seldom, of late. Plays billiards &c.

Sep 8/ Sep 8/93. Wt 142 lbs. Sep 12/93. Visited, today, by mother.
" 23/26 Sep 23/93. Taken down town by friends to spend the afternoon with them. Sep 26/93. One convulsion
" 30 reported during last night. Sept 30/93. Bowels are constipated at times. Appetite good. Fits seem to have been very infrequent this (September) month.

Oct 1 Oct 2/93. Has a sore toe. Also complains of head-ache & of not feeling well. Has been out of doors today.
" 3 Ate but little. Oct 3/93. Wt 131 pounds. (Has lost greatly in weight, without apparent cause)
" 17/20 Pulse 88. Oct 17/93. Had one convulsion last night. Oct 20/93. No material change to report, except that fits seem fewer in number during the past — weeks or so.
" 31 Oct 31/93. Appetite Continues good. Bowels still constipated, at times. Talks freely & pleasantly. Plays games. Goes out walking. No fits have been reported, of late. No 1893 Wt 135 lb P. 76.

Nov 3/93 One convulsion during day. Nov 6/93 Walks out. Takes med. Talks freely. Plays games. Reads
" 9/30 Nov. 10. Nov 23. 28. 1 Conv. during day 9 on 10 & 1 during night. Nov 30. 93. Walks, reads, plays games, talks freely. Visited by friends — No complaints. Dec 4/93 Wt 141 lb. P. 80. Dec 25.93. Taken to town to spend Christmas
Dec 1893 1/93 1 Conv during night. Dec 30/93 Has convulsion occasionally. Plays games. Complains of
Jan 1894/31 throat being sore. Appetite good. Extra diet. Jany 2 94 Wt 144 P. 80. Jany 31. 94 No
Feb 1/5 convulsions noticed during month. Otherwise same. Feby 1/94. Wt 145 lb. Feby 5 94
" 24 1 Conv during night. Feby 24/94. For the past 4 days, he has been complaining of rheumatic pains
" 28 in arm & leg & has been up & down from his bed. Feb 28/94. Has been up, since last note & feeling some better. Is about as usual. Fits do not seem so frequent of late. Patient is on medicines —

(Carried to 356)

Whole No. 3216.
Residence, 2531 Nicollet Ave, Minneapolis, Minn
Date Admission, 22nd December 1892
Admitted by, Dr Kielbourne Hour, 7 P.M.
How Sent, J.R. Corrigan, Jof P., Hennepin County
Sex, Male
Age, 53
Civil Condition, married
Children, Three
Age Youngest Child,
Occupation, Has read law + medicine, taught school; general business (merchandise)
Degree Education,
Profession Religion, Belongs to no one Church
Habits, Good
Nativity, New York State
Physicians Committing, H. A. Jones and A.P. Hellekinson
Correspondents, Mary L. Porter, wife 2531 Nicollet Ave, Mpls Minn

No. for Year, 128.
Insane Relatives, no
Cause Exciting, Financial
Cause Predisposing,
Form, Manic-Acute
Accompanying Bodily Disorder, not stated
Suicidal or Not, not
Date of this Attack, 6 weeks ago
Duration, 6 weeks
No. of Attack, 1st
No. of Admissions,
Age First Attack, 53
Time of Leaving, Jan. 19th '93
Time in Hospital, 27 ds.
Result, Recd.

1/8/93 Spcl. Correspt. A. E. Helmick No. 6. Boston Block Minneapolis

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Evidently D. Baker Jan 10/93

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, active

MEMORY:
Past Events, Seems good
Recent Events, Seems good
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct

REASONING POWER: Perverted –
Ordinary Subjects,
Own Mental State,
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Yes
Depressed,

DELUSIONS:
Systematized or Not, various – of inventions;
Special Subjects, and memorizing material
Transitory or Not, for a book

HALLUCINATIONS: Denies
ILLUSIONS:
CONVERSATION:
~~Coherent~~ or Incoherent, at times
Voluble or Reticent, very voluble

GENERAL DESCRIPTIVE REMARKS:

Has arcus senilis. Artery is a trifle stiff + slightly tortuous. Claims there was no reason whatever for sending him here. Thinks it was because his friends thought "he was doing too much for a sick man"; directing 3 crews of men working on his inventions of a sled which would make 30 miles an hour (formerly used to say 60 miles); a lever, by which a gasoline engine of 3 horse power Honed do the work of a Corliss Engine of 250.000 horse power; and on a stone-boat; has always memorized, and could repeat, without any manuscript, material for a book of 15 chapters, say 300 or 500 pages. – Becomes quite excited in telling his story of the indignities he suffered in being arrested + sent here + how he was treated on the way here –

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9½ in WEIGHT, 129 pounds weighed 4 years ago 155 to 158 lbs. NUTRITION, much below normal.
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, slight Coatings, none Promptness Movement, prompt
PUPILS, Equality, equal Size, about normal
Response Light, some, but dilatation not complete Accommodation, yes
SIGHT, farsighted – both eyes about equal –
HEARING, Good
COORDINATION, Arms, Fingers tremor, typewhat, good.
Legs, Standing in foot, very good; Standing, eyes shut, good slight swaying; Turning quickly slight hesitation
TREMORS, Hands, None Tongue, slight
Facial Muscles, slight, if any. General,
REFLEXES, Patellar, Equal; somewhat diminished – 2 or 3. Dr. O's scale
Other Reflexes,
ARTICULATION, ~~Hesitating~~, prompt Slurred, clear
FACIAL EXPRESSION, normal.
SENSIBILITY, Seems to be normal.
HEART, Seems fairly good.
LUNGS, Seem fairly good. Girth 34½ in Expansion 2½ in
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal, yes	Constipated,	Irregular,
APPETITE, Good, very	Medium,	Poor,
SLEEP, Good, very, now –	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, ?

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother dead – 70 – says of old age.
Father or Pat. Relations, Father dead – 85 – claims was always healthy.
Brothers or Sisters, 3 brothers all living; claims good health. No history of apoplexy, nervousness &c.

1892 This man was brought here by J.E. Mullaney, Deputy, & brother, with following history. Has read law and medicine, taught school, genral merchandise business; habits good; Cause of this attack is financial; form acute; first symptoms were manifested 6 weeks ago; was exalted, deluded; had conversation with heavenly people. This is first attack. Is now exalted; has delusions and hallucinations of sight. Is disposed to injure others from sudden passion. Is not suicidal; but is destructive. Not subject to any bodily disease. Has been confined only at home. Has been under medical treatment. Had financial troubles, loss of money; typhoid fever in August.

Dec - On admission, brought into the office, with his hands strapped to a belt. Constantly talking. - Talks chiefly about the great injustice which has been done him, in taking him, a sick man who had suffered from lung-trouble, had been warned by his physician not to expose himself, out into the open air and compelling him to sit in the smoking-car in his fur coat. Repeats the story with emphasis & gestures. Is a tall, thin, pale man. Pulse, while in office, 135. Was put up in Cr. 10 Pm. Pulse 126. Tem 101. Dec 23/92. Was quite extremely noisy for 4 hours last night, getting up out of bed, tipped his bed over, pounded on the floor, was restless all night and slept none at all. 730 am. Pulse 120. Tem 98.8. Is up, walking the floor almost constantly, quite rapidly. Ate well. 530 Pm. Pulse 108. Dec 24/92. Was quiet, rested and slept well, last night. Attempt was made to keep patient in bed yesterday and today; he was very unwilling to remain in bed and managed to secure his clothes & dress. " 25 - Refused to permit taking of temperature. Dec 25/92. Was restless out of bed part of the night sleeping about 4 hours. Pulse ranged from 105 to 115. 730 am. Pulse 110. Tem 99.4 - " 26 Was kept in bed for a few hours this morning. 5 Pm. Pulse 118. Dec 26/92. Was restless and talked some during the night, sleeping 4 hours. Pulse, counted every 2 hours during the night, ranged from 93 to 118. 730 Am. Pulse 110. 5 Pm. Pulse 108. Was kept in bed for a short time " 27 this morning. Wt (in underclothing) 117½ pds. Dec 27/92. Slept 6 hours last night. Pulse ranged " 28 from 90 to 104. 730 Am. Pulse 120. 530 Pm. Pulse 114. Dec 28/92. Restless, sleeping but 2 hours last night. Pulse ranged from 105 to 120. 730 Am. Pulse 118. 5 Pm. Pulse 112. - " 29 Dec 29/92. Slept 4 hours last night. Pulse ranged from 93 to 120. 730 Am. Pulse 110. 5 Pm. Pulse 112. Wrote a letter to the Superintendent yesterday, in a rather scrawly, messy, hand, at length setting forth his own case in a forcible way, complaining of his treatment & asking to be sent home; " 30 (See letter). Dec 30/92. Was restless, talked some last night. Slept 5 hours. Pulse ranged from " 31 104 to 116. Dec 31/92. Slept 7 hours last night.

1893 Jan 1/93 Jan 1/93. Slept 2 hours last night. " 19 Jan 3/93. Wt 130 pds. Pulse 104. Has been quite restless at night the past 3 nights. Jan 19/93. Since the last note, has been uniformly quiet at night. Slightly restless at times, on the whole sleeping much better & quite well. At time of admission was excited & very restless; obstinate, refusing to stay in bed; restlessly walking the floor while up, almost incessantly & excited, talking to the patients & others, complaining of the injustice he suffered in being brought here & in being kept here. Told after also of the projects he was engaged in, his 3 inventions, of the speedy sleigh, the stone-boat and the Engine, in which, by the use of levers, he was to accomplish the work of a 200,000 horse power Corliss Engine, by means of a 3 horse power gasoline engine -

Gradually quieted down, becoming much calmer. Walked about less restlessly, talked Calmly & rationally, & indulged in games. Clear title and well balanced Even at best,

Dec 28th 1892

Asylum, Rochester, Minn.

Dear Mate & Philden:- I hope this may find you all well, and I can assure you that my bodily and mental condition are A-1, although I am not gaining as rapidly as I might wish, owing to the difference in food, between this place and my dear home, where all of the luncheons are attainable and where I had that quiet sleeping like a baby at night, which accelerated my convalescence and where every day I left you most inscrutably to me. I was superintedning in detail all of the operations of my men with as clear and well ballanced brain, without any deflection from an even equipoise, as any man possessed in my beloved City of Minneapolis, While here, I have been compelled to listen to the ____ cusses and profanity of mad men, and I do declare that there is not a sound articulated in any part of God's dominions that is not here produced, and the next day after my arrival here, I told Drs Baker and Moore, that right here in this hall, with its beautiful frescoes paintings, and ornimentations, and singing birds, herbs and beautiful flowers that exhale sweet perfume that fills the air that Dante, in his Inferno had its inception, incubation and birth. But the sadest thought of all, the thought that brings tears to my eyes, and melts my heart in sympathy is to behold the BROKEN REEDS, who once posessed minds strong, clear and vigorous, and of exact equipoise, now fallen from that grand state into Urebian darkness, never again in the world to be lit by the torch of reason.

I should have written you before, but have been looking for some of you down ere this, but dear Mate, shall expect you on the first train that comes east on the Milwaukee road, and wife of my bosom, and mother of my babies shall not expect you to disappoint me.

And now will close, hoping to see you tomorrow evening, if not before, and shall bid you, and shall bid you good night, and pleasant dreams, with love to you and all the family, and enquiring friends.

Your loving husband,

W.S.Porter.

1892

This
Has rea
-tack i
deluded
and hall
is destru
treatment

Dec – On admission brought into the office, will be
Talks ch
had suf
the oper
with s

" 23 putsy C° Pulse 125 Tes 101 Dec 23/92. Was quite extremely noisy for 4 hours last night, getting up out of bed, tipped his bed over, pounded on the floor; was restless all night and slept none at all. 7.30 am. Pulse 120. Tes 98.8. Temp, walking the floor

" 24 almost constantly, quite rapidly. Ate well. 5.30 Pm. Pulse 108. Dec 24/92. Was quiet, rested and slept well, last night. Attempt was made to keep patient in bed yesterday and today; he was very unwilling to remain in bed and managed to secure his clothes & dress.

" 25 Refused to permit taking of temperature. Dec 25/92. Was restless out of bed part of the night sleeping about 4 hours. Pulse ranged from 105 to 115. 7.30 Am. Pulse 110. Tes 99.4 –

" 26 Was kept in bed for a few hours this morning. 5 Pm. Pulse 118. Dec 26/92. Was restless and talked some during the night, sleeping 4 hours. Pulse, counted every 2 hours during the night, ranged from 93 to 118. 7.30 Am. Pulse 110. 5 Pm. Pulse 108. Was kept in bed for a short time

" 27 this morning. Wt (in underclothing) 117½ pds. Dec 27/92. Slept 6 hours last night. Pulse ranged

" 28 from 90 to 104. 7.30 Am. Pulse 120. 5.30 Pm. Pulse 114. Dec 28/92. Restless, sleeping but 2 hours last night. Pulse ranged from 105 to 120. 7.30 Am. Pulse 118. 5 Pm. Pulse 112. –

" 29 Dec 29/92. Slept 4 hours last night. Pulse ranged from 93 to 120. 7.30 Am. Pulse 110. 5 Pm. Pulse Wrote a letter to the Superintendent yesterday, in a rather scrawly, messy, hand, at length setting forth his own case in a forcible way, complaining of his treatment & asking to be sent home;

" 30 (see letter). Dec 30/92. Was restless, talked some last night. Slept 5 hours. Pulse ranged from

" 31 104 to 116. Dec 31/92. Slept 7 hours last night.

1893
Jan 1/93 Jan 1/93. Slept 2 hours last night. Jan 3/93. Wt 130 pds. Pulse 104. Has been quite restless

" 19 at night, the past 3 nights. Jan 19/93. Since the last note, has been uniformly quiet at night, slightly restless at times, on the whole sleeping much better & quite well. At time of admission was excited & very restless; obstinate, refusing to stay in bed; restlessly walking the floor while up, almost incessantly & excitedly talking to the patients & others. Complaining of the injustice he suffered in being brought here & in being kept here. Told often also of the projects he was engaged in, his 3 inventions, of the speedy sleigh, the Stone-boat and the Engine, in which, by the use of levers, he was to accomplish the work of a 200,000 horse power Corliss Engine, by means of a 3 horse power gasoline Engine –

Dec 28th 1892. (1)

Arthur H. Kilbourn Esq.
Sheriff.
Impaneled

The undersigned W. S. Porter of Muscatine Co. Iowa wishes to make the following Statement. To wit.

Court was in the argument on this that Mr. Wells McClain and Sam Dew together with a brother from Chicago and Mr. Jones did force me from the quiet of my home in which I slept like a baby what ever accelerated my Carelessness which I had all the facilities to be procured in a large City and I forgot to state the Deputies of Hennepin County assisting in said eviction Court too (2) That I was cited to appear before

His Honor Judge Corgan Probate Judge of said Hennepin County to pass under the observation & examination of a Commission of Insanes to be composed of not less than two reputable Physicians that there was no Physician present and that there was ~~not~~ no examination except the asking me my name place of nativity age &c. Which Court and the Honorable Judge makes attestation upon a Commitment stating that one W. S. Porter of Minnesota Hennepin County State of Minnesota is a fit and proper subject for insane and remanded to the Asylum for Insane located at Rochester

Nov 1/93 Nov 1/93. Wt 166 pds. Pulse 98. Nov 28/93. Behavior quiet, yet he is somewhat destructive in clothing.
" 28/93 Nov 28/93. During past 2 days, has had "noisy spells" twice inclined to be ugly. Nov 30/93. No change, usually.
Dec 1/93 Dec 1/93. Wt 169 pds. Pulse 96. Dec 31/93. Has been fairly quietly behaved during month, & no special improvement.
Jan 1/94 Jan 1/95. Wt 163. " 86. Jan 14/95. Behavior has improved, the past 2 weeks, is more quiet & not so
" 31 destructive. Jany 31/95. Behavior much improved during the month. Habits also clean.
Feb Feb 1/95. Wt 168½ pds. Pulse. March 1/95. Wt 165 pds. April 1/95. Wt 164 pds. Pulse 72.
Mar 1 April 30/95. For a while, he is quiet & well-behaved: at other times, quarrelsome & ugly to fellow patients.
April 1/30 much inclined to be ugly, when annoyed: other times boisterous & incoherent in language. Has not been filthy or destructive, during this quarter. He has delusions – No improvement mentally.

To Form A – 202 –

1892 This man was brought here by J.E. Mullaney, Deputy, & brother, with following history. Has read law and medicine, taught school, general merchandise business; habits good; cause of this attack is financial; form acute; first symptoms were manifested 6 weeks ago; was exalted, deluded; had conversation with heavenly people. This is first attack. Is now exalted; has delusions and hallucinations of sight. Is disposed to injure others from sudden passion. Is not suicidal; but is destructive. Is not subject to any bodily disease. Has been confined only at home. Has been under medical treatment 4 W.

(5)

Mann Supt Count ——
Any charge that because
I wrote during said illness
I/s Mss. did Memorize
matter sufficient for a
Book of 18 Chapters &c. Mss
although I do not know yet
myself just what the subdivisions
will be and that faithful that
this is not one reliable word
of mine or pen and that I am
able to make a dictation of 200
words a minute if necessary
take them in the Cal. Court
of Course they although I
am able to make dictation
verbatim ad literatim and
as a party who heard
a recitation of one Chapter
Several times I deny that it was
always just the same. Now they
do not deny me the right to

Memorize & get the great air is
in position if upon the due public
although I might possibly a remand
or investigate the probability to withhold
them judgment until they had
given fair & impartial testimony
then I/s am a deception a
fraud to speak out that the
whole world might hear
or if not to forever hold
their peace Count H.
That during said sickness
did invent a sled which throws
off Gas into the least amount
thereon & make 60 miles an hour
and as a graduate of Harvard
remarked to me like the property
of Rubber so dry and by q.
you by persons the Mathematical
operation until the end of
time and yet that I would
preside over like a responsible
Remarks Count J.
Their allegation is that
I have taken Arsenic or Lemon

as he was the meanest appearance
water for you know since
Cleveland times they pass
but missed their Dec. Execution

Now pulling all the allegations
in my tabulation then thought
it was rather too much for a
man whose usual weight in
the county is 168 but owing
to sickness was reduced to
the weight of W.S. Porter Automaton

Now Gentlemen
I am willing to pass high Heaven
to make attestation to the above
knowing that I have many friends
who would come to my to testify
to the truthfulness of such
attestation yea even with Comic
like rapidity if you allow
the expression and that to without
proclamation Now Gentlemen of
this Asylum this is the whole truth
and Nothing but the truth so help me God
(over)

"Why a lot of Gentlemen
Because the Lord is not found
in the wagon when and
Poor Small Cyclone and this day
the Pharaoh strong Lord
when at the zenith of his
power for you remember that
he said give me a place
to set my machine which
you know was an immense
Screw worked by levers
and he would take
the world But the proud
Pastors upon the Jordan flow
death the neighing of the Israelites
Caesar broke Adrenalines
heart and the Lever because
one of the boat arts like
the art of making Malabar
Glass cooler and because
during my illness I
discard the Sages and
am now in the knowledge
in facts & about Cases

Gradually quieted down, becoming much calmer. Walked about less restlessly, Talked calmly & more rationally, & indulged in games. Clean, tidy and well-behaved. Even at best, had an air of self-importance and his writings are rather grandiloquent. And written a few days past, has again gone through the story of his inventions. Has written quite frequent letters. Wt today 140 pounds.

Was today visited by his wife & daughter taken home.

Physical condition is good & his weight has kept up quite well. 9/94 - 161 pds; 11/94 - 161½ pds; 2nd 10/94 - 159 pds).

Nov 1/94 Nov 1/94. Wt 156 pds. Pulse 98. Nov 28/94. Behavior quiet, yet his somewhat destructive as clothing.
" 28/94 Nov 28/94. During past 2 days has had "noisy spells" & was picking & bleeding. Nov 30/94. No change, generally.
Dec 1/94 Dec 1/94. Wt 159 pds. Pulse 96. Dec 31/94. Has been fairly quietly behaved during month, & has special improvement.
Jan 1/95 Jan 1/95. Wt 163 " 86. Jan 14/95. Behavior has improved, the past 2 weeks; is more quiet & not so
" 31 destructive. Jany 31/95: Behavior much improved during the month. Habits also clean.
Feb 1/95 Feb 1/95. Wt 158½ pds. Pulse 96. March 1/95. Wt 165 pds. April 1/95. Wt 164 pds. Pulse 72.
Mar 1 April 30/95. For a while has been quiet & well-behaved: at other times, quarrelsome & rough, & fellow-patients
Apr 1/96 much inclined to be noisy, when annoyed: sometimes tears & destroys clothing. Habits cleanly & neat.
Has not been filthy & destructive, during this quarter. Still has delusions. No improvement & mentally

" 19 at night, the night. Night of admission walking the Complaining often also of Stone-boat a

past 3 nights. Jany 9/93 Since the last note, has been uniformly quiet & orderly at times, out in the yard sleeping much better & quite well. At other times, very restless & irritable, refusing to stay in bed; restless & wide awake, almost incessantly & excited, talking to the patients & complaining of injustice he suffered in being brought here & in being kept here. He was engaged in the 3 inventions of the speedy sleigh, by means of which, by the use of levers, he was to accomplish the work of a 200,000 horse power Corliss Engine, by means of a 3 horse power gasoline Engine —

Jan 1893 - 202 -

1892

This man was brought here by J.E. Mullaney, Deputy, & brother, with following history. Has read law and medicine, taught school, general merchandise business; habits good; Cause of this attack is financial; form acute; first symptoms were manifested 6 weeks ago; was exalted, deluded; had conversation with heavenly people. This is first attack. Is now exalted; has delusions and hallucinations of sight. Is disposed to injure others from sudden passion. Is not suicidal; but is destructive. Not subject to any bodily disease. Has been confined only at home. Has been under medical

(1)

S.K.

I have this proposition to make Gentlemen.

I will defray all expenses to and from this City to Minneapolis and (7m) back, to our best Hostelry the next Hotel that what I am paid may be decided by you at the home of my friends when the beans / first / are a third of a cutlery

Yours Truly
W.S. Porter

P.S. Would like to take first boat in morning P.

(6)

Farm wagons
Any thing that walks or rides
either upon Land or Water
Has missing thing dragged
me to this place chiefly
that I could be greatly in
Dispatch business
the quiet home amid
Frescoes flowing & beautiful
ornamentation with Singing
birds and sweet flowers that
exhale truly perfumes
Now the reason that they
dragged me so ignominiously
from that home I plan
three (3) cranes at work
directing personally the various
work to be performed me
Crew upon a time wagon
my completing the shift for
trial me upon Cap Rouge 40
foot boat at St Paul

at night, the
night. Height
of admission
walking the
Complaining
often also o
Home-boat a

of a 200.000 horse power Corliss Engine, by means of a 3-horse power gasoline Engine —

Gradually quieted down, becoming much calmer. Walked about less restlessly, Talked calmly & more rationally, & indulged in games. Clean, tidy and well-behaved. Even at best, had an air of self-importance and his writings are rather grandeloquent. And written a few days past, has again gone through the story of his inventions. Has written quite frequent letters. Wt today 140 pounds.

Was today visited by his wife & by her taken home.

Discharged

Christopher A Carli.

Jan 14 '94. Noisy & restless thro during night. Jan 28 '94 Noisy thro during night. Jan 31 '94 Appetite very good
" 31 Bowels reg: Phys condition very good. Behavior restless, noisy & destructive. Talk generally incoherent. Has many delusions and illusions. Visited by friends 15th inst. Habits dirty. No improvement noticeable. — .. ——

Feb 1/94 Feb 1/94. Wt 168 pds. Pulse 78. Feb 28/94. On about one-half of the nights during this month, patient has been noisy for from 4 to 6 hours (at each) & has slept very poorly. Has also, at times, been destructive & habits filthy. Is noisy & destructive, by day also. Appetite very good; has to be fed, not at the bell; still shows delusions & illusions. Talks incoherently. Habits are dirty; no improvement noticed. —

March 1/94 March 2/94. Wt 163½ pds. Pulse 115. March 20/94. Has visited by a friend, today. — .. ——
" 31 March 31/94. There appears to be no improvement, from month to month. Still destructive; habits are dirty.

Apl 1/94 Apl 1/94. Wt 168 pds. Pulse 78. April 26/94. Patient was vaccinated today. — .. ——
" 30 Apl 30/94. Has visited by his wife on the 28th & 29th inst. There is no improvement to note, at this date.

May 1/94 May 1/94. Wt 164 pds. Pulse 80. May 5/94. Has been very stupid for past 4 days. Continues destructive.
" 29/31 May 29/94. Destructive, noisy, inclined to be ugly, during day. May 31/94. No special improvement & noted.

June 1/94 June 1/94. Wt 165 pds. Pulse 104. June 30/94. Has been very noisy the past 2 nights, sleeping poorly.
" 30 Appetite is very good; (Still is fed at the bell); Conduct & behavior do not improve any. He is noisy, destructive, cross & at times inclined to be ugly. Talks incoherently & still manifests delusions & illusions; habits are very dirty. Occasionally gets into trouble with fellow patients, but less frequently than formerly. Health good.

July 1/94 July 1/94. Wt 155 pds. Pulse 100. — July 10/94. Visited by a friend. July 29/94 Has visited by brother, today.
" 31 July 31/94. General note for month of June still holds good. No improvement observed.

Aug 31 Sep 30 Oct 22 During these 3 months, there is no change in either his mental or physical condition. He has his usual "spells" when he is noisy, both by day & night; frequently destructive, mischievous & pugnacious. Talks very incoherently & his letter also are in the same strain. Habits are very dirty (every day); no improvement to note. Physical condition is good & his weight has kept up quite well. 9/1-161 pds: 10/1-161½ pds: 19/1-159 pds: 20/1-159 pds.

Nov 1/94 Nov 1/94. Wt 156 pds. Pulse 98. Nov 20/94. Behavior quiet, yet he is somewhat destructive as clothing.
" 28/30 Nov 28/94. During past 2 days, has had "noisy spells" & was quite destructive. Nov 30/94. Habits, generally

Dec 1/94 Dec 1/94. Wt 169 pds. Pulse 96. Dec 31/94. Has been fairly quietly behaved during month, & no special improvement
Jan 1/95 Jan 1/95. Wt 163 " " 86. Jan 14/95. Behavior has improved, the past 2 weeks; is more quiet & not so
" 31 destructive. Jany 31/95: Behavior much improved during the month. Habits also clean.

Feb 1 Feb 1/95. Wt 166½ pds. Pulse 90. March 1/95. Wt 165 pds. Pulse 96. April 1/95. Wt 164 pds. Pulse 72.
Mar 1 April 30/95. For a while, his quiet & well-behaved: at other times, quarrelsome & ugly to fellow-patients
Apr 1/30 much inclined to be ugly, when annoyed: utters talks lonely & uses blasphemous & incoherent language.
Has not been filthy or destructive, during this quarter. Still has delusions. No improvement to mentally.

Topeka - 202 -

Whole No. 3220.

No. for Year, 132.

Residence, Stillwater, Washington Co. Minn.

Date Admission, 2nd January 1893.

Admitted by, Dr. Phelps Hour, 7 PM

How Sent, Rudolph Lehmicke, Jr. Washington

Sex, Male

Age, 37

Civil Condition, married

Children, Yes, two

Age Youngest Child,

Occupation, Dealer in Stone and Lime

Degree Education,

Profession Religion, Not a Church Member

Habits, Intemperate; took the Keeley

Nativity, Stillwater, Minn

Physicians Committing, T. C. Clark & B. J. Merrill

Correspondents, J. R. Carli (brother) Stillwater Minn



Relatives, — Insanity not Hereditary.

Exciting, a prolonged spree about Xmas time

Predisposing, Intemperance

Form — Acute (Alcoholic)

Complicating Bodily Disorder, None.

Operation or Not, not

Duration of this Attack, about 10 days ago

Duration in, about 10 days.

Number of Attack, 1st

Previous Admissions,

First Attack, 37 years

Date of Leaving, Jan. 7. 1893

Days in Hospital, 5 yrs. 5 d.

Result, Discharged Feb. 9. 1893 Much Improved.

EXAMINATION ON ADMISSION.

Exd by Dr. Baker Jany 2/93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Wont talk at all
Quick or Sluggish,

MEMORY:
Past Events, probably fairly good, from past experience
Recent Events,
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Wont talk at all
Correct or Illusive,

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, at times; Changeable
Depressed, Yes & crying; will not talk.

DELUSIONS:
Systematized or Not, ?
Special Subjects,
Transitory or Not,

HALLUCINATIONS: ?
ILLUSIONS:

CONVERSATION: Will not talk.
Coherent or Incoherent,
Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:

Patient sick: examined in bed; when he has been here since admission: will not say a word; is now crying some: quite bad at times. Complies with request to get up & with some urging.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10 in. (Estimated) WEIGHT, NUTRITION, below normal; slightly anaemic

WOUNDS OR ABNORMALITIES, Slight scratches; scar on forehead; abnormalities, none.

TONGUE, Tremors, Coatings, Promptness Movement, will not show Tongue.

PUPILS, Equality, Equal Size, about normal

Response Light, some Accommodation, some

SIGHT, probably good

HEARING, probably fairly good

COORDINATION, Arms, Legs, Cannot test at present; will not do as requested.

TREMORS, Hands, Tongue, Facial Muscles, General, cannot test, as he will not do as requested —

REFLEXES, Patellar, equal; much exaggerated — sorq. —

Other Reflexes,

ARTICULATION, ~~Hesitating~~, Has been fairly prompt ~~Slurred~~, and clear.

FACIAL EXPRESSION, Sad

SENSIBILITY,

HEART, Sounds clear, slow & fairly strong.

LUNGS, Seem good

EXAM. URINE, — See examination —

OPHTHALMOSCOPIC EXAM.,

HABITS, ~~Dirty~~, somewhat irregular Clean, Caréless, at times; obstructive

BOWELS, Normal, Constipated, Irregular, Yes

APPETITE, Good, Medium, Poor, irregular.

SLEEP, Good, fairly, at present Poor, Irregular,

PULSE, See Record RESP., — TEMP., —

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably short ONSET GRADUAL OR SUDDEN, Sudden

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters, Some brothers died of consumption.

1893

This patient was brought here by Mr. Tubbs and Charles Staples, + wife, with the following history. Habits have been intemperate; took the "Keeley Cure" a year + a half ago. Took to drinking again, about 6 months after. Supposed cause of this attack is a prolonged spree about Christmas time. Form is acute. There is no accompanying bodily disorder or disease. First symptoms of disease were manifested about 10 days ago, by hallucinations + delusions. This is first attack. Insanity is now manifested in that he thinks there is a Conspiracy to declare him insane. Thinks he possesses hypnotic powers. Is suspicious + irritable. No disposition shown to injure others. Is not suicidal; not filthy or destructive. Has not been restrained or confined. Has been under medical treatment for the last week, by bromides + chlorals; produced about 4 hours sleep in 24 hours; has taken considerable — milk for nourishment.

Jan 3 Jan 3/93. On admission, last night, was put to Bed on the "Sick-Ward". Was very restless + out of bed for 6 hours, quite noisy for 3 hours, & extremely so for 1 hour, sleeping but 2 hours, last night. Was very wild and excited when awake. Could scarcely be kept in bed. Am. Pulse 88, small, irregular, soft. Drank a glass of milk after much urging. Was this morning visited by his wife. PM. Is wildly crazy; given hyos. Pulse quite rapid + small; skin hot and offensive; tongue dry. Refuses food. Given hyoscin too and morph. ¼ of which he took half. 10 PM. Pulse 66, small + soft. Is comparatively quiet. Took some milk for supper, also some from night-nurse. " 4 Jan 4/93. Restless 4 hours, slightly noisy 1 hour. Sleeping 3 hours last night. Given hypodermic at 9 PM. Says "he wants to kill himself" - medicine given also during night. Bowels moved. Am. Is quieter; remains in bed. Is subject to delusions. " 5 Drank considerable milk. Pulse fairly full. Jan 5/93. Was restless for 2 hours, slightly noisy 1 hour, sleeping 6 hours last night. Medicine is given at regular intervals each night. Am. Is " 6 now quiet and more rational. Takes a good deal of milk. Jan 6/93. Very restless for 6 hours, and quite noisy, sleeping but 2 hours, last night. Given hypodermic during night. About " 7 mid-night was noisy, "hallooing". Am. Is very restless + excited. Jan 7/93. Last night, was restless and out of bed for 4 hours, slightly noisy for 2 hours, pounding at his door, sleeping but 1 hour. Again given medicine by night-nurse. Am. Is noisy + pounding at the door of his room. " 8 Jan 8/93. Restless + out of bed, the greater part of last night, sleeping but 1 hour. Has also slightly noisy for 2 hours, extremely so, 1 hour. Given hypodermic - 10 PM. Was noisy "hallooing" moved his bed against the door. About mid-night was pounding at his door + quite wild. Am. Was " 9 given sedative. Jan 9/93. Restless for 6 hours, slightly noisy 1 hour, sleeping but 2 hours, last night. Had passage from bowels (hard). Am. Pulse 66. Given laxative. Is comparatively quiet. " 10 Jan 10/93. Has restless, out of bed, at times noisy + pounding at his door, all last night, sleeping " 11 none. (Hypnotic given by night-nurse did not seem to take effect). Jan 11/93. Restless for 4 hours, out of bed 3 hours, slightly noisy 1 hour, sleeping but 4 hours, last night. Was given hypodermic, as usual. " 12 Am. Is constipated. Given laxative. Jan 12/93. Last night, was restless for 4 hours, out of bed 3 hours, " 13 slightly noisy 1 hour, sleeping but 3 hours. Bowels moved during the night. Jan 13/93. Restless for 7 hours, quite noisy for 2 hours + out of bed, sleeping but 1 hour, last night. Night-nurse found it " 14 impossible to keep him in bed. Jan 14/93. Restless for 2 hours, quite noisy 1 hour, sleeping 7 hours " 15 last night. At 9 PM. Was very violent. Given hypodermic. Jan 15/93. Was restless + out of bed

NAME. Chris. H. Carli

* in under clothing

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 5th	140	72		—
" 10	137	—		3
" 17	135	—		2
" 24	135	—		—
Feby 1	133½	—		1½
" 9	131			2½
" 16	127½			3½
" 24	139		11½ 2½	
Mar 2nd	145½	70	6½	
Apl 11th	162½	86	17	
June 3rd	157	66		5½
July 1st	158	62	1	
Aug 1st	161	64	3	
Sept 2nd	162½	68	1½	
Oct 1st	165	106	2½	

O C.H.CARLI,

ade by Dr.Moore, Feb.17th'93.

spell to day, in which he describes
e said he was at home reading a news-
sudden, he heard a noise like the
d that he called out his wife's name
ide), became unconcious, and that was
came to, he had his head in her lap,
he was unconcious. Says he hears
hat he sees strange things, such as
does not know whether they are so,

e gets a crying spell, every once in
w whether he has some bad disease or
ally). Says he does not know whether
ldren properly or not, he fears not.
e active. He describes his bed, as -
is a blanket and there a sheet;
der it there is probably a rubber
and wire and springs; he wants to
t magnetized.
d to do certain things, -he is
and he is afraid he will disobey.
cant talk; he dont know exactly why,

dow he sees the bricks, and wants to
tween them, and if there is lime in
e right proportion.
e window makes him think he is in
he is, for what he has done in the
ell.
n he can see his wife.

Feb 9 Feb 9/93. Vomited a mucous from his mouth. [illegible] Feb 10 Feb 10/93. Has been visited daily by his wife since the last note. Feb 9/93. Got up + vomited twice during this month + has been upon the hall most of the time since. by day; for a time, quite stupid and

(carried to page 76)

1893

This patient was brought here by Mr. Tubbs and Charles Staples, town
Habits have been intemperate; took the "Keley Cure" a year & a half ago. Drank
again, about 6 months after. Supposed cause of this attack is a prolonged spree about
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symptoms of disease were manifested about 10 days ago, by hallucinations & delusions.
This is first attack. Insanity is now manifested in that he thinks there is a Conspiracy
to declare him insane. Thinks he possesses hypnotic powers. Is suspicious & irritable.
No disposition shown to injure others. Is not suicidal; not filthy or destructive. Has
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Jan 3 Jan 3/93. On admission, last night, was put to Bed on the "Sick-Ward". Was very restless & out of bed for
6 hours, quite noisy for 3 hours, & tremely so for 1 hour. Sleeping but 2 hours, last night. Was very wild
and excited when awake. Could scarcely be kept in bed. AM. Pulse 88, small, irregular, soft. Drank a glass
of milk after much urging. Has this morning visited by his wife. PM. Is wildly crazy; given hyos & morine
Pulse quite rapid & small; skin hot and offensive; tongue dry. Refused food. Given hyoscin too and
morph. ¼ of which he took half. 10 PM. Pulse 60, small & soft. Is comparatively quiet. Took some
" 4 milk for supper, also some bovo night-nurse. Jan 4/93. Restless 4 hours, slightly noisy 1 hour.
Sleeping 3 hours last night. Given hypodermic at 9 P.M. Says "he wants to kill himself" - medicine
given also during night. Bowels moved. AM. Is quieter; remains in bed. Is subject to delusions.
" 5 Drank considerable milk. Pulse fairly full. Jan 5/93. Was restless for 2 hours, slightly noisy
1 hour, sleeping 6 hours last night. Medicine is given at regular intervals each night. AM. Is
" 6 now quiet and more rational. Takes a good deal of milk. Jan 6/93. Very restless for 6 hours,
and quite noisy, sleeping but 2 hours, last night. Given hypodermic during night. About
" 7 midnight was noisy, "halooing". AM. Is very restless & excited. Jan 7/93. Last night, was restless
and out of bed for 4 hours, slightly noisy for 2 hours, pounding on his door, sleeping but 1 hour.
Again given medicine by night-nurse. AM. Is noisy & pounding on the door of his room.
" 8 Jan 8/93. Restless & out of bed, the greater part of last night, sleeping but 1 hour. Has also
slightly noisy for 2 hours, extremely so, 1 hour. Given hypodermic - 10 PM. Was noisy "haloaing"
moved his bed against the door. About midnight was pounding on his door & quite wild. AM. Was
" 9 given sedative. Jan 9/93. Restless for 5 hours, slightly noisy 1 hour, sleeping but 2½ hours, last
night. Had passage from bowels (hard). AM. Pulse 66. Given laxative. Is comparatively quiet.
" 10 Jan 10/93. Was restless, out of bed, at times noisy & pounding on his door, all last night, sleeping
" 11 none. (Hypnotic given by night-nurse did not seem to take effect). Jan 11/93. Restless for 4 hours.
out of bed 3 hours, slightly noisy 1 hour, sleeping but 4 hours, last night. Was given hypodermic, as usual.
" 12 AM. Is constipated. Given laxative. Jan 12/93. Last night, was restless for 4 hours, out of bed 3 hours,
" 13 slightly noisy 1 hour, sleeping but 3 hours. Bowels moved during the night. Jan 13/93. Restless
for 7 hours, quite noisy for 2 hours out of bed, sleeping but 1 hour, last night. Night-nurse found it
" 14 impossible to keep him in bed. Jan 14/93. Restless for 2 hours, quite noisy 1 hour, sleeping 7 hours
" 15 last night. At 9 PM. Was very violent. Given hypodermic. Jan 15/93. Was restless & out of bed

MEMORANDA IN REGARD TO C.H.CARLI,

Made by Dr.Moore, Feb.17th'93.

Had a very talkative spell to day, in which he describes how he was taken down. He said he was at home reading a newspaper, and that, all of a sudden, he heard a noise like the roaring of a cataract, and that he called out his wife's name (she was sitting at his side), became unconcious, and that was all he knew; that when he came to, he had his head in her lap, he does not know how long he was unconcious. Says he hears strange noises now, and that he sees strange things, such as balls of fire, &c. Says he does not know whether they are so, or he just imagines them.

Says he is afraid; he gets a crying spell, every once in a while, says he dont know whether he has some bad disease or not; (talks some irrationally). Says he does not know whether he has brought up his children properly or not, hea fears not.

His curiosity is quite active. He describes his bed, as - here is a spread, and here is a blanket and there a sheet; here is another one and under it there is probably a rubber sheet, and then a mattress and wire and springs; he wants to know if the springs are not magnetized.

He says he is afraid to do certain things, -he is commanded not to do them, and he is afraid he will disobey. Says at certain times, he cant talk; he dont know exactly why, but still he cant talk§

Looking out of the window he sees the bricks, and wants to know if there is mortar between them, and if there is lime in the mortar and if it in the right proportion.

Says the screen on the window makes him think he is in prison, and says it may be he is, for what he has done in the past, and then cries a spell.

Wants to know when he can see his wife.

Feb 10/93. Has been visited daily by his wife since the last note. Feb 11/93. Got up & sound twice during this month & has been upon the hall most of the time since. by day; for a time, quite stupid and

(carried to page 76)

1893

This pat
Habits have been intemperate; [illegible]
again, about 6 months after. Supposed cause of this attack is a prolonged spree
Christmas time. Form is acute. There is no accompanying bodily disorder or disease. First
symptoms of disease were manifested about 10 days ago, by hallucinations & delusions.
This is first attack. Insanity is now manifested in that he thinks there is a Conspiracy
to declare him insane. Thinks he possesses hypnotic powers. Is suspicious & irritable.
No disposition shown to injure others. Is not suicidal; not filthy or destructive. Has
not been restrained or confined. Has been under medical treatment for the last week, by
bromides & chlorals; produced about 4 hours sleep in 24 hours; has taken considerable —
milk for nourishment.

Jan 3 Jan 3/93. On admission, last night, was put to Bed on the "Sick-Ward". Was very restless & out of bed for
6 hours, quite noisy for 3 hours, extremely so for 1 hour, sleeping but 2 hours, last night. Was very wild
and excited when awake. Could scarcely be kept in bed. AM. Pulse 88, small, irregular, soft. Drank a glass
of milk after much urging. Was this morning visited by his wife. PM. Is wildly crazy; given hyos & morine
Pulse quite rapid & small; skin hot and offensive; tongue dry. Refused food. Given hyoscin too and
morph. ¼ of which he took half. 10 PM. Pulse 66, small & soft. Is comparatively quiet. Took some
" 4 milk for supper, also some from night-nurse. Jan 4/93. Restless 4 hours, slightly noisy 1 hour.
Sleeping 3 hours last night. Given hypodermic at 9 PM. Says "he wants to kill himself" - medicine
given also during night. Bowels moved. AM. Is quieter; remains in bed. Is subject to delusions.
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and quite noisy, sleeping but 2 hours, last night. Given hypodermic during night. About
" 7 mid-night was noisy, "hallooing". AM. Is very restless & excited. Jan 7/93. Last night, was restless
and out of bed for 4 hours, slightly noisy for 2 hours, pounding on his door, sleeping but 1 hour.
Again given medicine by night-nurse. AM. Is noisy & pounding on the door of his room.
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" 9 given sedative. Jan 9/93. Restless for 6 hours, slightly noisy 1 hour, sleeping but 2½ hours, last
night. Has passage from bowels (hard). AM. Pulse 66. Given laxative. Is comparatively quiet.
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" 11 none. (Hypnotic given by night-nurse did not seem to take effect). Jan 11/93. Restless for 4 hours,
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for 7 hours, quite noisy for 2 hours, out of bed, sleeping but 1 hour, last night. Night-nurse found it
" 14 impossible to keep him in bed. Jan 14/93. Restless for 2 hours, quite noisy 1 hour, sleeping 7 hours
" 15 last night. At 9 PM. Was very violent. Given hypodermic. Jan 15/93. Was restless & out of bed

[illegible] Medical History of [illegible]

DETAILED HISTORY OF SICKNESS OF MR. C. H. Earle
DIAGNOSIS.
Feb 28 — 93.

DATE	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA.
Feb 28	130	124					Bowels moved freely
"							
27	130	124					
"							
22	130	124					Appears somewhat sluggish. 8 a m.
"							12 P M. dozen afpe
23	130	124					Wrote letter to wife. sitting up all day
"							ate supper is drinking some. appears quite strong
"							and much improved.
24	130	64					Out of bed all day. Bowels freely and appetite good.
"							2 A m. Bowels moved
25	130	56					Up and around all day. Lying on bed occasionally
26	130						" " " " " " " "
27	130	60					6.50 A M Bowels moved. Say to-morrow fruit &c is good for him
"							Up all day lying down in the afternoon on bed as well
"							Talked a [illegible] — Rambling restless [illegible]
"							here & there. Rather noisy at times.
28	120	56					Peaceful restless wandering talk
"							Quite noisy appetite very good & patient
"							groaning at times.

Feb 6 — [illegible] a motion from his bowels today. Has visited yesterday & today, by his wife.
Feb 10/93. Has been visited daily by his wife since the last note. Feb 28/93. Got up & round twice during
this month & has been upon the hall most of the time since. by day; for a time, quite stupid and
(carried to page 76)

Medical History of Christopher H. Carli

DETAILED HISTORY OF SICKNESS OF MR. C. H. Carli

DIAGNOSIS. Feb — / — 93.

DATE	HOUR	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	OTHER DATA
Feb	7 3/4	160		44				Becoming very quiet for a day. Slept the greater part of the night. Is Subject to Delusions. Expression not Intelligent. Is Restless
	9	148		42				Bowels have not moved for several days. 20 Gr. Salol
	3	148		44				7 PM Refused food. Gave Laxative & Enema of Waters Glycerine and Charcoal
	4	136		44				Enema of Waters Glycerine and Charcoal
	5	136		44				10 PM Attacks in great pain groaning.
	6	136		44				Carli has passages at 5 PM 1:30, 3 & 11 PM suppositories
	7	136		44				3 PM Enema of Glycerine 4 PM Bath
	8	136	160	44	44			Has been stupid and sleeping the greater part of the day.
	9	136	146	44	52			Rested all morning 11:30 AM to Water Closet well
	10	136	148	44	42			4 PM appears tired put to bed.
	11	136	148	44	44			7:30 Bowels moved Rested well all day
	12	136	148	44	44			Bowels moved 8 AM & very hard 8:30 Bowels moved freely
	13	136	148	44	40			Appetite not very good. Sat up 6 Hours
	14	136	149	44	42			Bowels moved 7 A.M. Sat up about 6 hours.
	15	136	147	44	42			Bowels moved 8:30 A.M. Appetite fairly good Sat up 6 hours
	16	136	155	44	42			Bowels moved 2 times freely during the day Sat up 6 hours
	17	136	155	44	42			Bowels moved resting well Question pain of the day.
	18	136	145	44	42			Sat up about 4 hours appears to be getting strength Walked freely Bowels moved 2 times
	19	136	142	44	48			Lies quiet in bed. Bowels move freely.

(19) Lies quiet in bed. Bowels move freely.

(carried to page 76)

This is
to declare him insane. Denies no previous hyp[illegible]
No disposition shown to injure others. Is not suicidal; not filthy or destructive. Has not been restrained or confined. Has been under medical treatment for the last week, by bromides & chlorals; produced about 4 hours sleep in 24 hours; last taken considerable — milk for nourishment.

Jan 3 Jan 3/93. On admission, last night, was put to Bed on the "Sick-Ward". Was very restless & out of bed for 5 hours, quite noisy for 3 hours, & tremely so for 1 hour, Sleeping but 2 hours, last night. Was very wild and excited when awake. Could scarcely be kept in bed. Abt. Pulse 88, Small, irregular, soft. Drank a glass of milk after much urging. Has this morning visited by his wife. PM. Is wildly noisy; given hyps & remic Pulse quite rapid & small; Skin hot and offensive; tongue dry. Refused food. Given hyocin too and morph. 4 of which he took half. 10 PM. Pulse 96, Small & soft. Is comparatively quiet. Took some " 4 milk for supper, also some from night-nurse. Jan 4/93. Restless 4 hours, slightly noisy 1 hour Sleeping 3 hours last night. Given hypodermic at 9 PM. Says "servants to kill himself" - medicine given also during night. Bowels moved. Abt. Is quieter; remains in bed. Is subject to delusions " 5 Drank considerable milk. Pulse fairly full. Jan 5/93. Was restless for 2 hours, slightly noisy 1 hour, Sleeping 6 hours last night. Medicine is given at regular intervals each night. Abt. Is " 6 now quiet and more rational. Takes a good deal of milk. Jan 6/93. Very restless for 6 hours, and quite noisy, sleeping but 2 hours, last night. Given hypodermic during night. About " 7 mid-night was noisy, "hallooing". Abt. Is very restless & excited. Jan 7/93. Last night, was restless and out of bed for 4 hours, slightly noisy for 2 hours, pounding at his door, Sleeping but 1 hour. Again given medicine by night-nurse. Abt. Is noisy & pounding at the door of his room. " 8 Jan 8/93. Restless & out of bed, the greater part of last night, sleeping but 1 hour. Has also slightly noisy for 2 hours, & tremely so, 1 hour. Given hypodermic - 10 PM. Was noisy "hallooing" moved his bed against the door. About mid night was pounding at his door & quite wild. Am. Was " 9 given sedative. Jan 9/93. Restless for 6 hours, slightly noisy 1 hour, sleeping but 2 hours, last night. Had passage from bowels (hard). Abt. Pulse 66. Given laxative. Is comparatively quiet. " 10 Jan 10/93. Was restless, out of bed, at times noisy & pounding at his door, all last night, sleeping " 11 none. (Hypnotic given by night-nurse did not seem to take effect). Jan 11/93. Restless for 4 hours, out of bed 3 hours, slightly noisy 1 hour, Sleeping but 4 hours, last night. Was given hypodermic, as usual. " 12 Abt. Is constipated. Given laxative. Jan 12/93. Last night, was restless for 4 hours, out of bed 3 hours, " 13 slightly noisy 1 hour, Sleeping but 3 hours. Bowels moved during the night. Jan 13/93. Restless for 7 hours, quite noisy for 2 hours out of bed, Sleeping but 1 hour, last night. Night-nurse found it " 14 impossible to keep him in bed. Jan 14/93. Restless for 2 hours, quite noisy 1 hour, Sleeping 7 hours " 15 last night. At 9 PM. Was very violent. Given hypodermic. Jan 15/93. Was restless & out of bed

Medical History of Christopher H. Carli

DETAILED HISTORY OF SICKNESS OF MR. C. H. Carli

DIAGNOSIS.

January — 2 — 1893

DATE.	HOUR	PULSE: AM.	PULSE: PM.	RESP.: AM.	RESP.: PM.	TEMP.: AM.	TEMP.: PM.	OTHER DATA.
								House on Ward 6 7:45 P.M.
Jan 2	7:30							7 Am Ate nothing; 8 noon, 8:30 glass of milk
								6:30 P.M. 2 Glasses milk, quite violent at times
3	7:30							9:30 Am. Drank about 4 Glasses milk; 1 very noisy hour
								12 M. refused milk; 1 dose, 2 very wild; bowels moved
4	7:30							7 Am. Medicine; 12, 2 glass milk; 9:30, 2 9. milk; 11 milk
								3:30 P.M.; 1 Glass milk; 4:30 bowels moved; 6:30 Ate little bread
5	7:30							7 Am. Carli milk; 1 glass milk; 1 glass milk; about 9 milk; 11:30 milk
								1 Glass Milk; 6 Glasses Milk; 1 Glass Milk
6	7:30							7 A.M. Bowels moved; 8 Glasses of milk; 1 Grapefruit; Medicine; Refused
7	7:30							12:30 P.M. 2 Glasses of milk; 1 Grapefruit; Medicine; Refused
8	7:30							6:30 P.M. Medicine; Refused; at breakfast 9:30 Ate of milk
9	7:30							12 Milk; crying & refused; at 5:30 2 Glasses Milk & medicine
10	7:30							7:30 1 Glass Milk
11	7:30							7:30 1 Glass Milk; 9:30 1 Glass Milk; 12 P.M. Broth; 12:30 Milk; 6 pm milk
12	7:30							7 Medicine; 11:30 Medicine; 12 3 Glasses Milk; 5 Glasses Milk
13	7:30							Fed his supper on a tray ate fairly well
14	7:30							Medicine; 1 Glass of Milk; 12 Medicine; ate fair; Refused 12 M; 2-3-10 P.M. pills
15	7:30							9; Glass Milk; 9 P.M. fairly restless
16	7:30							8 P.M. up to water; at breakfast 8 P.M. Pint of milk; 1 P.M. Glass Milk
17	7:30							5 P.M. very wild
18	7:30							Drew breakfast 8 P.M. Pint of milk; 1 P.M. Glass Milk
19	7:30							3:30 P.M. very wild
20	7:30							Made a fair supper
21	7:30							10 P.M. very restless
22	7:30							3:30 P.M. very wild
23	7:30							Refused milk
24	7:30							Refused milk
25	7:30							Bowels moved
26	7:30							Very wild all morning
27	7:30							Takes nourishment fairly well
28	7:30							Noisy at times
29	7:30							Dull. Listless; inactive. Refused milk. Took
30	7:30							about half a pint vegetable
31	7:30	68	44	5				No change

Appears to be growing dull and stupid
of care. Bowels costive

(carried to page 76)

Symp

This is [illegible]
to declare him insane. Thinks he possesses hypnotic power.
No disposition shown to injure others. Is not suicidal; not filthy or destructive.
not been restrained or confined. Has been under medical treatment for the last week, by
bromides & chlorals; produced about 4 hours sleep in 24 hours; last taken considerable —
milk for nourishment.

Jan 3 Jan 3/93. On admission, last night, was put to Bed on the "Sick-Ward". Was very restless & out of bed for
5 hours, quite noisy for 3 hours, extremely so for 1 hour, sleeping but 2 hours, last night. Was very wild
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of milk after much urging. Has this morning visited by his wife. PM. Is wildly noisy; given hyos & morin.
Pulse quite rapid & small; skin hot and offensive; tongue dry. Refused food. Given hyoscin too and
morph. ¼ of which he took half. 10 PM. Pulse 60, small & soft. Is comparatively quiet. Took some
" 4 milk for supper, also some from night-nurse. Jan 4/93. Restless 4 hours, slightly noisy 1 hour.
Sleeping 3 hours last night. Given hypodermic at 9 P.m. Says "he wants to kill himself" - Medicine
given also during night. Bowels moved. AM. Is quieter; remains in bed. Is subject to delusions.
" 5 Drank considerable milk. Pulse fairly full. Jan 5/93. Was restless for 2 hours, slightly noisy
1 hour, sleeping 6 hours last night. Medicine is given at regular intervals each night. AM. Is
" 6 now quiet and more rational. Takes a good deal of milk. Jan 6/93. Very restless for 6 hours,
and quite noisy, sleeping but 2 hours, last night. Given hypodermic during night. About
" 7 mid-night was noisy, "hallooing". AM. Is very restless & excited. Jan 7/93. Last night, was restless
and out of bed for 4 hours, slightly noisy for 2 hours, pounding at his door, sleeping but 1 hour.
Again given medicine by night-nurse. AM. Is noisy & pounding at the door of his room.
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night. Had passage from bowels (hard). AM. Pulse 66. Given laxative. Is comparatively quiet.
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1893

Jan 3

" 4

" 5

" 6

" 7

" 8

" 9

" 10

" 11

" 12

" 13

" 14 impressions & keeps him in bed. Jan 14/93. Restless for 2 hours, [illegible] 7 hours

" 15 last night. At 9 Pm. Was very violent. Given hypodermic. Jan 15/93. Was restless & out of bed

for 3 hours, sleeping 6 hours, last night. Was quite violent when awake, and restless in his sleep. Given hypodermic at 9 Pm. Am. Is very restless steaming his bedding today. Jan 16/93. Last night, was restless for 1 hour, out of bed 3 hours, sleeping 7 hours. Given hypodermic about bed-time. Am. Is

" 17 Constipated. Given laxative. Does not eat very well. Pm. Is restless & mischievous. Jan 17/93. Slept 8

" 18 hours last night, being restless for only an hour. Jan 18/93. Last night was restless for 2 hours, sleeping

" 19 5 hours. Jan 19/93. Passed a very good night, resting & sleeping well (8 hours) last night. Am. Ate well at breakfast

" 20/21 Jan 20/93. Passed last night quietly, sleeping 8 hours. Jan 21/93. Slightly noisy & restless for 7 hours last night, sleeping but 1 hour. Was quite agitated all night, calling & talking loudly twice. Am, & saying

" 22 "he wants his family". Am. Refused his medicine - Jan 22/93. Restless for 2 hours, slightly noisy for 3 hours, sleeping but 3 hours, last night. Complains of being tired & seems to have delusions.

" 23 Has also been talking loudly & calling out considerably. Pm. Is constipated. Jan 23/93. Was restless last night for 5 hours, slightly noisy 1 hour, sleeping only 3 hours. Talking & uneasy, most of night.

" 24 Am. Seems obstinately constipated. For the past 4 days, has been visited by his wife. Jan 24/93. Very noisy and restless, the greater part of last night, whistling, talking and calling out loudly. Slept but 3

" 25 hours. Jan 25/93. Slept soundly (7 hours) nearly all last night, being restless only an hour or so.

" 26/27 Jan 26/93. Rested fairly well last night, being restless 2 hours, sleeping 6 hours. Jan 27/93. Passed

" 28 a very good night, sleeping well (7 hours) last night. Jan 28/93. Slightly restless for 2 hours, sleeping 7 hours, last night. Am. Is quiet. Talks some this morning.

Summary. For sometime, was very restless, noisy, and slept almost none at night. Has now become quieter and has slept quite well, lately. Has been kept in bed, daily, since admission. Seems to have been, (with exceptions noted above) fairly willing to remain there. At times, has been quite restless, getting out of bed & up & about his room. Usually, fairly clean, has been, at times, careless. At first not, has lately been quite, destructive. Emotional State changeable; at times happy, whistling, singing, joking, talking freely; at others, refusing to say anything & appearing depressed. Conversation always somewhat incoherent. Has taken fluid food only & rather irregularly, especially, early during stay, refusing food quite often. Bowels have a tendency to constipation. At times, has not seemed to recognize former friends. Has lately been visited by his wife.

" 29 Jan 29/93. Restless for 5 hours, calling out loudly & singing, during last night. At 3 Am. Was

" 30 quite wild. Slept but 3 hours. Jan 30/93. Rested well last night; slightly restless but

" 31 sleeping 7 hours. Jan 31/93. Passed a very good night sleeping soundly (8 hours) last night.

Feb 1 Had slight passage from bowels. Today put on tonic of strychnia &c. Feby 1/93. Weighed

" 2 today. Is losing in flesh. Continues to rest & sleep well at night. By day is dull, listless, inactive. Saying nothing; though he talks some to his wife (now residing here) but a good deal of his Conversation is incoherent. (See attached record of day-nurse for month of January). —

" 3 Feb 3/93. Had quite severe pain in his abdomen this afternoon. Evidently constipated: abdomen distended & tympanitic; enema produced several slight passages. Was given morphine.

" 6 Feb 6/93. Passed a button from his bowels today. Has visited yesterday & today, by his wife. —

" 10/93 Feb 10/93. Has been visited daily by his wife since the last note. Feb 8/93. Got up some time during this month & has been upon the hall most of the time since. By day; fro atimes, quite stupid and

(carried to page 76)

Whole No. 3221.

Residence, Watertown, Carver Co.

Date Admission, 4th January 1893.

Admitted by, D. Linton-Chief, Hour, 7 PM

How Sent, John A. Steele, Jofl. Asst.

Sex, male

Age, 56 years

Civil Condition, —— not stated

Children, one child

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Lutheran

Habits, Good

Nativity, Guttenberg, Sweden

Physicians Committing, L.M. Crafts & E.T. Gibson

Correspondents, Charles Holmquist
Watertown, Minnesota



No. for Year, 133.

Insane Relatives, —— Insanity not hereditary

Cause Exciting, not known; believed the sunstroke in 1891

Cause Predisposing, not stated

Form, Mania + Chronic

Accompanying Bodily Disorder, No.

Suicidal or Not, No; but says God talks to him & yesterday remarked that God told him to kill himself

Date of this Attack, on June 3-1892 Transferred to St Peter Hosp

Duration, and remained there till April 3/92

Number of Attack, not 1st; 2d probably.

Number of Admissions,

Age at First Attack, about 55

Date of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

Exd by D. Baker, June 29/93 — MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, probably fairly clear

Quick or Sluggish, Middling active

MEMORY:

Past Events,

Recent Events, Seems fairly accurate

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, only fairly correct

REASONING POWER:

Ordinary Subjects,

Own Mental State, } Seems somewhat at in Exercise

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, somewhat

Depressed,

DELUSIONS: ——

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: That God talks to him a good deal

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, fairly Coherent. Talks to him

Voluble or Reticent, – self & quite freely when questioned

GENERAL DESCRIPTIVE REMARKS:

Objects to making some of the tests – Wants to know "what they are good for" – laughs at them – Atrophy of muscles between thumb & first phalanx of left hand. Girth right arm, over biceps 10 3/4 in (over thick) left about same size. Says 'his here to teach people a lesson"; "to learn them about God" – Says 'has heard from God; Retalk to me a good deal – says, he (patient) is a good man" Has been thinking this way a long time. –

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6½ in WEIGHT, NUTRITION, Fairly good

WOUNDS OR ABNORMALITIES, Wounds, none; left hand deformed; is almost useless; little fingers stiff –

TONGUE, Tremors, quite marked Coatings, white Promptness Movement, Jerky; quite quick

PUPILS, Equality, equal Size, somewhat contracted

Response Light, some; dilatation incomplete Accommodation, some; dilatation incomplete –

SIGHT, somewhat far sighted –

HEARING, Good.

COORDINATION, Arms, Fingers none, Eyes shut, fair) Standing in foot, a little unsteady.

Legs, Standing, Eyes shut, sways a little

TREMORS, Hands, Yes Tongue, quite marked.

Facial Muscles, General,

REFLEXES, Patellar, Seem equal; Considerably diminished – 10 x 2.

Other Reflexes,

ARTICULATION, ~~Hesitating,~~ fairly prompt; some in ~~Stuttering~~ Shortness probably due to foreign accent

FACIAL EXPRESSION, Rather non-Committal –

SENSIBILITY,

HEART, Not examined – probably fair –

LUNGS, Not examined – " "

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Yes Constipated, Irregular,

APPETITE, Good, Yes Medium, Poor,

SLEEP, Good, Poor, Says he does not sleep much Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Has been at St Peter ONSET GRADUAL OR SUDDEN, This, 2d attack

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1893

This man was brought here by John. P. Wall, Deputy, and Lewis Maise, with following history. Patient is a farmer; habits good; cause of this attack not known; believes to be sunstroke, received in 1891. Form is chronic. There is no accompanying bodily disorder or disease. On January 5. 1892 he was sent to St. Peter's Asylum and remained there till April 3. 1892. This is not 1st attack. Insanity is now manifested in religion. Not disposed to injure others. Suicide has not been attempted, but he says that God talks to him, and yesterday the patient remarked that God told him to kill himself. Is not filthy or destructive. Has been arrested and under medical treatment as above stated.

Jan 5 Jan 5/93. Has restless for 5 hours, talking some; sleeping 3 hours last night. 830 Am. Pulse 84. —
" 6 Jan 6/93. Restless for 7 hours, sleeping but 2 hours, last night. 830 Am. Pulse 84. Jan 7/93. Slept 7 hours
" 8 last night, being restless formly 1 hour. 830 Am. Pulse 80. Eats poorly this morning. Jan 8/93. Slept
" 9 well all last night. 830 Am. Pulse 74. Jan 9/93. Restless for 3 hours, sleeping 4 hours last night.
" 10 830 Am. Pulse 80. Jan 10/93. Was quiet & slept well (8 hours) last night. 830 Am. Pulse 78.
" 17 Jan 17/93. Since last note, has rested and slept well (8 hours) each night. Pulse has been 78.
" 18 82. 76. 68. 88. 66 and 84. on each of the past 6 & present mornings. Jan 18/93. Was restless for 1 hour
" 19 sleeping 7 hours last night. 830 Am. Pulse 80. Jan 27/93. Has been uniformly quiet and
restful at night, sleeping 8 hours each night, since last note. Pulse has been as follows;
80 on the 19th; 72 on the 20th; 76 on the 21st (taken each morning) and 84 on the 21st P.M. —
" 28 Jan 28/93. Summary. See notes above concerning conduct and rest at night. By day, has been up & around daily, dressing and caring for his own person; clean and tidy. Has sat, the greater part of the time, in one place on the hall, eyes partly closed, paying no heed to what what was going on around him. Swaying some & talking almost constantly to himself. Glanced up & answered greetings. Often refused to shake hands. Claimed that he felt well. — Carried on very little conversation. Appetite good. Bodily health seems fair. One day, when sent for for examination said that "he would go when God told him to." —

Febr 1 Feb 1/93. Continues to rest and sleep well at night and remains about the same as described in the above summary. —

Mar 15 March 15/93. Uniformly quiet resting & sleeping well at night. Is comparatively quiet & well behaved by day & seems somewhat more sensible, reading & talking.

Apl 8 Apl 8/93. Very strongly religiously inclined. Seems more sensible in other respects, than formerly. Has written some letters to his friends. April 11/93. Has remained in bed the past 2 days. Is much disturbed mentally; Physical
" 11 " 14 April 14/93. Got up to-day.

May 4 May 4/93. Quiet & apparently restful & sleeping well at night. Has been up daily since the last note.
" 6 Is at times shut himself in his room, apart from others. May 6/93. Complains of swelling & pain & wind in
" 7 8 abdomen. May 7/93. Ate no breakfast this morning. Pulse 70. Refused also, sample of urine. May 8/93. Again
" 9 complains of pain in bowels. P 74. Resp 99.2. May 9/93. 10. Am. In bed; hypochondriacal. Pulse 68. Resp 99.2. —
" 18 May 18/93. There is no change to note in either his conduct or behavior. Health seems fairly good. Always "wants to
" 31 talk" about his trouble". May 31/93. Appetite good. Bowels normal. No cough noticed. Goes out walking. Sits in a room by himself, most of time, while awake. Is very religiously inclined. Quite fair in conversation when talking on such matters. —

NAME. Andrew Streed

DATE, 189 3.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jan 12th	not taken			
Feby 3d	143.	76		
March 2d	142½	72		½
Apl 4th	145	73	2½	
May 3d	147	80	2	
June 1st	149	—	2	
July 4th	—	—	—	
Aug 5th	144	—		5
Sept 8th	142	—		2
Oct 3d	144½	78	2½	

...i weight, the past 3 months. June 30/93. No special change.
...fer being alone.

July 31/93. Scarcely changes any from month to month.
...ways, at times. Is apparently contented here.
...ed for female patients, Lewis to-day moved to B 2. —
...talks freely. Sleeps well. Bodily condition seems good. —
6 30/93. Goes out walking with the rest. Likes, however,
...time, while at all. Is very religious. Appetite continues
...some delusive ideas.

...Quiet & well behaved. In all other respects, about the same.
...93 W 143½ P 70. Nov 30/93 Appetite good. Stays in room
...ge Dec 1/93 W 150 P 72. Dec 31/93 No change. Jany 2/94
...most of the time. Behavior good. No complaint. Resp
...W 148 per. Pulse 68. Feb 28/94 Sits in his room, nearly
...talks freely when conversation is begun. Still somewhat deluded
...1/94. Not much if any change. Talks a great deal as
...to him; then bores them with his talk. Reads considerably.
...94. Never complains. Seems quite happy & contented
...in his room. Habits are clean. Physical health good.
...no special change to note. To-day transferred to A1.
...ved - Does not so frequently speak of his delusions &
...goes walking; was to-day moved to A4 an "open ward"
...30/94. About as usual; appreciates the change to the ward.
...31/94. No noticeable change, for several months past

July
Aug

Sept 30 – Oct 31 } Has a "limited parole" which he enjoys & is out side a good deal of the time. Is uniformly quiet & well-behaved; causes no trouble; works in dining room of his ward. Physical condition apparently quite good. (Wt 9/8 148½ pds: Wt 9/1. 143 pds; Wt 10/6. 145 pds.). Fairly clean & tidy. Is quite interested here.

Nov 5 – Dec 1/93 – Jan 1/94 } Nov 5/94. Wt 147 pds. Pulse 80. Dec 4/94. Wt 150 pds. Pulse 75. Dec 28/94. Was, with a great number of patients from this ward, transferred to C 2 to-day, as another class of patients are about to occupy this (A 4) ward. Jan 1/95. Wt 150 pds. Pulse 70. Jan 31/95. Is a quiet patient; appetite is good. He walks in dining room a little; stays in his room, most of the time reading Bible; makes no trouble & has not much to say. Is in quite fair health. Habits cleanly.

Febr – March – Apl 1/95 } Feby 5/95. Wt 151 pds. Pulse 90. March 5/95. Wt 150 pds. Pulse 72. Apl 4/95. Wt 150 pds. Pulse 90. Apl 30/95. Walks in dining-room a little, but, owing to paralyzed hand, cannot do much. "potters" about; has a "hobby" for making pen holders out of tin & otherwise & giving them to his friends. Has been given a "limited parole". Quiet & well behaved. Has religious delusions. —

May 2 – June 1 – July 31/95 } May 1/95. Keeps about his usual weight. June 1/95. Wt 143 pds. P 86. July 1/95. Wt 142½ pds. P 72. July 31/95. No special change during the quarter. Has "parole" & is out a good deal of the time. Talks in a rambling manner, generally about the Bible & religion; thinks no one but himself understands & follows its teachings." Still makes pen holders &c. Physical health fairly good.

— carried to transfer Book a page 235.

1893

This man was brought here by John. A. W
Patient is a farmer; habits good; cause
received in 1891. Form is chronic. H
January 8. 1892 he was sent t
This is not 1st attack. Insan
Suicide has not been att
remarked that God tol
and under medical tr

Jan 5 Jan 5/93. Has restles

" 6 Jan 6/93. Restless for 7

" 8 last night, being restless

" 9 well all last night. 830 Am

" 10 830 Am. Pulse 80. Jan 10/93. Ha

" 17 Jan 17/93. Since last note, has re

" 18 82. 76. 68. 88. 66 & 84. a reack of the Pn

" 27 Sleeping 7 hours last night. 830 am.
restful at night, sleeping 8 hours each n
so on the 19th; 72 on the 20th; 76 on the 21st (Fa
- 28 Jan 28/93. Summary. See notes above concerning conduct and rest at night. By day, has been up & around daily, dressing and caring for his own person; clean and tidy. Has sat, the greater part of the time, in one place on the hall, eyes partly closed, paying no heed to what was going on around him. Swaying form & talking almost constantly to himself. Glanced up & answered greetings. Often refused to shake hands. Claimed that he felt well. — Carried on very little conversation. Appetite good. Bodily health seems fair. One day, when sent for for examination said that "he vowed to do when God told him to."

Febt Feb 4/93. Continues to rest and sleep well at night and remains about the same as described in the above summary. —

Mar 15 March 15/93. Uniformly quiet resting & sleeping well at night. Is comparatively quiet & well behaved by day & seems somewhat more sensible, reading & talking.

Apl 8 Apl 8/93. Very strongly religiously inclined. Seems more sensible in other respects, than formerly. Has written some letters to his friends. April 11/93. Has remained in bed the past 2 days. Is more disturbed mentally; P. normal

" 11

" 14 April 14/93. Got up today.

May 4 May 4/93. Quiet & apparently restful & sleeping well at night. Has been up daily since the last note.

" 6 For a time shut himself in his room, apart from others. May 6/93. Complains of swelling & pain & vomited in abdomen. May 7/93. Ate no breakfast this morning. Pulse 70. Refused also, sample of urine. May 8/93. Again

" 7 & 8 complains of pain in bowels. P 74. R 99.2. May 9/93. 10. Am. Inhels; hypochondriacal. Pulse 68. R 99.2. —

" 9

" 18 May 18/93. There is no change to note in either his conduct or behavior. Health seems fairly good. Always "wants to talk" about his trouble". May 31/93. Appetite good. Bowels normal. No cough noticed. Goes out walking. Sits in a room by himself, most of time, while in ward. Is very religiously inclined. Quite fair in conversation when talking on such matters. —

June 30 June 5/93. Has been gaining slightly in weight, the past 3 months. June 30/93. No special change. Talks quite freely. Seems however, to prefer being alone.

July 3/31 July 3/93. Has moved to A2 today. July 31/93. Scarcely changes any from month to month. Seems somewhat childish in manner & ways, at times. Is apparently contented here.

Aug 5 Aug 5/93. This (A2) ward being required for female patients, I was today moved to B2.

" 31 Aug 31/93. Appetite good; bowels regular. Talks freely. Sleeps well. Bodily condition seems good. —

Sep 8/30 Sept 8/93. Weight Shedwater done. Sep 30/93. Goes out walking with the rest. Likes, however, to be alone. Stays in room, most of the time, while in hall. Is very religious. Appetite continues good. Patient is fable-minded, with some delusive ideas.

Oct 3 Oct 3/93. In quite good physical health. Quiet & well behaved. In all other respects, about the same.

Nov 1/30 Oct 31/93. No change to note. — Nov 1.93 Wt 143½ P. 70. Nov 30.93 Appetite good. Stays in room
Dec 4/31 most of the time. Very religious. No change. Dec 4.93 Wt 150 Pyr. Dec 31.93 No change. Jany 2.94
Jany 2/94 78, 148 Pyr. Jany 31.94 Stays in room most of the time. Behavior good. No complaint. Very
Feb 1/28 religious. Somewhat deluded. Feb 1/94. Wt 148 pds. Pulse 68. Feb 28/94. Sits in his room, nearly all the time; likes to be alone; reads some; talks freely when conversation is begun. Still somewhat deluded.

Mar 2/31 March 2/94. Wt 151½ pds. Pulse 76. March 31/94. Not much if any change. Talks a great deal on religion, when he can find anyone to listen to him; then bores them with his talk. Reads considerably.

Apl 2/30 April 2/94. Wt 151 pds. Pulse 76. April 30/94. Never complains. Seems quite happy & contented here. Still inclined to keep by himself in his room. Habits are clean. Physical health good.

May 1/31 May 1/94. Wt 149 pds. Pulse 70. May 18/94. No special change to note. Today transferred to A1.

" 30 May 30/94. Has continued quiet & well-behaved. Does not so frequently speak of his delusions & peculiar way of thinking. Reads some; goes walking; was today moved to A1 an "open ward"

June 4/30 June 4/94. Wt 149 pds. Pulse 90. June 30/94. About as usual; appreciates the change to this ward.

July 4/31 July 4/94. Wt 142 " " 104. July 31/94. No noticeable change, for several months past.

Aug 31 During these 3 months, there seems no special change in patient. He is always just about the same.
Sep 30 Has a "limited parole" which he enjoys & is out side a good deal of the time. Is uniformly quiet & well-
Oct 31 behaved; causes no trouble; works in dining room of his ward. Physical condition apparently quite good. (Wt 7/8 142½ pds: Wt 9/1. 143 pds; Wt 10/6. 145 pds.). Fairly clean & tidy. Is quite contented here.

Nov 5 Nov 5/94. Wt 147 pds. Pulse 80. Dec 4/94. Wt 150 pds. Pulse 75. Dec 28/94. Has, with a great
Dec 4/31 number of patients from this ward, transferred to C2 today, as another class of patients are about
Jany 3/31 to occupy this (A1) ward. Jan 4/95. Wt 150 pds. Pulse 70. Jan 31/95. Is a quiet patient; appetite is good. He works in dining room a little; stays in his room, most of the time reading Bible; makes no trouble & has not much to say. Seems quite fair health. Habits cleanly.

Febr- Feby 1/95. Wt 151 pds. Pulse 90; March 1/95. Wt 150 pds. Pulse 72; Apl 4/95. Wt 150 pds. Pulse 90.
March 1 Apl 30/95. Works in dining-room a little, but, owing to paralyzed hand, cannot do much. "Spotters" about; has a "hobby" for making pen holders out of tin & otha metal & giving them to his
Apl 4/30 friends. Has been given a "limited parole". Quiet & well-behaved. Has religious delusions. —

May 2 May 2/95. Keeps about his usual weight. June 1/95. Wt 143 pds. P 86. July 1/95. Wt 141½ pds. P 72.
June 1 July 31/95. No special change during the quarter. Has "parole" & is out a good deal of the time.
July 1/31 Talks in a rambling manner, generally about the Bible & religion; "thinks no one but himself understands & follows its teachings". Still makes pen holders &c. Physical health fairly good.

— carried to Transfer Book a page 233 —

Personal and Medical History of Louis Hedlund

Whole No. 3222.

Residence, Minneapolis, Minn (Come from Workhouse)

Date Admission, 4th January 1893.

Admitted by, Dr. Linton-Rheeks Hour, 7 PM

How Sent, John A. Steele, Jeff's Hennepin

Sex, Male

Age, 32 years

Civil Condition, Married

Children, Three

Age Youngest Child,

Occupation, Laborer

Degree Education,

Profession Religion, Lutheran

Habits, Good

Nativity, Norway

Physicians Committing, L. M. Crafts and E. T. Gibson

Correspondents, Thorgu Hedlund (Brother) Minneapolis
(a wandering individual)



No. for Year, 134.

Insane Relatives, No; insanity not hereditary

Cause Exciting, "not known"

...e Predisposing, "not known"

..., Melancholia – Acute

...mpanying Bodily Disorder, Not stated

...dal or Not, not

... of this Attack, December 29th

...tion, about 6 days.

...f Attack, Believed to be 1st

...f Admissions,

... First Attack, 32 years

... of Leaving, June 29. 1897

... in Hospital, 4 yrs. 5 mos 25 da.

...lt, Transfered To Fergus Falls.

O. K. Pm

EXAMINATION ON ADMISSION.

Exd by Dr. Moore Jany 11/93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Somewhat Confused

Quick or Sluggish, Somewhat sluggish

MEMORY:

Past Events,

Recent Events, very poor – dont know where came here

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Not bright account of being Confused.

Correct or Illusive, Somewhat Correct.

REASONING POWER:

Ordinary Subjects, Not good

Own Mental State, Poor; does not know why he came here.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Cant read English + does not seem to understand it well which make it different to get full particulars in many instances from him. Has to be led. Says he does not feel hungry" also says "he was not sick" + he does not know why he was sent here". Was at Workhouse – sent there because he had not anything to do. Denies any drink habits –

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Yes

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, None detected but may possibly have some

Transitory or Not, of a religious nature –

HALLUCINATIONS: None detected.

ILLUSIONS:

CONVERSATION: Speech somewhat hesitating

Coherent or Incoherent, Coherently – talks in answer to

Voluble or Reticent, questions but has sometimes difficult replies from him –

Personal and Medical History of Louis Hedlund

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7 3/4 in WEIGHT, 137 lbs. Has weighed 165 lbs. NUTRITION, Much below Normal.

WOUNDS OR ABNORMALITIES, Probably none –

TONGUE, Tremors, Slight Coatings, Some Promptness Movement, Prompt

PUPILS, Equality, Equal Size, dilated

Response Light, Yes Accommodation, Yes

SIGHT, Probably good

HEARING, good

COORDINATION, Arms, Finger to nose, eyes shut, somewhat inaccurate

Legs, Standing on foot, good. Standing, eyes shut, Stands steadily.

TREMORS, Hands, none Tongue, Slight

Facial Muscles, none General,

REFLEXES, Patellar, Equal; much diminished – about 2 – Dr. P's Scale –

Other Reflexes,

ARTICULATION, Hesitating, Yes Slurred, somewhat

FACIAL EXPRESSION, somewhat haggard.

SENSIBILITY, Seems good.

HEART, Seems good.

LUNGS, Seem good; Girth 35 in. Expansion 2 in

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Yes	Careless,
BOWELS, Normal,	Constipated, Probably	Irregular,
APPETITE, Good,	Medium,	Poor, Has to be led.
SLEEP, Good, now, Has been very	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ~~ONSET GRADUAL OR~~ SUDDEN, Probably

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother living – about 70. –

Father or Pat. Relations, Father living – about 80. –

Brothers or Sisters, 3 brothers; all living; claims well. – 2 sisters living – says they are well. –
1 sister dead – does not remember cause – was sick 8 days – Says none of relatives were in hospital or asylums –

1893

The following history accompanied this man, who was brought here by John. P Hall, deputy, and Lewis Maisel. He comes from the Work-house. Cause of this attack not known; form is acute; first symptoms of disease manifested December 29th; since that date until the present (Jany 4th 93) he has not slept. Previous to December 29th/92, he appeared to be perfectly rational. His is believed to be 1st attack. Insanity is now manifested in religin, mental. Is not disposed to injure others. Is not suicidal, nor filthy nor destructive. Is not subject to any bodily disease. Has not been under medical treatment.

Jan 5 Jan 5/93. Out of bed for 3 hours, restless 2 hours, sleeping 7 hours, last night. 9 Am. Pulse 76. Te) 100.6.

" 6 Jan 6/93. Restless and out of bed for an hour or so last night, sleeping 8 hours. AM. Ate no breakfast,

" 7 Tongue coated. 8.30 Am. Pulse 82. Te) 100.8. 9 Am. Pulse 84. Te) refused. Jan 7/93. Am. Ate very little.

" 8/9 PM. Refused dinner & supper. Jan 8/93. 9 Am. Pulse 73. Jan 9/93. 9 Am. Pulse 88.

" 10 Jan 10/93. 8.30 Am. Pulse 68. Is fed twice daily, on account of his continued refusal of food.

" 11 Jan 11/93. Restless and out of bed for an hour or so each night, has, however, been sleeping 8 hours on

" 20 each of the past 5 nights. 8.30 Am. Pulse 86. Jan 20/93. Since last note, patient has continued to rest and sleep well (9 hours) each night. Pulse has been 76. 78. 86. 82. 90. 80. 82 and 90. on each of the past 8 mornings. AM. Was found suffering from Pleuro-pneumonia in right lower lobe, posteriorly

" 21 Was transferred to the "Sick Ward" & put to bed. Jan 21/93. Was restless for 4 hours, sleeping 3 hours, last night. Pulse ranged, during the night, from 112 to 120. Restraint had to be employed to keep him in bed.

" 22 Bowels moved. Jan 22/93. Last night, was restless 3 hours, sleeping 4 hours. Pulse was from 90 to 96. Got himself out of restraint. Had a copious passage from bowels. AM. Had nasty purulent sputa yesterday; clear mucus-pus this am. Has no fever this morning; there has been a sudden fall of temperature. Digitalis ordered to be given. Is constipated today. 5 PM. Pulse 68. R 20. Te) 100.2.

" 23 Jan 23/93. Slept 4 hours, being restless for 4 hours, last night. Pulse ranged from 70 to 74. Was out of bed

" 24 several times. AM. Has copious muco-purulent sputa. Jan 24/93. Passed a good night & slept well (7 hours) last night, being restless for only 1 hour. Pulse was from 72 to 68. AM. Takes food. Permitted

" 25 to get up, for a while, this morning. Jan 25/93. Restless 3 hours, sleeping 5, last night. Pulse ranged from 74 to 72 during the night. Bowels moved. Since 11 AM, laid quietly in bed without restraint.

" 26/27 Jan 26/93. Was restless for 2 hours, sleeping 6 hours, each of past nights. Pulse was from 78 to 72. Was noisy, calling out loudly during the night, and persistently struggling to get out of restraint.

" 28 Jan 28/93. Was restless for 4 hours, sleeping 5 hours, last night. Pulse ranging from 76 to 72. Was out of restraint from 1 to 6 o'clock Am. (See attached Record of Pulse. R. & Temperatures of patient taken by Day nurse in Ct). Is now out of bed and in the ward.

Summary. See above note, for rest & sleep & behavior at night. On admission, was put on B3. Was up daily; stood the greater part of the time; when approached, seemed uneasy & startled; glancing uneasily about him in various directions; talking in a jerky, uncertain way. Took very little food, at first & later refused all food; was fed; Tongue often coated & corded in like stretts. Was clean and fairly tidy. Did some work. Attacked with pleuro-pneumonia & put to bed. Treatment consisted of Digitalis internally and Iron Cuirb's jacket externally. Since confined to his bed, has been, at times, exceedingly restless, constantly struggling to get out of bed. Has been restrained in bed some. Was let get up yesterday. Has walked more freely. Has been more restless & more maniacal in behavior

1893

NAME. Louis Hedlund

* (in underclothing)

	DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
	Jany 11	137	—		
	" 17	137	—		
*	" 24	127	—		1½
	Feb 3d	136½	76	1	
	Mar 3d	133½	60		3
	Apl 4th	142	96	8½	
	May 3d	149¾	79	7¾	
	June 5th	143½	68		6¼
(in bed)	July 3d	129	66		5½ (Est'd)
	Aug 5th	127	68		2
	Sept 4th	138	80	11	
	Oct 3d	155	78	17	

to day.
to Dr to make note on.
Louis Hedlund
OF DR. C. G. Anderson
NOSIS.

OTHER DATA.

ette poor
apair Dinner Potatoes meat &c
a good supper and Breakfast
ette very good
ette good

8	17	5	178	74	18	19	198½	99½	I						
9	17	5	170	72	19	18	189½	94¾	I						
10	17	5	176	70	18	19	195½	98	I						
11	17	5	178	74	18	19	197½	98¾	I						
12	17	5	180	76	20	18	198½	99¼							
13	17	5	180	78	18	17	198½	99¼							
14	17	5	180	76	20	18	198½	99	I	Appetite poor	Refuse to take medicine				
15	17	5	182	76	18	17	199½	99¾		"	"	"	"	"	"
16	17	5	184	80	17	16	199½	99	I	Appetite good	"	"	"	"	"
17	17	5	180	74	19	20	199½	99¾	I	"	"	"	"	"	"
18	17	5	186	90	20	21	199½	99¾	I	"	"	"	"	"	"
19	17	5	172	70	19	18	199½	99¾	I	"	"	"	"	"	"
20	17	5	172	70	18	16	100	99½	I	"	"	"	"	"	"
21	17	5	186	80	20	18	100	99½	I	"	"	"	"	"	"
22	17	5	184	76	23	20	100½	100¼		"	"	"	"	"	"
23	17	5	184	70	17	16	100½	100¼		"	"	"	"	"	"
24	17	5	190	72	20	18	100½	99½	I	"	"	"	"	"	"
25	17	5	178	70	20	17	100	99½	I	"	"	"	"	"	"
26	17	5	182	72	18	16	99½	99	I	"	"	"	"	"	"

" 31 Aug 31/93. Quiet & well-behaved. Is feeble minded. Good health.

Sep 4/30 Sept 4/93. Has gained 11 pounds in weight, in the past month. Sep 30/93. Appetite has

(Carried to 4)

1892

The following histon
deputy, and Lewis Ma
form is acute; first sy
the present (Jany 4th-9
perfectly rational. He
religion, mental. Is not a
Is not subject to any bod
manifested an
nced al, nor filthy nor destructive.
not been under medical treatment.

Jan 5 Jan 5/93. Out of bed for 3 hour
es 2 hours, sleeping 7 hours, last night. 9 Am. Pulse 76. T(e) 100.6.
" 6 Jan 6/93. Restless and out of bed for an hour or so last night, sleeping 8 hours. Am. Ate no breakfast,
" 7 Tongue coated. 830 Am. Pulse 82. T(e) 100.8. 9 Am. Pulse 88. T(e) refused. Jan 7/93. Am. Ate very little.
" 8/9 PM. Refused dinner & supper. Jan 8/93. 9 Am. Pulse 73. Jan 9/93. 9 Am. Pulse 88.
" 10 Jan 10/93. 830 Am. Pulse 68. Is fed twice daily, on account of his continued refusal of food.
" 11 Jan 11/93. Restless and out of bed for an hour or so each night, has, however, been sleeping 8 hours on
" 20 each of the past 5 nights. 830 Am. Pulse 86. Jan 20/93. Since last note, patient has continued to
rest and sleep well (9 hours) each night. Pulse has been 76. 78. 86. 82. 90. 80. 82 and 90. on each of the
past 8 mornings. Am. was found suffering from Pleuro-pneumonia in right lower lobe, posteriorly
" 21 Was transferred to the Sick Ward & put to bed. Jan 21/93. Was restless for 4 hours, sleeping 3 hours, last
night. Pulse ranged, during the night, from 112 to 120. Restraint had to be employed to keep him in bed.
" 22 Bowels moved. Jan 22/93. Last night, was restless 3 hours, sleeping 4 hours. Pulse was from 90 to 96
Got himself out of restraint. Had a copious passage from bowels. Am. Had nasty purulent sputa
yesterday; clear mucus-pus this am. Has no fever this morning; there has been a sudden fall of
temperature. Digitalis ordered to be given. Is constipated today. 5 PM. Pulse 68. R 20. T(e) 100.2.
" 23 Jan 23/93. Slept 4 hours, being restless for 4 hours, last night. Pulse ranged from 70 to 74. Was out of bed
" 24 several times. Am. Has copious muco-purulent sputa. Jan 24/93. Passed a good night & slept well
(7 hours) last night, being restless for only 1 hour. Pulse was from 72 to 68. Am. Takes food. Permitted
to get up, for a while, this morning. Jan 25/93. Restless 3 hours, sleeping 5 hours last night. Pulse ranged from
" 25 74 to 72 during the night. Bowels moved. Since 11 Am, laid quietly in bed without restraint.
" 26/27 Jan 26/93. Was restless for 2 hours, sleeping 6 hours, each of past 5 nights. Pulse was from 78 to 72. Was
noisy, calling out loudly during the night, and persistently struggling to get out of restraint.
" 28 Jan 28/93. Was restless for 4 hours, sleeping 5 hours, last night. Pulse ranging from 76 to 72. Was out
of restraint from 1 to 6 o'clock Am. (See Attached Record of Pulse. R. & Temperatures of patient taken by
Day nurse in Ch). Is now out of bed and in the ward.

Summary. See above note, for rest & sleep & behavior at night. On admission, was put on B3. Was up
daily; stood the greater part of the time; when approached, seemed uneasy & started; glancing uneasily
about him in various directions; talking in a jerky, uncertain way. Took very little food, at first &
later refused all food; was fed; Tongue often coated & reddish in tip & edges. Was clean and fairly tidy.
Did some work. Attacked with pleuro-pneumonia & put to bed. Treatment consisted of digitalis in-
-ternally and Bon Ginti's jacket externally. Since confined to his bed, has been, at times, excessively
restless, constantly struggling to get out of bed. Has been restrained in bed some. Was let get
up yesterday. Has walked more freely. Has been more restless & more maniacal in behavior

Personal and Medical History of Louis Hedlund

Copy or item all note of the day.
Bring out each morning for Dr. to make note on.
Louis Hedlund
C. P. Anderson

DETAILED HISTORY OF SICKNESS OF MR. _____
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA.
January 30 Mo	1	1	1	98	1	28	1	101	
31 Tu	17	6	100	120	28	96	101	103	Appetite poor
Feb 1 We	17	5	114	108	27	22	101	102	
2 Th	17	5	118	78	22	23	1004	100	Eat a fair Dinner & Potatoes meat &c.
3 Fr	17	5	180	79	24	24	100	100	Eat a good supper and Breakfast
4 Sa	17	5	182	76	26	25	100	100	
5 Su	17	5	180	74	176	22	99	100	Appetite very good
6 Mo	17	5	176	76	20	24	100	99	
7 Tu	17	5	178	74	21	22	99	100	Appetite good
8 We	17	5	180	78	20	19	100	100	— —
9 Th	17	5	188	76	21	20	100	100	— —
10 Fr	17	5	180	76	20	19	100	100	— —
11 Sa	17	5	178	77	20	19	99	99	— —
12 Su	17	5	172	74	20	20	100	100	— —
13 Mo	17	5	176	68	20	18	100	99	— —
14 Tu	17	5	178	74	20	19	100	100	— —
15 We	17	5	176	72	21	18	99	99	— —
16 Th	17	5	178	74	20	19	100	100	
17	17	5	178	72	19	18	100	99	
18	17	5	171	70	18	18	99	100	
19 Th	17	5	176	74	19	19	100	100	
20	17	5	174	72	18	20	99	99	
21 St	17	5	172	74	19	18	99	100	
22 We	17	5	174	70	18	19	99	99	
23	17	5	166	66	18	18	98	100	
24	17	5	154	64	18	18	100	100	
25	17	5	148	68	19	18	99	100	
26	17	5	150	68	18	19	100	100	
27	17	5	166	68	18	18	100	100	
28	17	5	180	60	20	19	100	100	
March 1 St	17	6	158	66	19	18	100	99	
2	17	5	180	68	19	18	99	99	
3	17	5	168	70	20	18	99	99	
4	17	5	170	70	20	19	99	99	
5	17	5	168	70	19	18	99	99	
6	17	5	170	68	18	18	99	99	
7	17	5	168	70	19	18	99	99	
8	17	5	178	74	18	19	98	99	
9	17	5	170	72	19	18	99	99	
10	17	5	176	70	18	19	98	99	
11	17	5	178	74	18	19	99	99	
12	17	5	180	76	20	18	99	99	
13	17	5	180	75	18	17	99	99	
14	17	5	180	76	20	18	99	99	Appetite poor. Refuse to take medicine
15	17	5	182	76	18	17	98	99	" " " " " "
16	17	6	184	80	17	16	98	99	Appetite good " " " " " "
17	17	5	180	76	19	20	99	99	" " " " " "
18	17	5	181	90	20	21	99	99	" " " " " "
19	17	5	172	76	19	18	99	99	" " " " " "
20	17	5	172	70	18	16	100	99	" " " " " "
21	17	5	186	80	20	18	100	99	" " " " " "
22	17	5	184	78	23	20	100	100	" " " " " "
23	17	5	184	70	17	16	99	100	" " " " " "
24	17	5	180	72	20	18	100	99	" " " " " "
25	17	5	178	70	20	17	100	99	" " " " " "
26	17	5	178	72	18	18	99	99	" " " " " "

" 31 Aug 31/93. Quiet & well-behaved. Is feeble minded. Good health.
Sep 4/30 Sept 4/93. Has gained 11 pounds in weight, in the past month. Sep 30/93. Appetite has

(Carried to 4)

DETAILED HISTORY OF SICKNESS OF MR. Louis Hedlund
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA.
Jan 20.	9.	1	130	134		36	103.7	103	Put to bed does not eat any
21	7.30	5	96	88	26	26	100	101	Has to be fed with tube. 7 P.M. Gave 1 Milk & egg mogg.
22	7.30	5	64	68	26	20	98.6	100	3 P.M. Enema moved 5j. Takes nourishment fairly well
23	7.30	5	70	64	25	27	100	98.4	Coughs some.
24	7.30	5	84	80	26	26	100	102	Takes nourishment fairly well
25	7.30	5	78	88	22	26	100	100	Very noisy and uneasy.
26	7.30	5	80	82	22	22	98.4	98.4	Has of late had slight coughing
27	7.30	5	76	96					spells during the morning.
28	7.30	5							Is at present out of bed & dressed.
29	7.30	5							Transferred to C.H.
30	7.30	5							

Jan 21 Was transferred to the "Sick Ward" & put to bed. Jan 21/93. Was restless for 4 hours, sleeping 3 hours, last night. Pulse ranged, during the night, from 112 to 120. Restraint had to be employed to keep him in bed.
" 22 Bowels moved. Jan 22/93. Last night, was restless 3 hours, sleeping 4 hours. Pulse was from 90 to 96. Got himself out of restraint. Had a copious passage from bowels. AM. Had nasty purulent sputa yesterday; clear mucus-pus this am. Has no fever this morning; there has been a sudden fall of temperature. Digitalis ordered to be given. Is constipated today. 5 PM. Pulse 68. R 20. T(e) 100.2.
" 23 Jan 23/93. Slept 4 hours, being restless for 4 hours, last night. Pulse ranged from 70 to 74. Was out of bed
" 24 several times. AM. Has copious muco-purulent sputa. Jan 24/93. Passed a good night & slept well (7 hours) last night, being restless for only 1 hour. Pulse was from 72 to 68. Am. Takes food. Permitted
" 25 to get up, for a while, this morning. Jan 25/93. Restless 3 hours, sleeping 5 hours, last night. Pulse ranged from 74 to 72 during the night. Bowels moved. Since 11 AM, laid quietly in bed without restraint.
" 26 Jan 26/93. Was restless for 2 hours, sleeping 6 hours, each of past 2 nights. Pulse was from 78 to 72. Was noisy, calling out loudly during the night, and persistently struggling to get out of restraint.
" 28 Jan 28/93. Was restless for 4 hours. Sleeping 5 hours, last night. Pulse ranging from 76 to 72. Was out of restraint from 1 to 6 o'clock Am. (See Attached Record of Pulse. R. & Temperatures of patient taken by Day nurse in C.H.). Is now out of bed and in the ward.

Summary. See above note, for rest & sleep & behavior at night. One admission was put on B.3. Was up daily; stood the greater part of the time; when approached, seemed uneasy & startled; glancing uneasily about him in various directions; talking in a jerky, uncertain way. Took very little food, at first & later refused all food; was fed; tongue often coated & sordes on lips & teeth. Was clean and fairly tidy. Did some work. Attacked with pleuro-pneumonia & put to bed. Treatment consisted of Digitalis internally and Bon Spith's jacket externally. Since confined to his bed, has been, at times, exceedingly restless, constantly struggling to get out of bed. Has been restrained in bed some. Was let get up yesterday. Has walked more freely. Has been more restless & more maniacal in behavior

" 31 Aug 31/93. Quiet & well-behaved. Is feeble minded. Good health.
Sp 4/30 Sept 4/93. Has gained 11 pounds in weight, in the past month. Sep 30/93. Appetite has

(Carried to 4)

…ad on
…y run destructive.
…atment.
…night. 9 Am. Pulse 76. Te) 100.6.
…sleeping 8 hours. Am. Ate no breakfast,
…86. Te) refused. Jan 7/93. Am. Ate very little.
…Am. Pulse 73. Jan 9/93. 9 Am. Pulse 86.
…e daily, on account of his continued refusal of food.
…d for an hour or so each night, has, however, been sleeping 8 hours on
…. 830 Am. Pulse 86. Jan 20/93. Since last note, patient has continued to
… well (9 hours) each night. Pulse has been 76. 78. 86. 82. 90. 88. 82 and 90. one each of the
… morning. Am. Was found suffering from Pleuro-pneumonia in right lower lobe, posteriorly
… was transferred to the "Sick Ward" & put to bed. Jan 21/93. Was restless for 4 hours, sleeping 3 hours, last night. Pulse ranged, during the night, from 112 to 120. Restraint had to be employed to keep him in bed.
" 22 Bowels moved. Jan 22/93. Last night, was restless 3 hours, sleeping 4 hours. Pulse was from 90 to 95. Got himself out of restraint. Had a copious passage from bowels. Am. Had nasty purulent sputa yesterday; clear mucus - pus this am. Has no fever this morning; there has been a sudden fall of temperature. Digitalis ordered & begun. Is constipated today. 5 PM. Pulse 68. R 20. Te) 100.2.-
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" 24 several times. Am. Has copious muco-purulent sputa. Jan 24/93. Passed a good night & slept well (7 hours) last night, being restless for only 1 hour. Pulse was from 72 to 68. Am. Takes food. Permitted to get up, for a while, this morning. Jan 25/93. Restless 3 hours, sleeping 5, last night. Pulse ranged from 74 to 72 during the night. Bowels moved. Since 11 Am, laid quietly in bed without restraint.
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Summary. See above note, for rest & sleep & behavior at night. On admission, was put on B3. Was up daily; stood the greater part of the time; when approached, seemed uneasy & startled; dancing uneasily about him in various directions; talking in a jerky, uncertain way. Took very little food, at first & later refused all food; was fed; tongue often coated & sordes on lips & teeth. Was clean and fairly tidy. Did some work. Attacked with pleuro-pneumonia & put to bed. Treatment consisted of digitalis internally and Bon Faith's jacket externally. Since confined to his bed, has been, at times, exceedingly restless, constantly struggling to get out of bed. Has been restrained in bed some. Was let get up yesterday. Has talked more freely. Has been more restless & more maniacal in behavior for several days. Jan 29/93. Restless 4 hours, sleeping 4 hours, last night. Pulse ranged from 72 to 76. Got up and was pounding on door. On account of the difficulty of keeping him in bed at night, his obstinacy and the trouble he was giving at the hall, he was today transferred to C4.-
" 30 Jan 30/93. Out of bed and quite noisy for an hour sleeping 7 hours, last night.
Feb 3/4 Feby 3/93. Seating well now & looks a great deal better & brighter. Feb 4/93. Since 30th writ. has been quiet at night, apparently resting & sleeping well. Patient looks a great deal better but his temperature is up & there is a suggestion of a beginning tubercular process. (See Record of Weights).
" 25 Feb 25/93. Has been on C4 for some time. Soup daily. Is quite strong apparently; Eats well. Is quiet & gives no trouble in the hall.
March 8 Mar 8/93. For the last 2 weeks, has been quite often noisy for a few hours, singing & talking to himself, at night. Usually quiet & well-behaved by day. Talks to himself & to others in a peculiar tone, silly good natured. Has an excellent appetite. For some time, had a slight fever, but has lately been free from this. See attached clinical record. April 4/93. Ht 142 pds. Pulse 95.
April 4 April 10/93. During the latter part of March was noisy & restless at night quite often, and talked a great deal by day, to himself or to his fellow patients; talking lyttle now to quiet elements, who gave him no attention or answer; addressing them as his partner & trying to persuade them & go out with him, to go to work. Has recently talked less. Looks almost incessantly, however, hunting about for something to do in the wards. Has a good appetite & is gaining in flesh.
May 3/4 May 3/93. Still keeps gaining in flesh. May 4/93. Did nodes the side-walk a day while out walking with his ward. Was found then & brought back. May 18/93. Is now quiet at night, apparently
" 18 resting and sleeping well. By day, is quite industrious, ever eager for some work to do. Con-
" 31 -duct & behavior about as usual. May 31/93 Appetite fair; bowels regular. Is fairly well-behaved, though he attempts to elope while out on the grounds. Talks very little. Frequently asks the attendant to open door & let him go home. Is of clean personal habits. A good worker in ward.
June 5 June 5/93. Has lost considerably in flesh, the past 4 weeks; does not complain of feeling ill.-
" 7 June 7/93. Made his escape through his bedroom window (probably picked the lock of screen) between
" 22 8 and 10 o'clock last night. Was brought back at 9.30 this morning. Received serious injury to one of his eyes from a broom handle in the hands of a fellow patient (Samuel Smith). Was taken in this morning's train to St Paul by one of the assistant physicians (D M) to have eye
" 30 removed, which was done. June 30/93. Patient was brought back in the evening of 23d. Is now doing well. Had to be put in restraint, afterwards, to keep him from removing bandages. (Each night from 23d to 25th. Day & night from 25th to July 1st). Is restlessly active. Makes no complaints. Talks very little. In other respects, about the same.
July 3/31 July 3/93. Is still losing in weight. July 31/93. Appetite is good; bowels normal. Is very restless. Was in restraint, on account of his injury, a few days at the first of the month. Eye has done well & wound is now healed. Sits & about daily.
Aug 4/5 Aug 4/93. Was today moved to B3 East. Aug 5/93. Has a fairly good appetite. Bowels are regular. Now a quiet, inoffensive patient. Always anxious to work. Habits cleanly.
" 31 Aug 31/93. Quiet & well-behaved. Is feeble-minded. Good health.
Sep 4/30 Sept 4/93. Has gained 11 pounds in weight, in the past month. Sep 30/93. Appetite has

(Carried to 4)

Personal and Medical History of John James Heard

Whole No. 3223.
Residence, St Paul, Minn
Date Admission, 6th January 1893.
Admitted by, D. Kilbourne Hour, 7 PM
How Sent, Jno. B. Olivier Jr. Co., Ramsey County
Sex, male
Age, 23 years
Civil Condition, single
Children, no
Age Youngest Child,
Occupation, Salesman
Degree Education,
Profession Religion, Not a Church member
Habits, Good, so far as known
Nativity, St Paul, Minnesota
Physicians Committing, A. E. Seukler and H. J. O'Brien
Correspondents, H. J. O'Brien M.D. Endicott Building St Paul. Minn

No. for Year, 135.
Insane Relatives, Father; Insanity hereditary
Cause Exciting, probably worry & grief
Cause Predisposing, Heredity probably
Form, Paroxysmal Insanity
Accompanying Bodily Disorder, No
Suicidal or Not, Threats
Date of this Attack, some weeks
Duration, for some weeks.
No. of Attack, 1st
No. of Admissions,
Age First Attack, about 23.
Time of Leaving, Sept. 16th '93
Time in Hospital, 8 mos. 9 ds.
Result, Recovered.

EXAMINATION ON ADMISSION.

Exd by D. Moore – Jany 11/93 –

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, quick

MEMORY:
Past Events, Recent Events, Special Subjects, Good

PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct

REASONING POWER:
Ordinary Subjects, fair
Own Mental State, Says no need for sending him here; was merely overworked & nervously prostrated —
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, very tendency to be excited somewhat.

DELUSIONS:
Systematized or Not, probably none
Special Subjects,
Transitory or Not,

HALLUCINATIONS: None – denies any
ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, quite voluble

GENERAL DESCRIPTIVE REMARKS:
Says has always been of a very nervous temperament" – "Is particularly so this afternoon & weak" – Says he uses drink & abuse. Claims that he was deceived into being sent here – "was sneaked away"; "there was no need of it, whatever" – Yet expresses fear he shall die here. Says had a severe fright; one when his mother fell back in the bed & claimed she was dying; a second one, when his brother pointed a loaded gun at patient & threatened to shoot him – he seemed in earnest in his threat" – This on account of some slight quarrel between them. Denies attempt at suicide.

Personal and Medical History of John James Heard

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7½ inches WEIGHT, 124 pds. (Has weighed 148 pds) NUTRITION, much below normal.
WOUNDS OR ABNORMALITIES, Wounds – none – abnormalities probably none –
TONGUE, Tremors, some fine & also coarse Coatings, slight Promptness Movement, prompt
PUPILS, Equality, Equal Size, dilated
Response Light, do not Accommodation, yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Finger to nose, Eyes shut, fairly well done –
Legs, Standing on foot, somewhat unsteady; Standing Eyes shut, Stands Steadily.
TREMORS, Hands, None Tongue, some fine & coarse
Facial Muscles, none General,
REFLEXES, Patellar, Equal – somewhat exaggerated – about 7 – Dr O's Scale.
Other Reflexes,
ARTICULATION, ~~Hesitating~~, prompt Slurred, not
FACIAL EXPRESSION, somewhat sad.
SENSIBILITY,
HEART, Normal
LUNGS, seem good
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,		Clean, Yes	Careless,
BOWELS, Normal, Yes		Constipated,	Irregular,
APPETITE, Good, voracious.		Medium,	Poor,
SLEEP, Good, — Says very		Poor,	Irregular,
PULSE, 104.	RESP.,		TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short ONSET GRADUAL OR SUDDEN, Sudden

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living – Has heart trouble & very nervous. —
Father or Pat. Relations, Father living – about 60. Is overcome by nervous prostration & melancholia
Brothers or Sisters, 3 brothers living & 2 sisters living; all pretty well – troubled some with nervousness –
1 brother died in infancy.
1 sister – " –

1893

This patient was brought here by Deputy Sheriff Courteau, with the following history; (this examination having been made Dec 29/92.). Habits are good, so far as known. Insanity is hereditary, his father having been insane. Supposed cause of this attack is probably worry & grief; form is acute, exalted. There is no accompanying bodily disorder or disease. First symptoms has been manifested for some weeks. This is the first attack. Insanity is now manifested in the subject of persecution; exalted ideas of own capacity. Is disposed to injure others from sudden passion. Has made threats of suicide. Is not disposed to filthy habits. Has been passionate in temper. Has been confined at St Joseph's Hospital for period of a week. Has not been under medical treatment.

Jan 7 Jan 7/93. On admission, was put upon A2. Has restless nearly all night (8 hours) sleeping none. given Sedative at bedtime. AM. Says he did not sleep any last night. Jan 8/93. Am. Was put on medicines and milk & bovinine added to diet. PM. Hypnotic ordered to be given at bedtime. Was today visited by his mother. Jan 9/93. Slept better last night, being restless only 1 hour. —

" 10 Jan 10/93. Apparently rested & slept well, last night. Jan 11/93. Restless for 7 hours, sleeping

" 12 but 1 hour, last night. Am. Complains of sleeping very poorly at night. Jan 12/93. Was restless for

" 13 2 hours, sleeping 6 hours, last night. Jan 13/93. Slept better (7 hours) last night; restless but 1 hour.

" 14 Jan 14/93. Slept but little last night; restless for 4 hours. Jan 15/93. Restless 1 hour last night,

" 15 16 apparently sleeping fairly well. Am. Beef cocoa ordered added to diet. Jan 16/93. Last night, was

" 17 restless for 2 hours. Sleeping 5 hours. Jan 17/93. Passed a very quiet and restful night, sleeping

" 20 8 hours. Am. Complains of hands being sore & chapped. Asks for vaseline. Jan 20/93. Am. Is getting

" 22 up a Programme for a "Benefit Concert" in St Paul; he will come last" - Jan 22/93. Has slight

" 24 acne. Given medicine. Jan 24/93. Still complains of nervousness; says "he is very much so" -

" 28 Jan 28/93. Summary. For several nights after admission, was very restless, sleeping poorly, almost none. First night, expressed fears of his room-mates, and asked the night-nurse to take him out in the hall, even if he had to chain him. Has quieted down somewhat and is sleeping better. Has been up daily; dressing and caring for himself; is very clean and neat in his dress & habit, evidently taking pride in his personal appearance. Expressed, from the start, very great indignation at having been sent here, claiming that he was perfectly sane & merely suffered from insomnia & nervousness. (Insomnia is hereditary). Has an air of marked but suppressed excitement, especially while in conversation; while talking, face & neck twitching a good deal. Has also an air of self-importance in manner & tone, demanding that certain things be given him; specifying, in detail, how his own treatment to the Physician. One day, expressed the feeling, that his mother was dead, as he had not heard from her. Again was found writing out a programme, which, he said, was a programme for a benefit Concert for himself, which he was intending to have given when he got back to St. Paul, he himself to have the last number. Again, one day asked the Dr. Whether he (patient) should act natural or otherwise so as how, as he was anxious to prove to the Drs his sanity. Has varied between expressions of contentment & good feeling and impatience & threats of suicide (by implication). Usually sits in his room, apart from the others, reading. At times, talks with fellow patients.

Feb 1 Feb 1/93. Am. Says "his nervousness is all right now & all he needs is strength in his legs" -

1893

Feb Feb 1 [illegible] has been absent [illegible] night.

NAME. John J. Heard

DATE. 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 6th	124	—		
Feby 3d	118	110		6
Mar 3d	120	96	2	
Apl 4th	127	98	7	
May 3d	132	84	5	
June 6th	136½	90	4½	
July 4th	136	88		½
Augt 1st	137½	80	1½	
Sept 4th	140	84	2½	

Rochester Insane Asylum Minn.
Wednesday Apr. 12th '93.

loth St. & Selby Ave., St. Paul, Minnesota.
one to New York to visit father? You
about a month, but would come here to talk
in St. Paul request her to come here, as I
You, Mamie, or Rob. It is three months
romised me she would return in a few weeks.
she has not been here in so long a lapse
ve up the idea of going to New York City
ugh she approved of y u and I going there.
y arrangements, if mother will come and
accompany her back to St. Paul. The Se-
il September and I will remain there until
accept work at Menheiners. Ben Goodkind
tly before I broke down; he had the con-
me with mama; I refused that position, you
Now, though I would rather work there,
let patients go on three months trial, I
come after them. I do not deem it necessary
e, as I know mother, Rob or Tom would come
, you will want information. The appetite
etter, and am well enough to go home to
as there is always a crowd of wizards and
one stirs. My walk distresses me and oth
here presented me with a pair of coarse
like puss in boots, at times. Horses trot
the cow. My table manners are hoggish
have received no letter. My lates medi-
s we go out on the side hill to breathe
must either write or tell Dr. Kilbourne,
have always from birth been an effinate kid
ake that out of me; though every appear-
ion. I am not the paricite of man; you
ES, there was a list of books, that sub-
ricite meant; I told you. If Dr. Kilbourne
ive a moral life. I am very embarassed
ave mother write, if she will not come
here. She did not put me here, or agree to have me leave St. Joseph Hos-
pital, and said that every cent of $3,000 had to be spent on me, she
would do so before sending me here. The Sheriff came after John O'Brien,
her Attorney, informed mother that the Judge would not send me here, as
he unfortunately comes when mother was absent. Every day until that time
she was at my side at the Hospital. Come to see me soon.
Your loving brother John.
P.S.:- pardon blots, but I dont care how
blotty, so you get this and come to call on me.

Heard.

June 5 " 30

July 1 " 31

Augt 1/93 [illegible] was, night, with restless-
ness pain in the stomach. Says "he ate too many wild plums" - vomited considerably -

(carried to page 364)

1893 This patient was brought here by deputy Sheriff Courtea
(this examination having been made Dec 29/92.). Habits are goo
-dinary, his father having been insane. Supposed cause
form is acute, exalted. There is no accompanying
has been manifested for some weeks. This is the first
the subject of persecution; Exalted ideas of ow
sudden passion. Has made threats of suici
-cinate in temper. Has been confined at
not been under medical treatment.

Jan 7 Jan 7/93. On admission, was put upon
" 8 given Sedative at bedtime. A.M. -
medicines and milk & bromine added
" 9 today visited by his mother. Do
" 10 Jan 10/93. apparently rested
" 11 but 1 hour, last night. Am. Complain
" 12 2 hours, sleeping 6 hours, last night. Am
" 13 Jan 14/93. Slept but little last night; rest
" 15 apparently sleeping fairly well. Am. Beefea
" 16 restless for 2 hours. Sleeping 6 hours. Jan 17/93. Am
" 17 hours. Am. Complains of hands being sore & chapp
" 20 up a programme for a "Benefit Concert" in St Paul; seem
" 21 acne. Given medicine. Jan 24/93. Still complains of nervou
" 22 Jan 28/93. Summary. For several nights after admission, was very restless, sleeping poorly, about
nine. First night, expressed fears of his room-mate, and asked the night-nurse to take him out in
the hall, even if he had to chair him. Has quieted down somewhat and is sleeping better.
Has been up daily; dressing and caring for himself; is very clean and neat in his dress & habits,
evidently taking pride in his personal appearance. Expressed, from the start, very great
indignation at having been sent here, claiming that he was perfectly sane & merely suffered from
insomnia & nervousness. (Insomnia is hereditary). Has an air of marked suppressed
excitement, especially while in conversation; while talking, face & neck twitching a good deal.
Has also an air of self-importance in manner & tone, demanding that certain things be given him;
specifying, in detail, how his own treatment, to the Physician. One day, expressed the feeling
that his mother was dead, as she had not heard from her. Again was found writing out a programme,
which he said, was a programme for a benefit Concert for himself, which he was intending to
have given when he got back to St Paul, he himself to have the last number. Again, one day asked the
Dr. Whether he (patient) should act natural or stilted when, as he was anxious to prove to the Drs
his sanity. Has varied between expressions of Contentment & good feeling and impatience &
threats of suicide (by implication). Usually sits in his room, apart from the others, reading. At
times, talks with fellow patients.

Feb 1 Feb 1/93. Am. Says "his nervousness is all right now & all he needs is strength in his legs" -

Jan 7/93. Since last note on this subject, has been apparently restful and sleeping well at night.

Rochester Insane Asylum Minn.
Wednesday Apr. 12th '93.

Miss Mamie Heard,
c/o Seville flats, cor. 10th St. & Selby Ave., St.Paul, Minnesota.

Moncherie soeur;- has mother gone to New York to visit father? You said when here she would go in about a month, but would come here to talk with me enroute, If mother is in St.Paul request her to come here, as I am almost desperate to see her. You, Mamie, or Rob. It is three months since mother was here and she promised me she would return in a few weeks. Therefore, it is very strange she has not been here in so long a lapse of time. Tell mother I will give up the idea of going to New York City to live, if she wishes it. Though she approved of y u and I going there. I shall be contented to make any arrangements, if mother will come and persuade the Doctors to let me accompany her back to St.Paul. The Seville lease does not exp re until September and I will remain there until then, if mother wishes it, and accept work at Menheiners. Ben Goodkind called and offered me work shortly before I broke down; he had the conversation about a position for me with mama; I refused that position, you know, because I hated St.Paul. Now, though I would rather work there, than remain here. The doctors let patients go on three months trial, I am told, if parents or friends come after them. I do not deem it necessary to inform any friend or relative, as I know mother, Rob or Tom would come here for me. Now as to health, you will want information. The appetite is glutonous, sleep very much better, and am well enough to go home to work. I dislike working here, as there is always a crowd of wizards and cnazyites intermingled wherever one stirs. My walk distresses me and oth ers here, am sure. The faculty here presented me with a pair of coarse calfskin shoes, in them I feel like puss in boots, at times. Horses trot I get at times, come down like the cow. My table manners are hoggish If you or mother have written I have received no letter. My lates medicine is Huille Dolire" Sunny days we go out on the side hill to breathe pure air and get tanned. Mother must either write or tell Dr.Kilbourne, Dr.Phelps, or Dr.Baker, that I have always from birth been an effinate kid I immagine they are trying to take that out of me; though every appearance be against me, or every action. I am not the paricite of man; you know in your Anatomy's BACK LEAVES, there was a list of books, that subject was one. You asked what paricite meant; I told you. If Dr.Kilbourne will release me, I will try to live a moral life. I am very embarassed here and dont want to remain. Have mother write, if she will not come here. She did not put me here, or agree to have me leave St.Joseph Hospital, and said that every cent of $3,000 had to be spent on me, she would do so before sending me here. The Sheriff came after John O'Brien, her Attorney, informed mother that the Judge would not send me here, as he unfortunately comes when mother was absent. Every day until that time she was at my side at the Hospital. Come to see me soon.

Your loving brother John.

P.S.:- pardon blots, but I dont care how blotty, so you get this and come to call on me.

Heard.

and pain in the stomach. Says "ate too many wild plums" - vomited considerably -

(carried to page 354)

1893

Feb 7/93. Since last note on this subject, has been apparently restful and sleeping well at night. By day, in habits, conduct and behavior, continues about as above described. Still keeps apart from his fellow patients, only occasionally entering into conversation with them and then chiefly in an argumentative strain. Still holds to and expresses the idea that it was a very great injustice to send him here. Is thin & pale. Has lost considerably in body weight in the past 4 weeks.

" 23/26 Feb 23/93. Visited today by his sister. Feb 26/93. Is spying & chewing tobacco, thinking
" 27 it would please the Doctors. Feb 27/93. Behaved well during his sister's visit. Worked in the kitchen mid day following. Chewed tobacco & was made to vomit. Talked freely again

Mar 18 Yesterday. March 18/93. Is quiet at night, but frequently Complains of sleeping poorly. Usually stays in his room almost the Entire day. Reads a little, talks only when approached and addressed, usually. Is crotchety, peculiarly behaved; at times, pleasant, looking up & smiling; again sulking, keeping his eyes cast down, refusing to look at his addresser. Never talks with his fellow patients even when he comes down with them at meal times. Recently said he thought he had tapeworm.

Apl 12 Apl 12/93. Seems to sleep better lately. Has a good appetite. Has recently written a short letter to his mother & a more lengthy one to his sister. (See attached copy of letter).

May 2 May 2/93. Complains quite often of tooth-ache; of the filling coming out. Guesses the meat is too strong, the reason.
" 5 May 5/93. Is urgently his request to go home or visit. This seems also to be the burden of his letters.
" 22 May 22/93. For some time, has apparently been resting & sleeping well at night. Conduct & behavior by day have improved. Has not been given to so much complaining & fault finding of late. Has been more communicative & sociable and, though seeming Contented, quite often expresses a desire to go home. Has been taking quite an active part in ward-work. Appetite has been very good and there has been considerable gain in flesh in past 3 months. Was today moved to A3, the "Open Wards." ——— Wrote a letter to his sister, a few days ago, Enclosing a newspaper Cut, which, he claimed, was her picture. The resemblance, perhaps, made this
" 31 a half-rational idea. May 31/93. Appetite good; bowels, regular; deportment good. Is quite pleasant & free in conversation. Reads some. Has the liberty of the grounds. Fairly tidy, but seems to have the idea that "it does n't matter how a person dresses here." Helps considerably with the work on his hall. Sleeps & eats well, at night.

June 6 June 6/93. Has kept on steadily increasing in weight. Seems ambitious to be "very smart," as he expresses himself. June 30/93. Appears well. Says he is feeling quite well, & would like to go home. Is a good worker on the hall. Reads; goes walking and writes occasional Letters. Attends Chapel services & seems very interested in them.

July 4 July 4/93. Keeping good physical condition. Appetite good. Bowels normal. Still
" 31 works quite well on the ward. July 31/93. Is in a very quiet state; fairly easy to get along with. Is in great contrast to his former ways - then, very neat; now, with a Colored shirt, sleeves & neck not buttoned; then, not working; now, helping about. Is always pleasant & is fairly rational. Anxious to go home.

Aug 4/15 Aug 4/93. Continues to gain in flesh. Aug 5/93 Was troubled last night, with sickness and pain in the stomach. Says "I eat too many wild plums" - vomited considerably —

(carried to page 354)

Personal and Medical History of Harry Jamison

Whole No. 3224.

Residence, Home is at Waseca, Minnesota

Date Admission, 6th January 1893.

Admitted by, D. Kilbourne Hour, 8 PM

How Sent, R. A. Mott, Jof P. Rice C

Sex, Male

Age, 31

Civil Condition, Single

Children, no

Age Youngest Child,

Occupation, In the Epileptic Depart. of School for Feeb

Degree Education,

Profession Religion, Not a church member

Habits, Good

Nativity, Warren County, Illinois.

Physicians Committing, A. C. Rogers and R. N. Jaeton

Correspondents, Joseph F. Moore - 311 Medlet Ave Minneapolis
Guardian -



No. for Year, 136.

Insane Relatives, not stated ; Insanity not hereditary

ting, Epilepsy

lisposing, not stated

Dementia Epileptic

ring Bodily Disorder, Epilepsy

Not, not

s Attack, Gradually developed from Epilepsy for years

Probable years probably

ck, not the 1st

issions,

Attack,

Leaving, August 15 - 1901

Hospital, 8 yrs 7 mos 12 ds

Result, Died. Epilepsy

EXAMINATION ON ADMISSION.

Exd by D. Baker Jany 27/93 -

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Not very clear

Quick or Sluggish, Sluggish

MEMORY:

Past Events,

Recent Events, Probably poor

Special Subjects,

PERCEPTIVITY: Does not seem to realize where he is or to acquire identity of persons -

Alert or Dull,

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State, Poor

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Patient examined in Beds. Is sick

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Probably

Exalted,

Depressed, possibly somewhat

DELUSIONS:

Systematized or Not, Not known

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Probably none

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent, Talks almost none. Attempts to answer questions, but under poor work of it.

Personal and Medical History of Harry Jamison

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9¼ in WEIGHT, 145 lbs NUTRITION, Not very good.

WOUNDS OR ABNORMALITIES, Scar on left leg: Scars on neck & face right leg. No recent wounds. abnormalities. Nose & upper teeth all gone —

TONGUE, Tremors, Slight Coatings, Coarse, moist. Promptness Movement, Sluggish

PUPILS, Equality, Equal Size, about normal

Response Light, somewhat Accommodation, somewhat

SIGHT, Probably fairly good

HEARING, Probably fairly Good.

COORDINATION, Arms, Finger to nose, Eyes shut, fairly good.

Legs, Standing on foot, somewhat unsteady: Standing, Eyes shut, sways some.

TREMORS, Hands, None Tongue, Slight

Facial Muscles, None General, none

REFLEXES, Patellar, Equal; slightly exaggerated.

Other Reflexes,

ARTICULATION, Hesitating, Slow, deliberate Slurred, indistinct

FACIAL EXPRESSION, Rather dull.

SENSIBILITY,

HEART,- action accelerated - Pulse small, soft

LUNGS, affected.

EXAM. URINE, Dr. Ps Gram (?).

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, somewhat Clean, Careless,

BOWELS, Normal, Constipated, tendency to be Irregular, Yes

APPETITE, Good, Medium, Poor, Capricious

SLEEP, Good, Yes Poor, Irregular,

PULSE, See Record RESP., " " TEMP., " "

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations, No knowledge

Brothers or Sisters,

Personal and Medical History of Harry Jamison

1893

This man was brought here by Dr Wilson with the following history of his case. Habits are good. Has been in the Epileptic department of School for Feebleminded. Supposed Cause of this attack is Epilepsy; form is paroxysmal. The disease gradually developed from Epilepsy for years. Has probably had several attacks. Insanity is now manifested in that any little irritation excites and produces furor. Is disposed to injure others from sudden passion. Is not suicidal. Not particularly filthy or destructive. Constant isolation has been employed, and has been confined Constantly about 6 weeks. Bromide treatment for Epilepsy has been used. He is very dangerous to children; but, during excitement, a person, in whom he confides, can frequently pacify him by talking in a kindly, sympathetic tone about his people at home, or other helpers.

Jany Jan 7/93. On admission, was put upon C² ("Sick-Ward"). Last night, was restless from an hour or so, " 8 sleeping none, though remaining quiet all night. Jan 8/93. At 9 Pm, last night, was out of bed, and refused to go back. Bit the night-nurse. Slept 4 hours, after being returned to his bed. Am. Pulse considerably accelerated; tongue coated; given laxative; vomited some. 5 Pm. Pulse 92. — " 9 Jan 9/93. Restless from 1 hour, sleeping 5, last night. At 11.30 Pm, had quite a severe Convulsion, " 10 and fell out of bed. Am. Was put on two medicines. 5 Pm. Pulse 98. Jan 10/93. Rested fairly well, and slept 5 hours, last night. Am. Complains of pain in his side; given plaster. 5 Pm. Pulse 94. " 11 Jan 11/93. Quite noisy & out of bed for 1 hour, restless for 3 hours, sleeping but 2 hours last night. Was " 12 up, pounding on screen & door of his room. Was today transferred to B². Jan 12/93. Quiet and " 13 restful, all last night. Sleeping 8 hours. Am. Has a sore on his leg; same dressed. Jan 13/93. Slept 8 hours last night. 8.30 Am. Pulse 103, very small. Has sordes on mouth. Ordered to bed. — " 14 Jan 14/93. Restless for 2 hours last night, sleeping but 3 hours. Soiled his bed. Pulse, taken during " 15 the night, ranged from 80 to 96. 8.30 Am. Pulse 88. Is constipated. Jan 15/93. Was restless for 2 hours, sleeping 4 hours, last night. Pulse from 100 to 110 during night. 8.30 Am. Pulse 102. at 9.30 Am. lies quietly in bed. Tongue is coated. Pulse 96. bowels?; ate poorly this morning. " 16 Jan 16/93. Last night, was restless for 3 hours, sleeping 2 hrs. 8.30 Am. Pulse 104. This morning, has acceleration of pulse and some fever - nature not surely known; Coughs some; tongue Coated and dry; sordes in teeth & lips; no marked physical sign in lungs; abdomen hard & rather full; (question about bowels); Considered as probably Constipated. 5 Pm. Pulse 104. R 24. T 102.4 " 17 Jan 17/93. Was out of bed for 2 hours restless 2 hours, sleeping but 2 hours, last night. Am. Is some " 18 better. Is constipated. Enema of soap suds ordered. Jan 18/93. Passed a fairly good night, " 19 sleeping 7 hours. Was restless out of bed for an hour or so. Jan 19/93. Was today, moved back " 20 to the "Sick-Ward". Jan 20/93. During the past 2 night, has been uniformly quiet & restful, " 21 sleeping 7 to 8 hours each night. Am. Constipated; given laxative. Jan 21/93. Out of bed but once, sleeping 8 hours last night. Jan 22/93. Restless for 2 hours, sleeping 4 hours last night. At 9 Pm. P 118. at 11 Pm. P 104. At 2 Am. P 118. at 4 Am. P 100. Coughed considerably during the " 22 night. Jan 22/93. Pm. Had a slight spell of coughing. Jan 23/93. Coughed a good deal, but slept 8 hours me each of past 2 night.

Summary. At first, somewhat restless at night, not sleeping very well. Was up daily. Was obstinate, requiring to be dressed & undressed, by force, part of the time. Was somewhat careless in his

NAME. Harry Jamison

*(Immunized by thing)

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.	
Jany 6th	145				
" 17	127½			9½	(24)
" 22	124			3½	
Feby 1	123		1		
" 9	123				
" 16	118½			4½	
" 24	121½		3		
Mar 2	122½	80	1		
" 11	122½		—		
" 18	120½			2½	
" 25	120¾			¼	
April 4th	129½	98	9		(up)
" 11th	131	—	1½		
" 18	130½	—	½		
" 25	129½	—	1		
May 3rd	125½	98	4		

OF MR. H. Jamison
OSIS. May 1 — 93

OTHER DATA

Bowels Moved.

Bowels Moved. Complains of pain in stomach.
Gave drafon stomach. Sat up in bed about 2 Hrs
Had a Convulsion very hard a couple
during the night. Complains of stomach
ing him at times.
Castile Soap Enema.
Complains of stomach bothering him
Bowels moved.
Bowels moved.
" "
complains of not feeling as well as yesterday
dis in stomach. Appetite is very good.
Had Convulsion. Refuse to get out of bed.
Had a Convulsion.
very sluggish this a.m.
Gave bath.
plains of Headache at times

Convulsion. No change - Slowly fair
as before
Had Convulsion
sluggish and stupid.
Had Convulsion
some brighter to day
moved a little, and quite hard.

	5	58	16	99.2	1		Bowels Quiet.
18	150	160	15	1992	1		12 P.M. Gave him Enema of Soap Suds. Bowels moved
	5	60	17		1	98.8	Appetite good.
19	150	160	14	1992	1		
	5	66	18		1	99.4	
20	150	154	16	1986	1		9.30 a.m. Bowels Moved.
	5	64	17		1	99.4	
21	150	152	15	1988	1		
	5	64	16		1		12, Bowels Moved.
22	150	156	16	1984	1		9.15 AM Convulsions very hard.
	5	72	17		1	99.8	2 P.M. Bowels moved.
23	150	156	18		1	100.2	Had a Convulsion during the night fell out of bed and
	5	74	18		1	99.8	cut his nose. 1 P.M. Convulsion
24	150	158	17		1	99.8	10 A.M. Bowels Moved.
	5	68	18		1	100.2	
25	150	192	16	1996	1		12 P.M. Gave bath. 3 P.M. Convulsions Bowels Costive
	5	74	16		1	100.2	Gave Salts.

May 1/93. Unless when disturbed by fits, he has appeared & rest and sleep well at night. Of these fits, he has had from 1 to 2 in the nights of the 11th 12th 17th & 18th first. None, however, are reported as occurring in the day time. Patient Continues to be up & around daily. May 21/93. Had 2 very hard fit during day, today.

(Carried to page 388)

1893

This man was brought h... are good. Has been in the E... Cause of this attack is Epilep... from Epilepsy for years. Has ... in that any little irritation ... from sudden passin. Is not ... isolation has been employed, an... treatment for Epilepsy has been ... excitement, a person, in whom he... pacify him by talking in a ... kindly, sympathetic tone about his ... others he loves.

Jan 7 Jan 7/93. On admission, was put upon C... ward). Last night, was restless for an hour or so,
" 8 sleeping none, though remaining quiet all night. Jan 8/93. At 9 Pm, last night, was out of bed, and refused to go back. Bit the night-nurse. Slept 4 hours, after being returned to his bed. Am. Pulse considerably accelerated; tongue coated; given laxative; vomited some. 5 Pm. Pulse 92. —
" 9 Jan 9/93. Restless from 4 hour, sleeping 5, last night. At 11 30 Pm, had quite a severe convulsion,
" 10 and fell out of bed. Am. Was put on medecines. 5 Pm. Pulse 98. Jan 10/93. Rested fairly well, and slept 5 hours, last night. Am. Complains of pain in his side; given plaster. 5 Pm. Pulse 94.
" 11 Jan 11/93. Quite noisy & out of bed for 1 hour, restless for 3 hours, sleeping but 2 hours last night. Was
" 12 up, pounding on screen & door of his room. Was today transferred to B^r. Jan 12/93. Quiet and
" 13 restful, all last night. Sleeping 8 hours. Am. Has a sore on his leg; same dressed. Jan 13/93. Slept 8 hours last night. 8 30 Am. Pulse 103, very small. Has sordes on mouth. Ordered to bed. —
" 14 Jan 14/93. Restless for 5 hours last night, sleeping but 3 hours. Soiled his bed. Pulse, taken during
" 15 the night, ranged from 80 to 96. 8 30 Am. Pulse 88. Is constipated. Jan 15/93. Has restless for 5 hours, sleeping 4 hours, last night. Pulse from 100 to 110 during night. 8 30 Am. Pulse 102. at 9 30 Am. lies quietly in bed. Tongue is coated. Pulse 96. bowels?; ate poorly this morning.
" 16 Jan 16/93. Last night, was restless for 3 hours, sleeping 5 hrs. 8 30 Am. Pulse 108. This morning, has accelleration of pulse and some fever - nature not surely known; Coughs some; tongue Coated and dry; sordes on teeth & lips; no marked physical sign in lungs; abdomen hard & rather full; (question about bowels); Considered as probably Constipated. 5 Pm. Pulse 104. R 24. Temp 102.4
" 17 Jan 17/93. Was out of bed for 2 hours, restless 5 hours, sleeping but 2 hours, last night. Am. Is some
" 18 better. Is constipated. Enema of soap suds ordered. Jan 18/93. Passed a fairly good night,
" 19 sleeping 7 hours. Was restless out of bed for an hour or so. Jan 19/93. Was today moved back
" 20 to the "Sick-Ward". Jan 20/93. During the past 5 night, has been uniformly quiet & restful,
" 21 sleeping 7 to 8 hours each night. Am. Constipated; given laxative. Jan 21/93. Out of bed
" 22 but once, sleeping 8 hours last night. Jan 22/93. Restless for 2 hours, sleeping 6 hours last
" 23 night. At 9 Pm. P 118. at 11 Pm. P 104. At 2 am. P 118. at 4 am. P 100. Coughed considerably during the night. Jan 23/93. Pm. Had a slight spell of coughing. Jan 24/93. Coughed a good deal, but slept 8 hours most of part of night.

Summary. A fresh, somewhat restless at night, not sleeping very well. Was up daily. Was obstinate, requiring to be treated rudely, by force, part of the time. Was somewhat careless in his

(consumption)

DETAILED HISTORY OF SICKNESS OF MR. H. Jamison
DIAGNOSIS. May 1 — 93

DATE:	HOUR	PULSE: AM	PULSE: PM	RESP.: AM	RESP.: PM	TEMP.: AM	TEMP.: PM	OTHER DATA
May 1	12	80	80	18	18	100	99.8	Bath.
	5		70		18		99.4	
" 2	12	62	70	17			99	
	5		60				99.8	7 30 Bowels Moved. Complains of pain in stomach.
" 3	12	80		18		100.2		11 am Gave clyster stomach bath. Pulse about 90 this
	5	62		18		100.2		Pain had a Convulsion very hard & severe
4	12	88	79	19		100		Pain in the right Side. Complains of stomach
	5		74		20			Pain. Pain at times.
5	12	70		18		99.8		A little pain. Eyes.
	5		70		19		100.2	Complains of stomach bothering him
6	12	92		19		100.2		5 PM Bowels moved.
	5		78		18		100.2	
7	12	76		18		99.4		6 PM. Bowels moved.
	5		72		18		100.2	
8	12	80		18		99.2		
	5		64		18		100.2	5 PM " "
9	12	80		19		100		7 30 Complains of not feeling as easy as yesterday
	5		74		20		100	Has pain in stomach. Appetite is very good.
9								11 am Had Convulsions. Refuse to get out of bed.
9								5 PM Had a Convulsion.
10	12	84		18		100.4		Appears very sluggish this a.m.
	5		66		18		100.2	7 PM. Gave bath.
11	12	94		20		100		Complains of Headach at times.
	5		76		16		100	
12	12	88		22		100		
	5		76		22		100	2 30 PM Convulsion. No change. Bowels fairly
13	12	72		20		99.4		Kept in bed as before
	5		84		18		100	3 PM. Had Convulsion
14	12	90		20		100		Appears sluggish and stupid.
	5		62		18		100.2	4 PM. Had Convulsion
15	12	76		17		98.6		
	5		66		19		100.2	Appears some brighter to day
16	12	84		18		99.4		
	5		66		18		99.8	Bowels moved a little, and quite hard.
17	12	84		16		99.2		Bowels Costive.
	5		58		16		99.2	2 PM. Gave him Enema of Soap Suds. Bowels moved
18	12	80		15		99.2		
	5		60		17		98.8	Appetite good.
19	12	80		17		99.2		
	5		66		18		99.4	
20	12	84		16		98.6		8 30 am. Bowels Moved.
	5		64		17		99.4	
21	12	82		16		98.8		12 Bowels Moved.
	5		64					9 15 AM Convulsions very hard.
22	12	86		16		98.8		2 PM Bowels moved.
	5		72		17		99.8	Had a Convulsion during the night fell out of bed and
23	12	86		18		100.2		Cut his nose. 1 PM. Convulsion
	5		84		18		99.8	10 AM Bowels Moved.
24	12	88		17		99.8		
	5		68		18		100.2	12 PM. Gave bath. 3 P.M. Convulsions. Bowels Costive
25	12	92		16		99.6		
	5		94		16		100.2	Gave Salts.

Mar 5/94 ... vomited, he says, with pain in stomach.
" 14 ... Had a convulsion last night. Has been losing in flesh lately. May 6/93. Had 2 convulsions last night.
" 20 May 19/93. Unless when disturbed by fits, he has appeared to rest and sleep well at night. Of these fits, he has had from 1 to 2 in the nights of the 11th 12th 17th & 18th inst. None, however, are reported as occurring
" 21 in the day time. Patient Continues to keep around daily. May 21/93. Had 2 very hard fits during day, today

(Carried to page 388)

DETAILED HISTORY OF SICKNESS OF MR H. Jamison
DIAGNOSIS. Consumption Feb 1 — 98.

DATE	TEMP AM	TEMP PM	PULSE AM	PULSE PM	RESP AM	RESP PM	OTHER DATA.
1	730	5	78	80	19	20	Coughs Considerable — Indications of story to chronic lung trouble
2	730	5	80	70	20	20	Bowels moved 9am. 1.45 P.M. had convulsion
3	730	5	78	76	19	20	
4	730	5	70	90	19	17	Had passage at 2 PM
5	7.30	5	74	74	17	18	4.30 Had Convulsion
6	7.30	5	74	73	16	18	Complains of pain in right side
7	7.30	5	72	70	18	18	At times
8	7.30	5	78	78	18	18	Had a convulsion appeared to be a very hard one
9	7.30	5	68	74	19	18	Bowels moved. 2 P.M. Convulsion 3 PM Bowels moved
10	7.30	5	78	76	18	20	Had convulsion during the night
11	7.30	5	70	74	18	19	9 Bowels moved.
12	7.30	5	77	76	18	19	6 PM. Had convulsion.
13	7.30	5	77	76	20	19	Bowels moved regular. Appetite very good.
14	7.30	5	70	78	20	19	Applies Sound Pieces.
15	7.30	5	78	78	17	17	Bowels moved 8 P.M.
16	7.30	5	78	80	17	22	P.M. Restless all the afternoon Had 2 Convulsions during the night
17	7.30	5	76	86	17	20	Coughing some complaints of pain in Left side
18	7.30	5	88	100	20	24	Appears the same as yesterday
19	7.30	5	70	76	17	22	Bowels moved Complaints of not feeling as well as usual.
20	7.30	5	88	84	17	20	Has slight spells of coughing
21	7.30	5	84	88	20	24	Coughing Considerable
22	7.30	5	82	120	20	100	11.00 Coughing spell quite hard.
23	7.30	5	72	120	18	100	5 P.M. Bowels Confined
24	7.30	5	70	120	18	100	Bowels moved 3.30
25	7.30	5	78	70	18	18	P.M. Bowels moved.
26	7.30	5	68	70	18	18	
27	7.30	5	67	68	18	17	3 PM Bowels Moved. Coughed Considerable.
28	7.30	5	64	62	14	18	P.M. Does not appear as well as usual. Visited by his Father.
	7.30	5	62		18		7.30 am Bowels moved.

Jan 1/93. [illegible] Bromide
" 8 [illegible] redness; but, during
" 9 [illegible] pacify him by talking in a
" 10 [illegible] brother, he loves.

Jan 1/93. [illegible] was put upon C[illegible]rack-Ward"). Last night, was restless for an hour or so,
" 8 Sleeping now, though remaining quiet all night. Jan 8/93. At 9 PM, last night, was out of bed, and
refused to go back. Bit the night-nurse. Slept 4 hours, after being returned to his bed. Am. Pulse
Considerably accelerated; tongue coated; given Lasative; vomited some. 5 PM. Pulse 92. —
" 9 Jan 9/93. Restless from 1 hour, Sleeping 5, last night. At 11.30 PM, had quite a severe Convulsion,
" 10 and fell out of bed. Am. Was put on medicines. 5 PM. Pulse 98. Jan 10/93. Rested fairly well,
and slept 5 hours, last night. Am. Complains of pain in his side; given plaster. 5 PM. Pulse 94.
" 11 Jan 11/93. Quite noisy & out of bed for 1 hour, restless for 3 hours, Sleeping but 2 hours last night. Was
" 12 up, pounding on screen & door of his room. Was today transferred to 13. Jan 12/93. Quiet and
" 13 restful, all last night. Sleeping 8 hours. Am. Has a sore on his leg; same dressed. Jan 13/93. Slept
8 hours last night. 8.30 Am. Pulse 103, very small. Has sores on mouth. Ordered to bed. ——
" 14 Jan 14/93. Restless for 5 hours last night, Sleeping but 3 hours. Soiled his bed. Pulse, taken during
" 15 the night, ranged from 80 to 96. 8.30 Am. Pulse 88. Is constipated. Jan 15/93. Has restless for 5
hours, Sleeping 4 hours, last night. Pulse from 100 to 110 during night. 8.30 Am. Pulse 102. at
9.30 Am. Lies quietly in bed. Tongue is coated. Pulse 96. bowels?; ate poorly this morning.
" 16 Jan 16/93. Last night, was restless for 3 hours, Sleeping 5 hrs. 8.30 Am. Pulse 105. This morning, has
acceleration of pulse and some fever - nature not surely known; Coughs some; tongue Coated
and dry; sordes on teeth & lips; no marked physical sign in lungs; abdomen hard & rather
full; (question about bowels); Considered as probably Constipated. 5 PM. Pulse 104. R 24. Tem 102.4
" 17 Jan 17/93. Was out of bed for 2 hours, restless 5 hours, Sleeping but 4 hours, last night. Am. Is some
" 18 better. Is constipated. Enema of soap suds ordered. Jan 18/93. Passed a fairly good night,
" 19 Sleeping 7 hours. Was restless out of bed for an hour or so. Jan 19/93. Was today moved back
" 20 to the "Sick-Ward". Jan 20/93. During the past 5 nights, has been uniformly quiet & restful,
" 21 Sleeping 7 to 8 hours each night. Am. Constipated; given Lasative. Jan 21/93. Out of bed
" 26 but once, Sleeping 8 hours last night. Jan 26/93. Restless for 2 hours, Sleeping 6 hours last
night. At 9 PM. P 118. at 11 PM. P 104. At 2 am. P 118. at 4 am. P 100. Coughed considerably during the
" 27 night. Jan 27/93. PM. Had a slight spell of coughing. Jan 28/93. Coughed a good deal, but slept 8
hours in each of past 2 nights.

Summary. A Scotch, somewhat restless at night, not sleeping very well. Was up daily. Was obstinate, requiring to be dressed & undressed, by force, part of the time. Was somewhat careless in his

Feb
Feb
Mar 20
Apl 5/94
" 14
" 20
May 5/94
" 19
" 21

[illegible] vomited, he says, with pain in Stomach.
May 5/94 Had a convulsion last night. Has been losing in flesh lately. May 6/93. Had 2 convulsions last night.
May 19/93. Unless when disturbed by fits, he has appeared to rest and sleep well at night. Of these fits, he has had from 1 to 2 in the night of the 11th 12th 17th & 18th of last month, however, and reported as occurring in the day time. Patient Continues to sleep & around daily. May 21/93. Had 2 very hard fit during day, today

(Carried to page 388)

…active. Constant …
…about 6 weeks. Bromide …
…dangerous to children; but, during …
…frequently pacify him by talking in a …
…people at home, or their helpers.

…patient in C² ('Sick-Ward'). Last night, was restless for an hour or so, …
…remaining quiet all night. Jan 8/93. At 9 Pm, last night, was out of bed, and …
…to back. Bit the night-nurse. Slept 4 hours, after being returned to his bed. Am. Pulse …
Considerably accelerated; tongue coated; given laxative; vomited some. 5 Pm. Pulse 92. —
" 9 Jan 9/93. Restless from 1 hour, sleeping 5, last night. At 11.30 Pm, had quite a severe convulsion,
" 10 and fell out of bed. Am. Was put on two medicines. 5 Pm. Pulse 98. Jan 10/93. Rested fairly well,
and slept 5 hours, last night. Am. Complains of pain in his side; given plaster. 5 Pm. Pulse 94.
" 11 Jan 11/93. Quite noisy & out of bed for 1 hour, restless for 3 hours, sleeping but 2 hours last night. Was
" 12 up, pounding on screen & door of his room. Was today transferred to B². Jan 12/93. Quiet and
" 13 restful, all last night, sleeping 8 hours. Am. Has a sore on his leg; same dressed. Jan 13/93. Slept
" 14 8 hours last night. 8.30 Am. Pulse 103, very small. Has sores on mouth. Ordered to bed. ——
" 14 Jan 14/93. Restless for 2 hours last night, sleeping but 3 hours. Soiled his bed. Pulse, taken during
" 15 the night, ranged from 80 to 96. 8.30 Am. Pulse 88. Is constipated. Jan 15/93. Has restless for 2
hours, sleeping 4 hours, last night. Pulse from 100 to 110 during night. 8.30 Am. Pulse 102. at
9.30 Am. Lies quietly in bed. Tongue is coated. Pulse 96. bowels?; ate poorly this morning.
" 16 Jan 16/93. Last night, was restless for 3 hours, sleeping 5 hrs. 8.30 Am. Pulse 104. This morning, has
acceleration of pulse and some fever - nature not surely known; Coughs some; tongue Coated
and dry; sordes on teeth & lips; no marked physical sign in lungs; abdomen hard & rather
full; (question about bowels); Considered as probably Constipated. 5 Pm. Pulse 104. R 24. T 102.4
" 17 Jan 17/93. Was out of bed for 2 hours, restless 2 hours, sleeping but 2 hours, last night. Am. Is some
" 18 better. Is constipated. Enema of soap suds ordered. Jan 18/93. Passed a fairly good night,
" 19 sleeping 7 hours. Was restless out of bed for an hour or so. Jan 19/93. Was today moved back
" 20 to the "Sick-Ward". Jan 20/93. During the past 2 nights, has been uniformly quiet & restful,
" 21 sleeping 7 & 8 hours each night. Am. Constipated; given laxative. Jan 21/93. Out of bed
" 22 but once, sleeping 8 hours last night. Jan 22/93. Restless for 2 hours, sleeping 4 hours last
night. At 9 Pm. P 118. at 11 Pm. P 104. At 2 Am. P 118. at 4 Am. P 100. Coughed considerably during the
" 23 night. Jan 23/93. Pm. Had a slight spell of coughing. Jan 24/93. Coughed a good deal, but slept 8
hours me each of past 2 nights.

Summary. At first, somewhat restless at night, not sleeping very well. Was up daily. Was obstinate, requiring to be dressed & undressed, by force, part of the time. Was somewhat careless in his

DETAILED HISTORY OF SICKNESS OF MR. H. Jamison
DIAGNOSIS. January 16 93.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	OTHER DATA.
Jan 16	10	5	104	128	24		104	104	Appetite poor. Bowels costive. Have salts. (No effect)
" 17	10	5	128	140	30		104	104	2. Have enema of soap suds 6 Pm. Prospering and
" 18	10	5	86	96	20		100	104	coughing some. 7.30 Bowels moved freely
" 19	7.30	5	94	96	20		100	104	Appetite fairly good
" 20	7.30	5	86	86	16		98	98	
" 21	7.30	5	96	96	20		98	98	
" 22	7.30	5	86	84	20		100	101	
" 23	7.30	5	100	85	21		100	102	Bowels costive. Coughs some
" 24	7.30	5	96	96	28		101	103	Complains of pain in side. 8 Pm Enema of Oil
" 25	7.30	5	94	92	23		101	103	Bowels moved 7.30 am.
" 26	7.30	5	93	88	20		100	103	
" 27	7.30	5	90	94	30		100	101	11.30 Pm Slight spell of coughing
" 28	7.30	5	90	86	20		100	101	
" 29	7.30	5	86	88	24		100	101	
" 30	7.30	5	86	84	25		100	100	8 Pm Bowels moved
" 31	7.30	5	80	82	22		100	100	

Jan 30 8 Am Bowels moved 5 Pm Coughing

…Feb 1 … Feb 2 … Feb 3 … Feb 7 … Feb 27 … March 2 … March 7 … March 8/93 Appetite poor … Bowels costive … Coughs some … Pulse 88 … Temp 98 … Resp 20 … Apr 5/93 Appetite poor … Bowels costive … Coughs some … Pulse 88 … Temp 98 … Resp 20 … " 14 … daily … " 20 … and Co… …

…1 Pm 14/93. Complains today of nausea …
…1 Pm 20/93. Is troubled, has asp, with pain in Stomach.
May 5 Had a convulsion last night. Has been losing in flesh lately. May 6/93. Had 2 convulsions last night.
" 19 May 19/93. Unless when disturbed by fits, he has appeared & rest and sleep well at night. Of these fits, he has had from 1 to 2 in the night of the 11th 12th 17th & 18th inst. None, however, are reported as occurring
" 21 in the day time. Patient Continues to keep up around daily. May 21/93. Had 2 very bad fits during day, today

(Carried to page 388)

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hour in a crop pair of singers.

Summary. At first, somewhat restless at night, not sleeping very well. Was up daily. Was obstinate, requiring to be treated somewhat severely, by force, part of the time. Was somewhat careless in his

Jan 28 habits, wetting his bed; fairly tidy in dress. Stood a sat in silence. When questioned, making indistinct, and almost unintelligible answers. Had a very dull look. Pulse accelerated & small. Tongue coated. Seemed rather feeble. These latter symptoms grew somewhat worse and patient was put to bed. Has remained there quietly & willingly. Has been uniformly quiet - Has slept better lately. Appetite poor & capricious for a time, is now better. Bowels have tendency to constipation. There has been continued remitting fever, with cough & sound, not very pronounced, physical signs, pointing to the lungs. Patient is thought to have tuberculosis. Has been somewhat more cheerful & a trifle more bright mentally, answering questions better.

" 29 Jan 29/93. Restless for 1 hour, sleeping 7 hours, last night. Pulse during night from 88 to 92. at 1. Am. had a severe convulsion. 9 Am. Has some pales in left side also. Lies quietly in bed.

" 30 Looks rather pale & sickly. Bowels moved. Jan 30/93. Slept soundly (8 hours) last night; being restless but 1 hour. Pulse ranging from 84 to 92. 930 Am. Coughs considerably. Nothing very significant except in connection with other symptoms; Eyes quite pallid, and there is an appearance suspicious of beginning failure. Appetite fair. Is very dull; almost like a Paretic in his quiet dullness. Bowels moved today. Jan 31/93. Has quiet and slept soundly all last night - (See attached Record of D. R. & D.)

Feb 1 Feb 1/93. Restless for 1 hour, sleeping 7, last night; Pulse, during night from 78 to 84. —

" 2 bowels moved. Feby 2/93. Slept 8 hours last night. Had a pass age of the bowels. Pulse ranged from 88 to 92. Complained of a pain in his breast. Coughed considerably during the night. Am. Still coughs a good deal. Indications are strong of chronic lung trouble. Bowels moved this morning at 1.45 Pm.

" 3 had a convulsion. Feb 3/93. Restless for 1 hour, sleeping 6 hours, last night. Pulse 96 to 108. —

" 7 130 Am. Had a convulsion. Feby 7/93. Since last note has been resting quite well at night, sleeping 7 to 8 hours. Occasionally getting up & off bed. Bowels have moved slightly. Last night, coughed and expectorated a good deal. Had a slight Convulsion at 430 pm yesterday & one during last night. Since 1st Inst, pulse & respiration have been about normal, occasionally slightly disturbed; Temperature has been up, that in the evening being sometimes 2 degrees higher than in the morning. Still confined to his bed.

" 27/94 Feby 27/93. Visited to day by his father. Feb 28/93. During the past month, has had an irregular fever, with irregular daily range - Slight acceleration of pulse & slight disturbance of respiration - Has quite frequent coughs & occasionally complains of pain in his side (See attached sheet)

Mar 20 March 20/93. Passes quiet, restful nights, sleeping well. Still keeps his bed, daily - Has slightly less fever than formerly. Continues to lose slightly in weight. Has occasional Convulsions. Quiet, Speaking only when addressed, says little then. Clean in habits

Apl 5/94 Apl 6/93. Has been on codeine int & mixture; Ordered Continued. Apl 12/93. Nights are passed quietly & restfully; occasionally fits, of greater or less severity, have occurred at night. Patient has been up

" 14 daily for the last 2 or 3 weeks, and has seemed fairly strong. Apl 14/93. Complains to day of nausea

" 20 and constipation. Was given laxative. Apl 20/93. Is troubled, he says, with pain in stomach.

May 5/6 Had a convulsion last night. Has been losing in flesh lately. May 6/93. Had 2 convulsions last night.

" 19 May 19/93. Unless when disturbed by fits, he has appeared to rest and sleep well at night - Of these fits, he has had from 1 to 2 in the night of the 11th 12th 17th & 18th Inst. None, however, are reported as occurring

" 21 in the day time. Patient Continues to be up & around daily - May 21/93. Had 2 very bad fit during day, today.

(Carried to page 388)

Whole No. 3227. No. for Year, 139.

Residence, 815 – 27th Ave. S. Minneapolis, Minn. Insane Relatives, None. Insanity not hereditary.

Date Admission, January 11th 1893. xciting, unknown.

Admitted by, D. Kilbourne Hour, 7 PM redisposing, not given

How Sent, [illegible] H. Stelle, Jof P. Stem Melancholia – Acute

Sex, male anying Bodily Disorder, No.

Age, 34 years or Not, Not

Civil Condition, Married this Attack, not stated; probably recent.

Children, one child n, Probably Not.

Age Youngest Child, ttack, 1st

Occupation, Laborer dmissions,

Degree Education, st Attack, Not given.

Profession Religion, Is a church membe Leaving, Apr. 26. 1893

Habits, moderate drinking Hospital,

Nativity, Norway Result, Transferred to Hastings.

Physicians Committing, Dr. W. E. Rochford & Chas. Rootwagell

Correspondents, Charles Moe, 815–27th Ave. S. Minneapolis, Minn





EXAMINATION ON ADMISSION.

Exd by D. Baker Jany 27/93 – MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Fairly clear

Quick or Sluggish, only fairly active

MEMORY:

Past Events,

Recent Events, Seems somewhat inaccurate

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Seems rather dull

Correct or Illusive, Correctness (?)

REASONING POWER: Seems to be very little exercised.

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Says he is afraid sometimes – Thinks it Nervousness; Seems now to be disturbed & agitated. —

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Evidently –

DELUSIONS:

Systematized or Not, Seems to have fears of being hurt.

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Probably none –

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent, very reticent: Answers brought out only by diligent questioning – Speaks in a very low hesitating way. –

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 Feet 9½ in. WEIGHT, NUTRITION, Rather poor

WOUNDS OR ABNORMALITIES, Some scars on left leg & on left thumb; abnormalities, probably none.

TONGUE, Tremors, quite marked Coatings, Considerable Promptness Movement, Promptly moved

PUPILS, Equality, Equal Size, about normal

Response Light, None Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Fingers to nose, Eyes shut, Good

Legs, Standing a foot, good. Standing, Eyes shut, Slight swaying.

TREMORS, Hands, None Tongue, Quite marked

Facial Muscles, None General,

REFLEXES, Patellar, About equal; much exaggerated – 9 to 10 – Light a trifle less responsive.

Other Reflexes,

ARTICULATION, Hesitating, Considerable Slurred, Fair degree of clearness.

FACIAL EXPRESSION, Sad.

SENSIBILITY,

HEART, Seems good.

LUNGS, Seem good. Chest 35½ in Exp 3 in.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Yes Constipated, Irregular,

APPETITE, Good, Fair Medium, Poor,

SLEEP, Good, Yes Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Not Known. ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations, Mother dead – between 30 & 40; died in childbirth (possibly.

Father or Pat. Relations, Father living – 55 to 60. claims good health

Brothers or Sisters, one sister living; good health. 2 Brothers living – good health: Don't know if any ever having been in hospital —

1893

This man was brought here by James Steines & W. K. McFarland, with following history. Is a laborer; moderate drinker; cause of this attack, unknown; form is depressed — There is no accompanying bodily disorder or disease. Not stated when first symptoms were manifested. Has expressed great fear. This is 1st attack. Insanity now shown in that he is much depressed, always crying; general dementia. Is not disposed to injure others; "hot sure of ab"; "not filthy in destructive. Has not been restrained or confined. Has been under medical treatment, but did not improve.

Jan 12 Jan 12/93. On admission last night, was quiet & restful, sleeping 8 hours. 8.30 am Pulse 82. —
" 13 9.30 am. Tongue is coated, white. Ends both marked; was given laxative. Jan 13/93. Slept well (8 hours)
" 14 last night. 8.30 am. Pulse 70. Jan 14/93. Again slept well last night. 8.30 am. Pulse 65. —
" 15/16/17 Jan 15/93. 8.30 Am. Pulse 68. Jan 16/93. 8.30 am. Pulse 66. Jan 17/93. 8.30 am. Pulse 68. —
" 18/19/20 Jan 18/93. 8.30 am. Pulse 76. Jan 19/93. 8.30 am. Pulse 76. Jan 20/93. 8.30 am. Pulse 67. —
" 21/22/23 Jan 21/93. 8.30 am. Pulse 65. PM 78. Jan 22/93. 8.30 am. Pulse 80. Jan 24/93. 8.30 am. Pulse 78. —
" 25/26/27 Jan 25/93. 8.30 am. Pulse 69. Jan 27/93. Was examined in office & day. Seemed to have fears of being hurt; says "he is afraid some times". Was somewhat disturbed & agitated during the examination.
" 28 Jan 28/93. Summary. See above notes for rest & sleep & behavior at night. Has been fairly quiet at night. Has been up daily, dressed & on the hall; usually found sitting or standing in an corner of the alcove, by himself; looking sad; saying nothing & scarcely moving. When approached, answers greetings in very low, unanimated tones. Can scarcely be persuaded & carry on conversation further. Has taken food fairly regularly. Has a tendency & constipation. By day, has been clean, tidy & well-behaved. Looks rather thin & pale.

Febr 1 Febr 1/93. Ever since admission, has been uniformly quiet at night — apparently resting and sleeping well (8 hours) each night. By day, conduct & behavior continue about as described in note of 28th ult. Still had a dull & sad expression of countenance.

March Mar 31/93. Is uniformly quiet at night, apparently sleeping well, sits around, silent and idle by day; makes feeble & indistinct answers to greetings. Is not improving.

April 13 April 13/93. Sits quietly in no place. Simply nods or makes reply to greetings only.

May 18 May 18/93. No change to note. At times, however, seems a little more active and does some work. —

" 31 May 31/93. Appetite good; bowels regular; no cough noticed; works some on ward. Talks but little. Goes walking.

June 14/15 June 14/93. Is in bed to-day: not feeling well; appetite however quite good. June 16/93 Is now up.

" 30 nothing in particular, was the matter with him. June 30/93. Condition does not change much, if any. Sits on seat, most of the time while on hall, apart from the others, saying nothing & doing nothing. Quiet, depressed.

July 4 July 4/93. Maintains his weight quite well; has gained some in flesh for a while. Still quiet.

" 31 July 31/93. No apparent change. Quiet; keeping apart from his fellow-patients — inclined to be inactive. Is dull & depressed. Is of good personal habits. Moved to Annex, today

Aug 31 Aug 31/93. No noticeable change. Dull & depressed still.

Sept 1 Sept 1/93. A quiet, harmless patient. Works a little on the ward. Health seems good.

" 30 Sept 30/93. Continues about the same, from month to month.

Oct 31 Oct 31/93 No material Change in patient's condition. Is seemingly contented here. —

Nov 30 Nov 30/93. The condition of this patient does not seem to change any, from month to month. —

1893

NAME. Martin Moe

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Febry 3d	144	74	....	....
Mar 3d	144	54	....	1
April 4th	149½	72	5½	....
May 3d	148	66	....	1½
June 5th	153	—	4	....
July 4th	151	—	....	1

March 1 / June 1 to July 31 — During these 3 months, there is no noticeable change, in any way. Quiet melancholy & despondent: seldom speaking. Health seems good. — carried to "A" page 253

In other respects there is no change to note. — his condition, notes, for several months past, still hold good. trouble. Does a little work on ward; health seems good. place, most of the time; seldom speaks unless spoken to; clean. He helps a little, occasionally, at work in office. not change in any respect. Still seems dull & depressed. cable change in patient's condition. He is, at all times, quiet seldom speaks unless spoken to. Habits clean. Health seems good. eling for remark. Quiet, reticent, keeping away from the at walking. Works on ward. Health apparently good. Seems contented. servable. He is quiet — works on ward; seldom speaks; ers. — Health seems good. Febry 1 much as April 30/94. For this he has been quiet; seldom speak: works some on the ward; apparently good. Still seems dejected a good deal of the time

From 328.

James N. Hay

March 1/94 March 1/94. Wt 143½ pds. Pulse 88. March 8/94. Has, again, been complaining of rheumatic pains, the
" 13 past few days. Given medicine. March 13/94. Struck a fellow patient (F. Reidel) with his cane, today.
" 18 March 18/94. Was in bed on the 14th 15th & 17th inst: was then visited by his mother. Up today & again visited
" 31 by his mother. March 31/94. Has been given a limited parole to outside a good deal of the time. Has had no "spells" now for some time. Habits are clean & physical condition is good for him. Behavior is good.

April 2/5 April 2/94. Wt 142 pds. Pulse 100. April 5/94. Was in bed yesterday & day before, but is up again, today.
" 22/30 April 22/94. Had a convulsion, today. April 30/94. No special remark to make in this case, except that the convulsions are of late, infrequent; keeps outside a good deal of the time & enjoys his parole.

May 1/3 May 1/94. Wt 147 pds. Pulse 80. May 8/94. A convulsion during the night. May 13/94. Visited by mother. At her request, was allowed to go down town & remain over night with their relatives —
" 18 May 18/94. Has had "limited parole" for some time & is outside, about the grounds, a good deal. Keeps about the house, all the time. Fits are less frequent, for some time past. Moved to A!
" 25/31 May 25/94. Had a light convulsion, last night. May 31/94. Is about as usual. —

June 2/30 June 2/94. One convulsion reported last night. Wt today, 143½ pds. Pulse 92. June 20/94. Had a fit at the 11th & again on 17th inst. June 30/94. No special Change. Is on medicine —

July 9/31 July 9/94. Wt 144 pds. Pulse 89. July 22/94. Was allowed to spend the day in town, with relatives —
" 31 July 31/94. No convulsions repeated during this month. Patient is about same as usual.

Aug 3/31 Aug 2/94. Wt 143½ pds. P. 92. Aug 31/94. Only 2 fits reported this month (one on 19th & the other on 31st) —

Sept 4/22/30 Sept 4/94. Wt 145 " " 94. Sept 27/94. Had 2 fits, today. Sept 30/94. Always about the same.

Oct 7/31 Oct 2/94. Wt 145 " " 90. Oct 31/94. Fits seem less frequent, the past few months. Patient is quiet & well-behaved. Has "parole" and liberty of the grounds. Is gentlemanly & pleasant in conversation; agreeable in manners. Reads some. The past week or so, has commenced with Electrical treatments —

& Transfer Book A page 149

1893

This man was brought here by James Steine[illegible]
Is a laborer; moderate drinker; Cause of this at[illegible]
There is no accompanying bodily disorder evide[illegible]
manifested. Has expressed great fear. This is 1st [illegible]
is much depressed, always crying; general d[illegible]
Not suicidal; not filthy or destructive. Has not be[illegible]
medical treatment, but did not improve.

Jan 12 Jan 12/93. On admission last night, was quiet & restf[illegible]
" 13 930 am. Tongue is coated, white, lips both marked; was[illegible]
" 14 last night. 830 Am. Pulse 70. Jan 14/93. Again slep[illegible]
" 15/16/17 Jan 15/93. 830 Am. Pulse 68. Jan 16/93. 830 am. Pu[illegible]
" 18/19/20 Jan 18/93. 830 am. Pulse 76. Jan 19/93. 830 am. P[illegible]
" 21/22/23/24 Jan 21/93. 830 am. Pulse 65. PM 78. Jan 23/93. 830 am. [illegible]
" 25/26 Jan 25/93. 830 am. Pulse 69. Jan 27/93. Was examine[illegible]
hunt; says "he is afraid some times". Was somewhat disturbed & agitated during the examination.
" 28 Jan 28/93. Summary. See above notes for rest & sleep & behavin at night. Has been fairly quiet at night. Has been up daily, dressed & on the hall; usually found sitting or standing in an corner of the alcove, by himself; looking sad; saying nothing & scarcely moving. When approached, answers greetings in very low, unanimated tones. Can scarcely be persuaded & carry on conversation further. Has taken food fairly regularly. Has a tendency & constipation. By day, has been clean, tidy & well-behaved. Looks rather thin & pale.

Febr Feby 1/93. Ever since admission, has been uniformly quiet at night - apparently resting and sleeping well (8 hours) each night. By day, conduct & behavin continue about as described in note of 28th ult. Still had a dull & sad expression of countenance.

Mar 1 Mar 2/93. Is uniformly quiet at night, apparently sleeping well. Sits around, silent and idle by day; makes feeble & indistinct answers to greetings. Is not improving.

Apl 13 Apl 13/93. Sits quietly in one place. Kindly nods or makes reply to greetings only.

May 18 May 18/93. No change to note. At times, however, seems a little more active and does some work. ——

" 31 May 31/93. Appetite good; bowels regular; no cough noticed; works some at ward. Talks but little. Goes walking.

June 14/15 June 14/93. Is in bed to day: not feeling well; appetite, however quite good. June 16/93. Is now up.

" 30 nothing in particular, was the matter with him. June 30/93. Condition does not change much, if any. Sits on seat, most of the time while in hall, apart from the others, saying nothing & doing nothing. Quiet, depressed.

July 4 July 4/93. Maintains his weight quite well; has gained some in flesh for a while. Still quiet.

" 31 July 31/93. No apparent Change. Quiet; keeping apart from his fellow-patients - inclined to be inactive. Is dull & depressed. Is of good personal habit. Moved to Annex, today

Aug 31 Aug 31/93. No noticeable change. Dull & depressed still.

Sept 1 Sept 1/93. A quiet, harmless patient. Works a little in the ward. Health seems good.

" 30 Sept 30/93. Continues about the same, from month to month.

Oct 31 Oct 31/93. No material Change in patient's condition. Is seemingly contented here. ——

Nov 30 Nov 30/93. The condition of this patient does not seem to change any, from month to month. —

1893

Dec 31 Dec 31/93. Is dull; somewhat depressed. In other respects there is no change to note. —

1894
Jany 31 Jan 31/94. In regard to this patient, and his condition, notes, for several months past, still hold good.

Feb 28 Feby 28/94. Quiet & inoffensive; causes no trouble. Does a little work at ward; health seems good.

Mar 31 March 31/94. Quiet; depressed; sits in the one place, most of the time; seldom speaks unless spoken to; helps a little with the work. Habits are clean. He helps a little, occasionally, at work outside.

Apl 30 April 30/94. Patient's condition does not change in any respect. Still seems dull & depressed.

Jany 31 and Feby 31 During this period, there has been no noticeable change in patient's condition. He is, at all times, quiet and well-behaved; works some at ward. Seldom speaks unless spoken to. Habits clean. Health seems good.

Aug 31 Sept 30 Oct 31 Nov 30 Dec 31 1894 Jan 31 During these 3 months, there is no change calling for remark. Quiet, reticent, keeping away from the others as much as possible. Does not converse or walking. Works at ward. Health apparently good. Seems contented.

Feby March & April 30/94 During this period, no special change observable. He is quiet - works at ward; seldom speaks; seems depressed; habits clean; tidy in dress. Health seems good. Feby March & to April 30/94. For this quarter, there is nothing special to report. He has been quiet; seldom speak; works some at the ward; habits clean; dress neat. Health apparently good. Still seems despondent, a good deal of the time.

May 31 June 30 July 31 During these 3 months, there is no noticeable change, in any way. Quiet melancholy & despondent; seldom speaking. Health seems good. —— carried to "A" page 238

From 328.

James N. Hay

1894
Mar 1/13 March 1/94. Wt 143½ pds. Pulse 88. March 8/94. Has, again, been complaining of rheumatic pains, the past few days. Given medicine. March 13/94. Struck a fellow patient (F. Reidel) with his cane, today.

" 18 March 18/94. Was in bed on the 14th 15th & 17th inst: was then visited by his mother. Up today & again visited by his mother. March 31/94. Has been given a limited parole to be outside a good deal of the time. Has had no "spells" now for some time. Habits are clean & physical condition is good for him. Behavin is good.

Apl 2/5 April 2/94. Wt 142 pds. Pulse 100. April 5/94. Was in bed yesterday & day before, but is up again, today.

" 22/30 April 22/94. Had a convulsion, today. April 30/94. No special remark to make in this case, except that the convulsions are of late, infrequent; keeps outside a good deal of the time & enjoys his parole.

May 1/13 May 1/94. Wt 144 pds. Pulse 80. May 6/94. A convulsion during the night. May 13/94. Visited by mother. At her request, was allowed to go down town & remain over night with their relatives.

" 18 May 18/94. Has had "limited parole" for some time to be outside, about the grounds, a good deal. Keeps about the house, all the time. Fits are less frequent, for some time past. Moved to A!

" 25/31 May 25/94. Had a light convulsion, last night. May 31/94. Is about as usual. ——

June 2/30 June 2/94. One convulsion reported last night - Wt today, 143½ pds. Pulse 92. June 20/94. Had a fit at the 11th & again on 17th inst. June 30/94. No special Change. Is on medicine.

July 9/31 July 9/94. Wt 144 pds. Pulse 89. July 22/94. Was allowed to spend the day in town, with relatives.

" 31 July 31/94. No convulsions reported during this month. Patient is about same, as usual.

Aug 2/31 Aug 2/94. Wt 143½ pds. P. 92. Aug 31/94. Only 2 fits reported this month (one on 19th & the other on 31st).

Sept 4/27 Sept 4/94. Wt 145 " " 92. Sept 27/94. Had 2 fits, today. Sept 30/94. Always about the same.

Oct 2/31 Oct 2/94. Wt 146 " " 90. Oct 31/94. Fits been less frequent, the past few months. Patient is quiet & well-behaved. Has "parole" and liberty of the grounds. Is gentlemanly & pleasant in conversation; agreeable in manners. Reads some. The past week or so, has commenced with Electrical treatments.

& Transfer Book A page 149

Whole No. 3231.

No. for Year, 1143.

Residence,

Insane Relatives,

Date Admission, 18th January 1893.

Admitted by, Dr. Kilbourne Hour, 7 PM.

How Sent, Order of District Court, Washingt

Sex, male.

Age,

Civil Condition,

Children,

Age Youngest Child,

Occupation,

Degree Education,

Profession Religion,

Habits,

Nativity,

Physicians Committing,

Correspondents, Samuel Peters, St Cloud Minn. (father)



se Exciting,

se Predisposing,

n, Paresis of Insanity

mpanying Bodily Disorder,

idal or Not,

of this Attack,

tion,

of Attack,

of Admissions,

First Attack,

of Leaving,

in Hospital,

Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish,

MEMORY:

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

See typewritten notes of examination Jany 28/93. (attached)

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft - 9 in WEIGHT, 165 lbs NUTRITION,

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Coatings, Promptness Movement,

PUPILS, Equality, Size,

Response Light, Accommodation,

SIGHT,

HEARING,

COORDINATION, Arms,

Legs,

TREMORS, Hands, Tongue,

Facial Muscles, General,

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of George E. Peters

1893

This man was brought here by a Deputy Sheriff and the County Attorney, under an Order of District Court, first Judicial district. No history accompanied the Commitment.

Jan 19. Jan 19/93. On admission was put upon B³ — Was restless for 1 hour, sleeping 7 hours, last night.

" 20 830 Am. Pulse 82. R 100. Jan 20/93. Restless and out of bed for 3 or 4 hours last night, sleeping only 4 hours. Was found by Night-Nurse up at 3 different times, looking out of his window of his room,

" 21 but patient went to bed when Night nurse opened the door. 9 Am. Pulse 80. R 100. Jan 21/93. Last night, was restless and out of bed for 1 hour, sleeping 8 hours. 830 Am. Pulse 82. R 100.

" 22 Jan 22/93. Again restless and out of bed for 1 hour, sleeping 8 hours, last night. 830 Am. P 78. R 99½

" 23 Jan 23/93. Restless & out of bed for 1 hour, sleeping 7 hours, last night. 9 Am. Pulse 86. R 100.

" 25½ Jan 25/93. Am. Complains of a cold. Has today visited by father. Jan 26/93. For the past 3 nights has been sleeping 8 hours each night, though continues restless & out of bed for an hour or so

" 28 at each night. Jan 28/93. See attached record of examination made today.

" 31 Jan 31/93. By attached Clinical record, it will be observed that pulse has been somewhat accelerated and that there has been a continuous elevation of temperature of from 1 to 2 degrees being generally higher in the evening. Since last note on this subject, patient has been uniformly quiet, apparently resting and sleeping well (8 hours) each night. Previously (as noted above) has been somewhat restless for an hour or so, quite often, at night. By day, has been up on ward, dressed neatly & caring for his own personal wants. Clean, tidy & well-behaved. Talks when approached quite freely (see examination for further record of case). Am. Complains of a severe headache & a cold. Appetite fairly good. Bowels regular.

Feb 1 Feby 1/93. Is continually complaining of headache; quite restless by day, walking up & down the hall most of the time. Talks a good deal about going home & of the chances he had & elopes before his

" 3 coming here. Feb 3/93. Quite restless; cannot sit still but for a few minutes at a time. —

" 4 Weight to day 167 pounds. Pulse 84. Feb 4/93. AM. Has some cough. Feb 5/93. Am. Again com-

" 18 — plains of a cold. Feb 18/93. Uniformly quiet, apparently resting & sleeping well at night. Continues to keep up around daily, clean, tidy & well-behaved. Talks quite frequently & freely with attendants, the burden of his conversation being chiefly about his going home; rarely talks with his fellow-patients. Still very restless & uneasy. Plays games &c, but cannot remain at them long at a time. No definite delusions have been detected. Eats regularly & well. Bowels apparently normal. Bodily health seems good. Is gaining some in weight.

" 27 Feb 27/93. Has a tooth which caused his face to swell exceedingly.

Mar 17 March 17/93. See record of pulse & temperature, taken twice daily, up to the present date. Temperature has been taken by rectum & has shown, at times, some elevation, hardly sufficient however, to indicate anything definite. March 25/93. Is uniformly quiet at night, apparently resting and sleeping well. Is clean, very tidy in dress, uniformly quiet & well behaved — sits around; has

" 25 an air of abstraction & absent-mindedness, when addressed, appears as if aroused from a period

Apl 19 of abstraction. Apl 19/93. Sleep & conduct, by night & by day, about as described above. Attends dances & enjoys amusement apparently. Recently in a dance (quadrille) was noticed as becoming completely helpless, appearing dazed & confused, seeming almost not to realize where he was or what he was doing, for a short time. This condition apparently brought on by some slightly complicated

OF Geo Peters

Ch'll

Apr. 21st '93.
morning the papers sent for me, and the
ch is sent here regularly, was handed
. Your letter I am somewhat tardy in
ll receive this before Sunday. The
ll occupy respectively the Methodist and
lace. I have not made their acquaintan-
has fallen here to the depth of a foot
s. I saw seeding the other day; part
here, is plowed, but I do not know of
y the Gazette that Searls as well as
ing to St. Paul. It is strange that
in the list of graduating Minneapolis
he Globe recently. What did you do
oes Yurk look like? I do not know of
el well at present and hope that this
home in an enjoyable way.
e son,
George E. Peters.

NAME. Geo. E. Peters

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jan 3d	167	84	2	
Mar 2d	169	90	2	
Apl 4th	173½	102	4½	
May 3d	171	78		1½
June 3d	171	72		
July 1st	169	90		3
Augt 1st	164	90		5
Sept 2d	163	86		1
Oct 2d	165	76	2	

15	76	98	
16	82 82	99 99	
17	72 72	99 99	
	80	98	

S

.. 5 P.M. 78 99.6

Rent

...esses

freely. Seems to be worried a good deal of late & very restless. Walks, Chairs.

Oct 6 Oct 6/93. Seemed a key & unlocked one of the locks in the screen, was searched but the key could not be found. Two other patients (Moses & Bush) seemed to be working with him. Peters requested another patient to watch the door but the latter declined

(carried to page 276)

1893

This man was bro
District Court,

Jan 19. Jan 19/93. On adm
" 20 830 Am. Pulse 82. Temp
4 hours. Was found by
" 21 but patient went to bed
night, was restless and
" 22 Jan 22/93. Again restless a
" 23 Jan 23/93. Restless & out of bed
" 25 Jan 25/93. Am. Complains of
has been sleeping 8 hours each
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most of the time. Talks a good deal about going home & of the chances he had to close before his
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" 4 Weight & day 167 pounds. Pulse 84. Feb 4/93. Am. Has some cough. Feb 5/93. Am. Again com-
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with attendants, the burden of his conversation being chiefly about his going home; rarely talks
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at them long at a time. No definite delusions have been detected. Eats regularly & well.
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completely helpless, appearing dazed & confused, seeming almost not to realize where he was or what
he was doing, for a short time. This condition apparently brought on by some slightly complicated

...ng only
...isroom,
...Jan 21/93. Last
...82. Tem 100.
...st night. 830 Am. P 78. Tem 99.4
...ght. 9 Am. Pulse 86. Tem 100.
...father. Jan 26/93. For the past 3 nights
...ing & restless & out of bed for an hour or so
...end of examination made to day.
...it will be observed that pulse has been somewhat has

CLINICAL NOTS IN THE CASE OF Geo. Peters

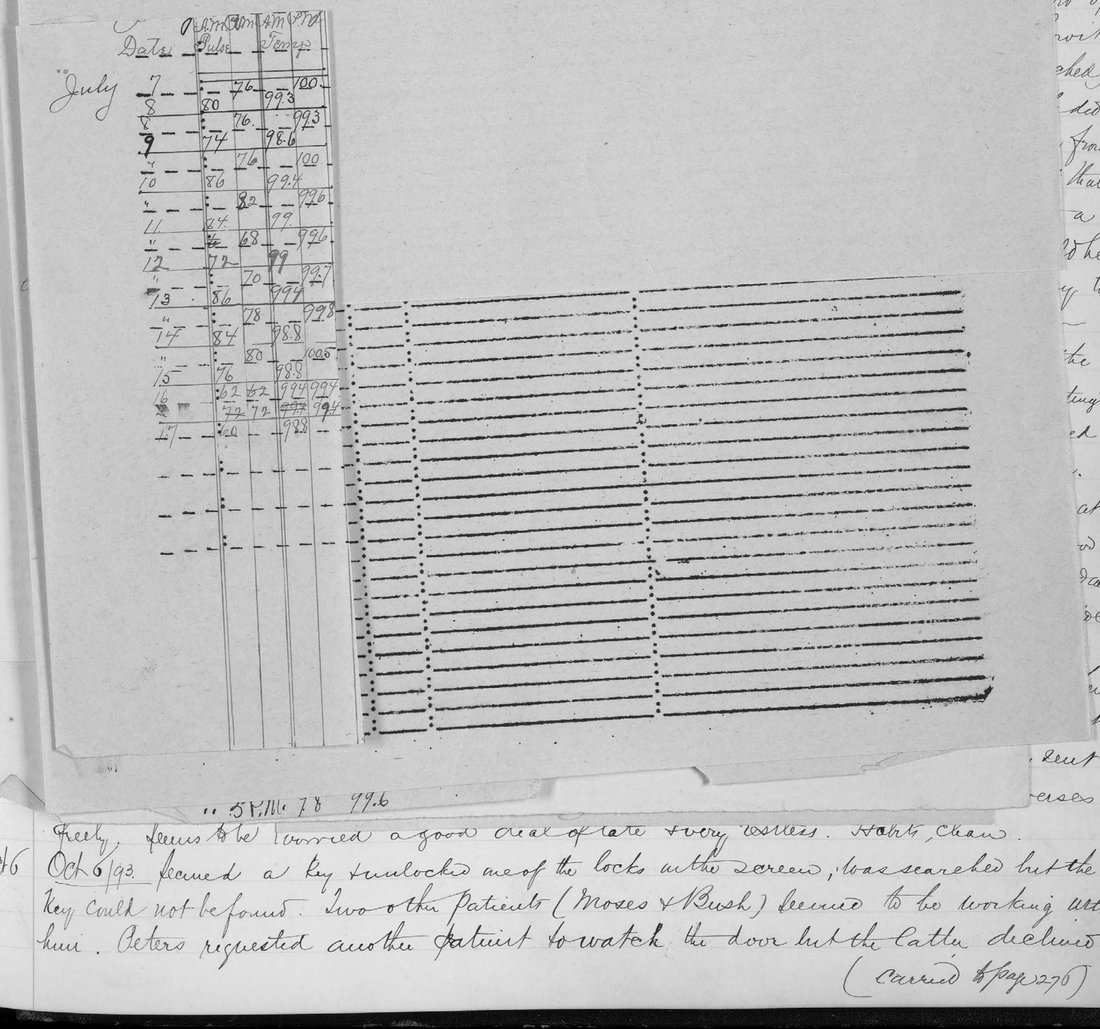
Ch's ''

Rochester Apr. 21st '93.

Dear Mother:- I received this morning the papers sent for me, and the last issue of the Gazette, which is sent here regularly, was handed me by the Assistant Supervisor. Your letter I am somewhat tardy in answering; but I suppose you will receive this before Sunday. The Rev. E.P. Robertson and L Mitchell occupy respectively the Methodist and Presbyterian pulpits at this place. I have not made their acquaintance. Within the last 36 hs snow has fallen here to the depth of a foot This was not expected by farmers. I saw seeding the other day; part of the ground used in gardening here, is plowed, but I do not know of any seed being put in. I saw by the Gazette that Searls as well as Clapp and McCartney, intend moving to St. Paul. It is strange that Bachelors name was not included in the list of graduating Minneapolis Medics, that I saw printed in the Globe recently. What did you do with the John horse, and what does Yurk look like? I do not know of anything further to write, I feel well at present and hope that this will find you and the folks at home in an enjoyable way.

I remain your affectionate son,

George E. Peters.



freely, seems to be worried a good deal of late & very restless. Habits, clean.

Oct 6 Oct 6/93. Seemed a key & unlocked one of the locks in the screen, was searched but the key could not be found. Two other patients (Moses & Bush) seemed to be working with him. Peters requested another patient to watch the door but the latter declined

(carried to page 276)

1893

This man was [illegible]
District Court,
Jan 19 Jan 19/93. On admi
" 20 8.30 Am. Pulse 82. 96/100
4 hours. Was found by M
" 21 but patient went to bed
night, was restless and ou
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" 28 and ap
" 31 Jan 3
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" 3 coming here. Feb 3/93. Quite restless; cannot sit still but for a few minutes at a time. —
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" 18 plains of a cold. Feb 18/93. Uniformly quiet, apparently resting & sleeping well at night. Continues to sleep & around daily, clean, tidy & well-behaved. Talks quite frequently & freely with attendants, the burden of his conversation being chiefly about his going home; rarely talks with his fellow-patients. Still very restless & uneasy. Plays games &c, but cannot remain at them long at a time. No definite delusions have been detected. Eats regularly & well. Bowels apparently normal. Bodily health seems good. Is gaining some in weight.
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...at prison
...of health.
...ood and
...as he
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...Growth
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...he died;
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MEDICAL NOTS IN THE CASE OF Geo Peters

D:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN
	16	8 AM.	82	996			
	17	4 PM.	74	99.8			
	17	8 AM.	82	99.8			
	17	4 PM.					

" 5 P.M. 78 99.6

Oct 6 Oct 6/93. Seemed a key & unlocked one of the locks in the screen, was searched but the key could not be found. Two of the patients (Moses & Bush) seemed to be working with him. Peters requested another patient to watch the door but the latter declined

(carried to page 270)

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...room,
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...r night. 830 am. P 78. Tem 99.4
...ast. 9 Am. Pulse 86. Tem 100. —
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he was doing, for a short time. This condition apparently brought on by some slightly complicated

MEDICAL NOTES IN THE CASE OF G. B. Peters

MO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
Feb	12	9 AM	87	99.4			
		3 PM	88	99.1			
	13	10 AM	92	99.4			
	"	2 PM	88	99.6			
	14	9 AM	88	99.5			
	"	5 PM	82	99.6			
	15	8 AM	94	99.4			
	"	7 PM	78	99.2			
Fe	16	9 AM	90	99.2			
	"	5 PM	76	99.4			
	17	8 30 AM	76	99.4			
	"	5 PM	82	98.8			
	18	9 AM	84	99.2			
	"	6 30 PM	82	99.4			
	19	8 30 AM	86	99.4			
	"	6 30 PM	78	99.2			
	20	8 30 AM	88	99.4			
	"	5 PM	78	99.6			
	21	8 AM	88	99.2			
	"	5 PM	82	99			
	22	8 30 AM	78	99.2			
	"	5 00 PM	84	99.4			
	23	8 AM	86	99.6			
	"	3 PM	78	99.6			
	24	8 30 AM	80	99.4			
	"	5 PM	78	LD			
	25	8 AM	80	99.2			
	"	5 PM	86	99.2			
	26	8 AM	78	99.4			
	"	5 PM	88	99.2			
	27	8 AM	98	100.2			
	"	5 PM	96	100.2			
	28	8 AM	88	100.4			
	"	5 PM	86	100.8			
Mch	1	8 AM	82	99.8			
	"	3 PM	74	99.6			
	2	8 AM	72	99			
	"	5 PM	72	99.2			
	3	8 AM	70	99			
	"	5 PM	76	99.4			
	4	8 AM	88	99.2			
	"	5 PM	60	99			
	5	8 AM	84	99.4			
	6	8 AM	76	99.2			
	"	5 PM	66	99.6			
	7	8 AM	82	99.8			
	"	5 PM	66	99.6			
	8	8 AM	76	99.4			
	"	5 PM	80	100.6			
	9	8 AM	82	99.8			
	"	5 PM	76	99.8			
	10	8 AM	88	100			
	"	5 PM	76	99.8			
	11	8 AM	84	99.8			
	"	5 PM	76	99.4			
	12	8 AM	82	99.6			
	"	5 PM	78	99.2			
	13	8 AM	86	100.2			
	"	5 PM	100	99.8			
	14	8 AM	80	99.6			
	"	5 PM	76	99.4			
	15	8 AM	80	99.2			
	"	5 PM	78	99.6			

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(carried to page 276)

NOTES ON EXAMINATION OF GEORGE PETERS, JAN. 28'93.

(Dr.Kilbourne present.)

His temperature is loo to day, says he has a cold, that he took cold and notived a few days after coming stated however that waterfpoze in his room in the jail, but dont think that was the cause.

Age, 25, describes himself as healthy, having had only a severe illnes, 7 or 8 years ago. Says he had the measles two years ago.

Q. Have you had any headaches? A. Last s mmer, not many,

Q.How sever, A. They were not so severe as to quit work.

Q. Have you had any dizzy spells? A. No, not for several years; used to have them on getting up; never fell down except once, thought I would take a notion to see if I could fall down; -neve thought of it before or after.

Q.Was it a kind of athletic feat? A. Well, I fell backwards.

Q.Why did you fall? A. I though I did it out of foolhardiness.

Q.Was any one around? A. There might have been.

Q. Did you have any queer feelings? A.Did not think there was, might have been. Where were you? Was in the house. Were you at anding up? YesZ What were you thinking about? Nothing. Had you been reading? I guess so Did you think about falling before you did? I think I did. Did it hurt you? No. Did they call it hysteria? Well, it seemed something like that, they said I was Hysterical. He describes himself as having ~~dis-~~ turbed; dont know any reason for it, though it was due to external circumstances; thought I was not right in my manner to other people.

Did you ever hear any voices? No, I never did. Describes some quarrels with his father at one time. pont think that he had any reason for it, except that I was insane at the time. What trouble did you have with the horse? Got into my head the horse was going to bite me. Describes having beat him thoroughly first with afterwords with strap. His actions did not suit me, and I went and got a cart whip, then says he finally got a flail. Says it must have been immagination, or lunacy. Did you use this? Yes, guess I did strike him first, hit him in the neck.

Did you feel right in your head last Summer? Had some head-ache. Did you ever do anything that you could not remember after? Dr.Wicks tried to work his mental process, I could not act so he could.

Never found yourself so you could not remember how you got there? No. Asked concerning the name of the Ministers in town, does not seem to give their names, but does not deny that they said anything to him concerning a young lady, or any particular attention to him. Says he dont see howthat question arrose. Dont remember any subh thing, never had much in particular to do with the girl, never though any one in love with her, thinks she used to talk too much. How long ago did you know Mr. Stewart? three years. What kind of a man was he? A. Physically, Mentally, or Morally? A. All three. My first impression of him was, before seeing h m, on paper and hearsay, was that he was a good allaround fellow; as log as I knew him, tried to keep that up.

"	I	736	78	I	I	99
"	I	186	I	I	99	I
"	I	730	76	I	I	100

Feb 1 Feby 1/93. Is continually complaining of headache; quite restless by day, walking up & down the hall most of the time. Talks a good deal about going home & of the chances he had before he was coming here. " 3 Feb 3/93. Quite restless; cannot sit still but for a few minutes at a time. — " 4 Weight to day 167 pounds. Pulse 84. " 13 Feb 11/93. Abt. Has some cough. Feb 15/93. Clear. Again complains of a cold. Feb 18/93. Uniformly quiet, apparently resting & sleeping well at night. Continues to be up & around daily, clean, tidy & well-behaved. Talks quite frequently & freely with Attendants, the burden of his conversation being chiefly about his going home; rarely talks with his fellow-patients. Still very restless & uneasy. Reads papers &c, but cannot remain at them long at a time. No definite delusions have been detected. Eats regularly & well. Bowels apparently normal. Bodily health seems good. Is gaining some in weight. " 27 Feb 27/93. Has a tooth which caused his face to swell exceedingly.

Mar 17 March 17/93. See record of pulse & temperature, taken twice daily, up to the present date. Temperature has been taken by rectum & has shown at times, some elevation, hardly sufficient however, to indicate anything definite. " 25 March 25/93. Is uniformly quiet at night, apparently resting and sleeping well. Is clean, very tidy in dress, uniformly quiet & well behaved - sits around; has an air of abstraction & absent-mindedness, when addressed, appears as if aroused from a period of abstraction. Apl 19 Apl 19/93. Sleep & conduct, by night & by day, about as described above. Attends dances & plays & amusement apparently. Recently in a dance (quadrille) was noticed as becoming completely helpless, appearing dazed & confused, seeming almost not to realize where he was or what he was doing, for a short time. This condition apparently brought on by some slightly complicated

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Personal and Medical Hist... Grey & D A+

...mother.
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...ion, ...
...1/93. Last ...
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...glt. 830 Am. P 78. Tr 99+
...Am. Pulse 86. Tr 100.—
...Jan 26/93. For the past 3 nights ...
...restless + out of bed for an hour or so ...
...examination made to day.
...be observed that pulse has been normal but ...
...anxious elevation of temperature of from 1 to 2 degrees ...
...g. Since last note on this subject, patient has been uniformly ...
...Sleeping well (8 hours) each night. Previously (as noted above) ...
...ess for an hour or so, quite often, at night. By day, has been up on ...
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Talks when approached quite freely (see examination for further record of case). Also Complains of a severe headache + cold. Appetite fairly good. Bowels regular.

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ADDITIONAL NOTES CONCERNING PETERS' CASE.

What led you to do that? I dont know unless it was an insane impulse. Asked about the horse, he corrects our statement and gives the story in detail, describing that affair.

What intention had you when you quit work. Had been picking up potatoes. He studies over the question for a long while, then says dont think had any particular intention, went in to change clothes, then I changed ~~back again~~. Had you any grudge? Well, I talked hard against him (then he studied for a while.) Says he dont know whether the idea of killing entered his head when he went down there. What entered your head when you saw him upon the street? (Studies again.) What was your motive? (Studies in vacancy as if trying to remember.) Says finally that he cant remember. Then says, "sometimes I think I am trying to sneak out of it." What did you think then? Let me see" (-then studies again.) It occurred to me that I was thinking of some particular injury that I wanted to lick him, just to beat him, that was all."

He says, you ask me about that quarrel with father; well, the old gent licked me, and I dont know, but I thought Seward was trying to have some influence over me, and raise his cane on me. When did you buy the revolver? About a week before the shooting. What for? Let me see" studies and waits. "No time to study it up". Well, I told father I was going a shooting in a few days. Dont shoot with a revolver, do you? No. (Urging him to quit the stopping to remember, and tell right out, seems unable to do so.) Says he remembers of seeing only one revolver of that pattern, owned by a fellow by the name of Ford. Dont know but that it was the natural desire to obtain one like it, that made him buy it. In describing the revolver, he talked very glibly.

First thing I told Seward was, that I was dissatisfied with the amount of wages. I thought that he had a revolver. Did he make any move as if he had a revolver? no, he said nothing. I pulled the trigger once, and the catch was on, and it did not go off. I remarked that my intention was to shoot him square in the forehead; -kind of a fancy shot?. this he describes as the idea which he had in mind at the time. (Seemingly according to his description at this time, this was the only idea that he had in his mind. Had no passion, anger, or any very definite ideas.) Asking if he had any trouble with Seward, says dont think I had got that far in thinking; once after I quit, thought there was some difference, and went up there to settle it; had a quarrel, and told father about it.

Did you not go down there to see Seward? I did not think anything about it, until saw him. How did you feel when Seward was shot? Did you ever have any feelings of regret? No. Well, let me see, think I did one night, and since then have said I did wrong, and would repent of it. Were you angry? Hesitates. Describes his first shot as upon the side only, and did not hit him. Talked about where the Doctors said the first shot struck. Says that some one told him there were 3 holes in the man's hat, but he did not think there were. He remembers pulling triger and the catch was on, and he had to stop and take of the catch. Did Seward run any? I think he moved down the street a way. But we got closer together when I got catch off, and we grabbed each other, near the music store. He got away and got into the store. Do not know why people did not head me off, he said in answer to question.

4	I	736	78	I	I	99+	
11	I	186	I	I	99+	I	
11	I	734	76	I	I	100+	

freely. Seems to be worried a good deal of late + very restless. Walks, clean.
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(carried to page 270)

Personal and Medical History of Geo. E. A.

2

Shot him in the music store, was standing up, arrested by Officer in about one half minute. Did you not before shooting claim that Seward and the ministers there, objected to your marrySng a girl?

Did it ever enter your head to shoot Seward before that day? I told father some one would shoot Seward some day, that I would do it. Dont think that I said it seriously. What do you think of it now? Think I ought to be extremely sorry for it, and if guilty ought to stand punishment. Asked if he fasted six days once, said yes;,so as to get up an appetite.

COMMENTS:- As descriptive of the conversation, which is very difficult to report, would say that it ~~xxxxxxxx~~ throughout manifested considerable shrewdness, and a very good or fairly memory. But was very defective in a peculiar way, and pereistently so throughout. Defective in a kind of realizing sense, of things of which he spoke, and total lack of feeling one way or another. It seemed as if if he had the chance, he would have himself hanged for murder , rather than sent to the Asylum. He studies out what he merits in this case, about the same cold-blooded and purposeless way that he did the murder in the first place, not seemingly trying to free himself, although there is throughout a kind of vagueness in his statements with regard to everything partaining to the act.

"	I	98.4	78 I	I	99 I
"	I	98	86 I	I	99.6 I
"	I	98.4	76 I	I	100 I

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(carried to page 270)

Personal and Medical History of Geo. F. A.

ying out - and morning for Dr to make note.

Mr Peters

DETAILED HISTORY OF SICKNESS OF MR. ~~E. McCarty~~

DIAGNOSIS.

1893.

DATE:	TEMP. AM	TEMP. PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	OTHER DATA.
Jan							
	8.30		82			100	
	8.30		80			100	
	8.30		82			100	
	8.30		78			99.4	
	8.30		86			100.8	
	8.30		94			101.4	
	8.30		86			98.6	
	8.30		88			100.4	
	8.30		88			100	
	8.30		84			100	
	8.30		86			100	
	8.30		96			99.6	
	8.30		82			98.6	
30	8.30		84			98.6	
31		7.		80.		99.8	Complains of a severe head ache
	8.30		82			99	and cold. Appetite fairly good
"	8.30	6.30	86			99.6	Bowels regular
Febr. 1			84			99.4	
4		7.	88			100.	Is always complaining of Head ache
							quite restless walks the Legand down the
							Hall most of the time talks a good deal
							of going home and what changes he had before
							He came down here to elope
2	9		92			100	
"		7.30		92		100	
3	9.		88			99.4	Plays some checkers and Cards but
							is quite restless can not sit still but
							few minutes at the time
"		5.30	88			100.	
4.	9		86			99.6	
"		7		80		99	Coughs a little
5	9		94			99.6	Complains of a cold
"		5	88			99.8	
6	9		82			99.6	
"		7.30		72		98.6	
7	9		74			99.6	
"		4.30		82		99.6	
8	9		96			99.8	
"		7		84		99.2	
9	9		88			99	Appetite good. Bowels regular
"		7.30		90		99.2	
10	9		94			99.6	
"		2.30		78		99.4	
11	9		86			99.6	
"		7.30		76		100.1	

Bowels

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(carried to page 270)

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MONTHLY SUMMARY RECORD.

PATIENT'S NAME Peters Geo E. CASE NO. 3231 R. NO. ____

DATE 31 Appetite very good Bowels regular

Feb 1 Habits Behavior: Is of a rather restless disposition although not as bad as when brought in here as he seems to be more contented, takes part in all kinds of games played both on Ward and outside Works on Ward and is always willing to do anything asked of him. Talk: can't find that nothing very wrong in this conversation + in regard to his trouble in Stillwater he says he could not help it. Habits Clean was visited by Father in the first part of Month of July. Visited by father who thought he looked some

June 3: Weight 172 Pulse 72

Aug 1st Weight 169 Pulse 96

July 19 Appetite good Bowels regular does not work as much on ward as he did has been inclined to be lazy and don't like to do any more than can be helped otherwise no change from last Month. says he must brace up and get to Stillwater and clear himself says he is confident that he can read and plays games for past times Habits clean

22 States a few grievances Tuesday Describes a dream slightness - Asked if was bit at worried do + before - says don't think "in front except to him now" Was "away up in western Iowa" - Thought was doing the "great work of his life" - Didn't have any motive especially - says went to Laundry + was with attendant but couldn't remember any of the conversation as they repeated it to him after return - Thinks he is family - getting more "vacant"

Aug 10/93 Aug 10/93. Maintains quarrelsomeness - Asked if was bit at worried right. Appetite good Bowels regular. Sleeps well at night. Dresses + undresses himself. Eats meals in dining room. Talks to attendants at times, but not much to patients. Is quiet most of the time; takes part in games. Personal habits clean.

Sep 5 Sep 5/93. Talks a good deal, but not much to the point. Is always". Seems to part of the time, when him down here".

Sept 22 Sept 22/93. Appetite good Bowels regular. Inclined to be lazy + don't like to do any more than can be helped. Loss of memory, tempor... do as before". says, ... "thought was doing t... Says he went to ... conversation as they ... nine "vacant". ... by day. Of good ...

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(carried to page 270)

...193. Last ...

...100. ...

...pt. 830 am. 98. Pulse 94

...Am. Pulse 86. Resp 100. —

...Jan 26/93. For the past 3 nights ...

...restless + put to bed for an hour or so ...

...of examination made today.

...will be observed that pulse has been normal but ... continuous elevation of temperature of from 1 to 2 degrees ... morning. Since last note on this subject, patient has been uniformly ... and sleeping well (8 hours each night. Previously (as noted above) ... restless for an hour or so, quite often, at night. By day, has been up on ... each ward + caring for his own personal wants. Clean, tidy + well-behaved. Talks when approached quite freely (see examination for further record of case). Also Complains of a severe headache + a cold. Appetite fairly good. Bowels regular.

Feb 1 Feb 1/93. Is continually Complaining of headache; quite restless by day, walking up + down the hall most of the time. Talks a good deal about going home + of the chances he had before he left home coming here. Feb 3/93. Quite restless; cannot sit still but for a few minutes at a time. —

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" 4 — plains of a cold. Feb 18/93. Uniformly quiet, apparently resting + sleeping well at night.

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Apl 19

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…9 Am. Pulse 86. Ts 100. —
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an air of abstraction & absent-mindedness, when addressed, appears as if aroused from a period
Apl 19 of abstraction. Apl 19/93. Sleep & conduct, by night & by day, about as described above. Attends
dances & plays amusement apparently. Recently in a dance (quadrille) was noticed as becoming
completely helpless, appearing dazed & confused, seeming almost not to realize where he was or what
he was doing, for a short time. This condition apparently brought on by some slightly complicated

Changes or movements in the Dance. April 21/93. See copy (attached) of a letter to his mother.
May 17/93. Was today visited by his father. May 20/93. Apparently rests & sleeps well at night. Regularly
attends the dances participating in them; also amusements and services in the Chapel. Quite often has a dazed
and confused appearance & manner - sleeps & about daily. Clean & tidy. Plays games and cards a great portion
of the time. Is good natured. Does some work on the ward. No delusions yet detected. In good bodily health.
May 31 May 31/93. [The following note is made this date by attendant C. F. Olson. Appetite very good and
bowels regular. Is of a rather restless, disposition, although not as bad as when brought in here, as he
seems to be more contented. Takes part in all kinds of games, played both inwards & outside. Works
on ward & is always willing to do anything asked of him. Nothing very wrong in his conversation.
In regard to his trouble in Stillwater, he says "he could not help it." Habits are clean. Was
visited by father in the part of month.] —
June 3/30 June 3/93. Keeps his weight quite well & is in good physical health. June 30/93. There is no
marked change during the past month.
July 1/17 July 1/93. Was visited by father today, who thought he had failed some. July 17/93. A record of
morning & evening pulses & temperatures has been kept from 7th inst up today, in order to see how it
would compare with that kept for some days after admission (see Comparative ranges attached).
" 19 July 19/93. Appetite continues good. Bowels regular. Does not work as much as he did;
inclined to be lazy & does not like to do any more than can be helped; otherwise no change from
last month. Says he must brace up & get to Stillwater & clear himself"; says "he is confident that
" 22 he can". Reads & plays games, for pastimes. Habits are clean. July 22/93. States a
loss of memory, temporary. Describes a general sluggishness. Asked, if let out would he
do as before? says, "don't think it is 'quiet' enough to him now"; "was "way up" in ecstasy then.
"Thought was doing the grand move of his life." Didn't have any motive, specially. —
Says he went to Laundry & was with attendants, but can't remember any of the
conversation as they repeated it to him after return. Thinks his is failing; "Getting
" 31 more 'vacant'". July 31/93. Seems to rest & sleep well at night. Quiet & well-behaved
by day. Of good personal habits. Inactively inclined. Mother respects, about the same.
Aug 10/30 Aug 10/93. Maintains his weight fairly well. Aug 30/93. Apparently rests & sleeps well, at
night. Appetite good; bowels regular. Is well-behaved. Converses freely. Reads quite a good
deal, but not much at a time. He does not seem to be contented. Walks the floor a good deal
of the time; takes part in all kinds of games, checkers, cards & plays baseball to the outside
games. Personal habits clean. — Has written quite a few letters.
Sep 5 Sep 5/93. Talks a good deal about going back to Stillwater to his trial. Says "he can't stay here
always". Seems to be more restless than he has been before & will walk the floor a great
part of the time, while inside. Says "it would have been better for him if they had never sent
" 30 him down here". Sep 30/93. Appetite good; bowels normal. Well-behaved. Converses
freely, seems to be worried a good deal of late & very restless. Habits clean.
Oct 6 Oct 6/93. Secured a key & unlocked one of the locks in the screen, was searched but the
key could not be found. Two other patients (Moses & Bush) seemed to be working with
him. Peters requested another patient to watch the door but the latter declined

(carried to page 270)

Personal and Medical History of Gust. Peterson #2

Whole No. 3232.
Residence, 2801 – 26th St. So. or City Hospital
Date Admission, 18th January/1893.
Admitted by, Dr Phelps Hour, 7 Pm.
How Sent, Jno. H. Steele, Joff, Hennepin County
Sex, male.
Age, 34, about
Civil Condition, single
Children, none
Age Youngest Child,
Occupation, Laborer
Degree Education,
Profession Religion, unknown
Habits, unknown
Nativity, Sweden
Physicians Committing, C. A. Chase and H. A. Jones
Correspondents, Dr Chase, City Hospital, Mpls

No. for Year, 144.
Insane Relatives, unknown – Parents dead.
Cause Exciting, unknown
Cause Predisposing, not given
Form, Melancholia – Acute
Accompanying Bodily Disorder, Some elevation of temperature
Suicidal or Not, attempted suicide by hanging
Date of this Attack, less than 2 weeks
Duration, " " "
No. of Attack, 1st as far as known
No. of Admissions,
Age First Attack, 34 about
Time of Leaving, 28th January 1893
Time in Hospital, 10 days.
Result, Died; exhaustion from acute Melancholia

EXAMINATION ON ADMISSION.

= Exd by Dr Baker Jan 27/93 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Much confused
Quick or Sluggish, fairly active

MEMORY:
Past Events, } Cannot test
Recent Events, }
Special Subjects, }

PERCEPTIVITY:
Alert or Dull, } Cannot test
Correct or Illusive, }

REASONING POWER:
Ordinary Subjects, } Cannot test; probably much disturbed
Own Mental State, }
Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:
Patient sick; examination made in bed. Has Inderateeth & tongue: seems quite prostrated & weak. in a typhoid state. This morning seems quite prostrate. Lies with his eyes half closed as if asleep, with scarcely perceptible movement of breathing - Now & then appear like spells of apnoea.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Yes; cries.

DELUSIONS:
Systematized or Not,
Special Subjects, evidently has fears of being harmed
Transitory or Not,

HALLUCINATIONS: ?

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Incoherent & almost incomprehensible
Voluble or Reticent, Talks to himself

Personal and Medical History of Gust Peterson #2

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 3/4 ins. WEIGHT, 151 1/2 lbs. NUTRITION, Poor
WOUNDS OR ABNORMALITIES, Probably none.
TONGUE, Tremors, none Coatings, Fouly coated & Dry Promptness Movement, Almost none – will not or cannot protrude.
PUPILS, Equality, equal Size, probably about normal
Response Light, Cannot test Accommodation, Cannot test.
SIGHT, probably fair
HEARING, probably fair
COORDINATION, Arms, not tested, as he is too feeble & too disturbed.
Legs, " " "
TREMORS, Hands, none seen Tongue, None
Facial Muscles, none seen General,
REFLEXES, Patellar, seem sluggish; cannot be accurately tested.
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, dull; pinched.
SENSIBILITY,
HEART, Sounds are clear, but rather feeble
LUNGS, Seem fairly good.
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, not. Clean, Careless,
BOWELS, Normal, Constipated, yes Irregular,
APPETITE, Good, Medium, Refuses food; takes but little, ingreat urging
SLEEP, Good, Poor, Irregular, Sometimes good.
PULSE, 99 (max). on exam. Small. RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short ONSET GRADUAL OR SUDDEN, Sudden

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, } Cannot get this information
Father or Pat. Relations, }
Brothers or Sisters, }

1893

This man was brought here by Deputy Sheriff Lewis Walsh, with the following history. Habits unknown; as to insane relatives or insanity being hereditary, unknown, as parents dead. Cause of attack unknown; form acute. There is some elevation of temperature. Less than 2 weeks ago, attempted suicide by hanging, after which period of depression. This is 1st attack, as far as known. He now refuses to talk and is, at times, suspicious & maniacal. Has shown no disposition to injure others. No filthy or destructive habits. As to bodily disease, unknown. Has been confined at City Hospital for 4 days, under medical treatment, with some improvement. Has picked up a few days ago by the police. Had been "sick" for a week. Now refuses to talk, so no history can be obtained.

Jan 19 Jan 19/93. On admission, was quiet and slept 8 hours last night. 830 am. Pulse 98. Te) 101.6.
" 20 ate no breakfast. 530 Pm. Pulse 104. Te) 100.8. Jan 20/93. Restless & out of bed for 4 or 5 hours last
" 21 night, sleeping but 4 hours. 830 Am. Pulse 100. Te) 100. Takes no food; wont speak. Lies quietly
in bed. 630 Pm. Pulse 100. Te) 100.6. Jan 21/93. Last night, restless & out of bed for 3 hours; slept
5 hours. Got up during night & choked one of his room-mates and scratched the latter's face. Immediately
was taken out of the room & put to sleep, for remainder of night, in the hall. 830 Am. Pulse 106 Te) 99.8
" 22 Ate none this morning. Pm. Pulse 98. Te) 99.4. Jan 22/93. Was quiet & slept 8 hours last night.
Am. Has taken no food since admission. Pm. Drank 2 glasses of milk upon urging.
" 23 Jan 23/93. Slept 8 hours last night. Soiled his bed. 830 Am Pulse 103. Took some milk.
" 24 7 Pm. Pulse 104 R 20 Te) 98.8. Jan 24/93 Restless for an hour, sleeping 7 hours, last night.
830 Am. Pulse 107. R 18. Te) 98.4. Wt 8 days 125 pds. + q clothing. Takes a little milk this morning.
" 25 Is constipated. Enema of soap-suds ordered. Jan 25/93. Slept 7 hours last night, restless but 4 hours.
Again soiled his bed. 830 Am. Pulse 104. Te) 98.5. Pm. Had a peculiar spell; felt helpless;
" 26 grovelled up; seemed almost in convulsion. Takes very little food; only milk. Jan 26/93. No
Last night restless for 8 hours, quite noisy 3 hours, sleeping none. 9 Am. Pulse 96. Te) 97.8
" 27 Jan 27/93. Restless 6 hours + noisy, sleeping but 2 hours last night. 9 Am. Pulse 92. Te) 97.
Drank about 5 glasses of milk yesterday: does not seem so well today. Was today transferred to
" 28 C7, the "sick ward". Jan 28/93. Passed last night very poorly. At 9 Pm. Pulse 95. at 11 Pm. P 106.
at 12 M. Pulse 108. R 48. At 130 Am. Pulse very weak. R 50. At 2 Am. Pulse 112. at 230 Am. Pulse
could not be taken. Has given milk often, also medicine, during the night; and hot sand bags
applied to feet and back; choking when attempts were made to take nourishment; breathing
becoming very labored. R 40. 12 M. Is very weak. 4 Am. Is warmer than for a few hours past.

Summary. Has, at night, varied from nights, apparently restful, and quiet, to times in which he was noisy, restless and sleepless all night. Has been kept in his bed daily, lying in bed day & night. At times restless & getting out of bed. Since the beginning, took food very scantily or refused it altogether; for several days took none at all. Has, lately, been taking some each day, usually in the form of milk; quantity considered sufficient to sustain life, hence artificial feeding was not resorted to. A recent letter from a friend seems to indicate that the patient had, however, for quite a number of days before coming here (8 or 10) taken food very scantily or refused it altogether. This was not learned until yesterday. From the beginning, patient had an irregular fever. There has been marked tendency

toward weakness; sordes on lips & teeth; tongue heavily coated & dry; a haggard, pinched countenance. Speech incoherent and irrelevant; mind confused and emotionally much depressed; crying and in fear. Patient showed marked failure between the 26th and 27th; was, yesterday, very prostrate. Pulse small. Skin cool & dry. Extremities and face Cyanotic; marked tendency to stupor. Disturbance of respiration; spells of apnoea; very like Cheyne-Stokes; refusal of food; later, difficulty in swallowing.

Patient failed during the night, respiration growing rapid and labored, and died at 630 this morning. Friends were notified by letter yesterday & telegram today.

Remains placed in vault for burial in the spring. No autopsy held.

Died

from page 348.

John James Heard

1893

Aug 6/11 Aug 16/93. Is lying in bed today; feels somewhat better. Aug 17/93. Sent up & about as usual.
Ate all right, again.
" 31 Aug 31/93. Appetite continues good & bowels and normal. Quiet and well-behaved.
Works well in dining-room & also considerably in the hall. Does so very willingly. —
Sep 4 Sep 4/93. Continues to increase in weight.
" 16 Sep 16/93. Patient has continued about as described in last July 31st note, only that, within
the past few days, he has become more tidy in dress & appearance. He has been very anxious
to be allowed to go home; and, in company with the assistant-Superviser, who was
also going to St. Paul, patient went home on trial, today. —

Discharged

Personal and Medical History of William W. Rhodes

Whole No. 3233.
Residence, Helena, Montana
Date Admission, 19th January 1893.
Admitted by, Dr. Baker Hour, 1.30 P.M.
How Sent, John. B. Olivier, Sh.P., Ramsey County
Sex, Male
Age, 40 years
Civil Condition, married
Children, two
Age Youngest Child,
Occupation, Trainman
Degree Education,
Profession Religion, Not a church member
Habits, Intemperate + hashad Specific disease.
Nativity, Pittsburg, Penn.
Physicians Committing, C. Eugene Riggs. Clinton J. Cooke and Emma Gibbons
Correspondents, Mr. L. B. Rhodes. 1345 North 19th St, Omaha. Neb.

No. for Year, 145.
Insane Relatives, None; Insanity not hereditary
Cause Exciting, Following Specific trouble.
Cause Predisposing,
Form, General Paresis
Accompanying Bodily Disorder, Syphilis
Suicidal or Not, not
Date of this Attack, not stated
Duration, " "
No. of Attack, 1st
No. of Admissions,
Age First Attack, not stated
Time of Leaving, 14th September 1893.
Time in Hospital, 7 mos. 26 days
Result, Died; Exhaustion in General Paresis

EXAMINATION ON ADMISSION.

Exd by Dr. Baker. Jany 28/93 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, much confused
Quick or Sluggish, over-active

MEMORY:
Past Events, } Much Confused
Recent Events, }
Special Subjects, }

PERCEPTIVITY:
Alert or Dull, Moderately alert
Correct or Illusive, Very illusive; recognizes certain individuals

REASONING POWER:
Ordinary Subjects, } Probably almost entirely fair
Own Mental State, }
Special Subjects, }

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Yes excited
Depressed,

DELUSIONS:
Systematized or Not, Systematized, of grandeur, of wealth + high position.
Special Subjects,
Transitory or Not,

HALLUCINATIONS: (?)
ILLUSIONS: (?)

CONVERSATION:
Coherent or Incoherent, very incoherent
Voluble or Reticent, almost necessarily talking

GENERAL DESCRIPTIVE REMARKS:
Patient is in a very nervous, restless excited condition. Has a very startled appearance; muttering + talking to himself; jumping about in seat &c; quiet for a few seconds; then recommences muttering; Glancing from Dr. to attendant. Hands have to be held by attendant. Says "he is worth millions" = "he President of the U.S." "and if the Dr. will do what he says he does he will keep him for 3 years"

Personal and Medical History of William W. Rhodes

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 142 lbs. NUTRITION, Rather poor.
WOUNDS OR ABNORMALITIES, Scars from disease on scalp + forehead. Is bald
TONGUE, Tremors, None Coatings, Slight Promptness Movement, Protruded jerkily + rapidly withdrawn quickly + uncertain
PUPILS, Equality, Equal Size, about normal
Response Light, Imperfect Accommodation, Imperfect
SIGHT, Fair
HEARING, Fair
COORDINATION, Arms,
Legs, Standing at first, Can scarcely do so. Standing, Eyes Shut, Swaysmuch.
TREMORS, Hands, (?) Tongue, None
Facial Muscles, Yes General, Jerky, irregular movements -
REFLEXES, Patellar, Equal; exaggerated - 8 or 9, D.P.s Scale -
Other Reflexes,
ARTICULATION, ~~Hesitating~~, quite rapid Slurred, Yes.
FACIAL EXPRESSION, Dull
SENSIBILITY,
HEART, On hasty examination seems to be normal.
LUNGS, Do " " "
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, Yes Constipated, Irregular,
APPETITE, Good, Medium, Poor, yes. Eats very little.
SLEEP, Good, Poor, Yes Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
Patient too excited to obtain any information from him
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, } Patient too excited to obtain this information from him
Father or Pat. Relations, }
Brothers or Sisters, }

1893

This man was brought here by Frank Secha, deputy, and John DesSomma, with the following history. Is intemperate and has had Specific disease, Syphilis. Supposed cause, following Specific trouble. Form is exalted Stage, General Paralysis. Have been unable to get any symptoms, aside from what patient shows. This is first attack. Insanity is now manifested by General Paresis, with delusions of grandeur. Is not disposed to injure others; not suicidal; not filthy or destructive. Bodily disease none, aside from Syphilis. Has been confined in St. Joseph's Hospital and has had need of special attendant. Was in Hospital in Missoula, Montana, for [illegible] of the supra-orbital nerve.

Jan. 19/93. Has admitted shortly after midnight, last night. Quite noisy for 3 hours and restless, sleeping but 1 hour. Jan 20/93. Noisy, restless & out of bed for from 2 to 4 hours last night. Sleeping but 2 hours. Jan 21/93. Slept 5 hours last night; quite noisy for 3 hours. Pm. Is noisy.

" 22 Jan 22/93. Quite noisy for one hour, often getting out of bed, but sleeping 7 hours, last night. Had been given hypodermic at bed time. Pm. Is excitable and noisy. Jan 23/93. Last night, was

" 23 quite noisy for 3 hours, & extremely so for 4 hours. Sleeping but 1 hour. 9 am. Pulse 118. T(e) 100.8. —

" 24 Jan 24/93. Given hypodermic. Was quite noisy 1 hour, but slept 7 hours, last night. 830 am

" 25 Pulse 76. T(e) 98.6. 5 Pm. T(e) 101.4. Kicked an attendant today. Jan 25/93. Was again quite noisy for 1 hour, sleeping, however, 7 hours, last night. 7 am. Pulse 80. T(e) 99. 5 Pm. Pulse 74. T(e) 98.4

" 26/27 Jan 26/93. Slightly noisy for 2 hours, sleeping 6 hours, last night. Jan 27/93. Quite noisy and

" 28 out of bed the greater part of last night and slept but 3 hours. Jan 28/93. Last night, quite noisy for 4 hours, & extremely so for 4 hours, sleeping none. Would not stay in bed, at all. Was Examined today. Was in a very nervous & excited condition all the time while in office; showed

" 29 systematized delusions of grandeur, wealth & high position - (See record) - Jan 29/93. Quite

" 30 noisy for 2 hours, & extremely noisy 1 hour, but sleeping 9 hours, last night. Jan 30/93. Last night,

" 31 was slightly noisy 2 hours, quite so for 4 hours, sleeping only 2 hours. Jan 31/93. Out of bed & quite noisy for 3 hours last night & restless, sleeping but 3 hours.

Feb 3/9 Feb 3/93. Wt 134½ pds. Pulse 80. (Has lost 7½ pounds since admission). Feb 9/93. During the past 9 nights, has been more or less restless, quite or extremely noisy, getting out of bed for from 2 to 4 and, once, 7 hours, each night. Sleeping 1.30 & 7 hours, (averaging about 4 hours sleep a night).

" 11/20 Feb 11/93. Has rested & slept well (8 hours) on each of past 2 nights. Feb 20/93. For the past 9 nights, has been slightly noisy for 1 or 2 hours, at night; only occasionally being out of bed; & sleeping, almost uniformly, 7 or 8 hours, each night. Examined today by D. P. & the following points noted. Tongue has marked tremor. Incoordination considerable; by standing as before, and by general unsteadiness. Patellar Reflex 6 or 7 (D. P's scale). Articulation drawling & difficult. Facial expression not very much impaired

Summary. During the months of January, by day, was very restless, walking ups & down the hall; talking constantly; could scarcely sit still a minute. Asks if we know certain people; talks about the races; says "he owns all the fast horses in the Country". Seems to talk more about horses, than any other subject. "Want his head cured" he says. Asks to have telegrams sent quite frequently. Seems satisfied, even if his requests are not complied with. Appetite good. At present date, he is still quite talkative, although not nearly so much as formerly. He

1893

Feb 20. (Contd) Is comparatively calm & quiet - sit now in a chair the greater part of the time, while awake, but is not now so restlessly active. Is not more quiet & sleeps fairly well at night.

" 21 " had a spell this morning. It could not be made to [illegible] until 9 o'clock; quite rapidly became unusual - [illegible] rest and sleep well. Moves about a good deal by day, ain- [illegible]. Habits fairly good. Mar 3/93. Lying around on floor & in seats

[illegible] te, more especially recently, has been restless & noisy, most nights [illegible] more restless by day, than formerly.

[illegible] lay 3/93. Is steadily gaining in flesh. May 19/93. At times, [illegible] a time; at others, has been eating quantity. Is full of delusions. [illegible] nights restless & quite noisy each night, sleeping only from 3 to [illegible] has been much quieter & less noisy & has been sleeping, as a [illegible] 6 hours). By day, has been more or less noisy & restless, [illegible] Will visit in a chair, talking to himself, gesticulating &c. [illegible] appetite fair; bowels regular. Behaves quite well, except [illegible] in eat; says "his food is poisoned". Complains that [illegible] very deliberately. Habits are clean.

June [illegible] during the past month, without apparent cause.

" 3. [illegible] normal. Is noisily talkative at times; continually [illegible] so. Is occasionally noisy at night for a few hours. [illegible] says feels well". —

Sept 3 [illegible], during past 4 weeks, though appetite has been good. [illegible] Talks a great deal to himself; gesticulating &c.

" 31 [illegible] noisy nearly all the time.

Aug [illegible] ing 31/93. Continues about as last described. Still holds to his delusions. Is noisily talkative -

Sept 7 Sept 7/93. Seemed to have a "bad spell" this morning & has been kept in bed today, per instructions. Ate a little breakfast, but a good dinner & supper - Had a passage from bowels this p.m. Is apparently not so nervous as he has been for some days, & seems a little brighter. Sept 8/93. Patient slept poorly

" 8 last night; coughing a good deal, at intervals. Sept 9/93. Restless 2 hours, sleeping 8 hours, last night.

" 9 Has remained confined to his bed, daily. Lies there in a helpless, paretic way. Takes sound nourishment.

" 10 Sept 10/93. Slept but 5 hours last night; was restless 4 hours or so. Lies quietly in bed. Is now taking a little more food than before he was confined to bed. Had a natural passage from bowels today.

" 11 Is quiet & appears to be asleep most of the time. Sept 11/93. Restless 3 hours, but slept 8 hours, last night.

" 12 Still lies quietly in bed in a half conscious way. Sept 12/93. Slept 7 hours last night; restless for 2 hours. Is still taking his food, but seems to be losing strength & is gradually growing weaker.

" 13 Sept 13/93. Was restless 2 hours, sleeping 7 hours, last night. Is gradually failing in strength.

" 14 Sept 14/93. Slept 4 hours last night, being restless for 5 hours or so. Patient failed quite rapidly during the night, and died at 8 A.M. today. Relatives were kept advised of his critical condition — Remains were removed by a brother, from Omaha —

- Died -

NAME. Wm W. Rhodes

DATE, 1893	WEIGHT.	PULSE.	GAIN.	LOSS.
Feb 3	134½	80		7½
March 3	135¼	76	¾	
Apl 4th	141½	98	74	
May 8th	145½	98	3	
June 5th	135½	92		10
July 3rd	122½	60		13

1893

This man was brought here by Frank Secha, a[illegible] with the following history. Is intemperate and has had [illegible] cause, following specific trouble. Form is wasted [illegible] to get any symptoms, aside from what patient is now manifested by General Paresis, with del[illegible] injure others; not suicidal; not filthy or destruc[illegible] Has been confined in St. Joseph's Hospital and has [illegible] Hospital in Missoula, Montana, for [illegible] oth[illegible]

Janvy. Jan 19/93. Was admitted shortly after midnight, last[illegible]
" 20 Sleeping but 1 hour. Jan 20/93. Noisy, restless & out of [illegible]
" 21 but 2 hours. Jan 21/93. Slept 5 hours last night; qui[illegible]
" 22 Jan 22/93. Quite noisy for one hour, & then getting [illegible]
" 23 been given hypodermic at bed time. P.M. Is e[illegible] quite noisy for 3 hours, & then only for 4 hours.
" 24 Jan 24/93. Given hypodermic. Was quite noisy [illegible]
" 25 Pulse 76. T. 98.6. 5 P.M. T. 101.4. Kicked an[illegible] noisy for 1 hour, sleeping, however, 7 hours. Was [illegible]
" 26 Jan 26/93. Slightly noisy for 2 hours, sleeping
" 27 out of bed the greater part of last night and [illegible] noisy for 4 hours, extremely so for 4 hours. Slee[illegible] Examined today. Was in a very nervous & [illegible] showed
" 29 systematized delusions of grandeur, walk[illegible] Quite
" 30 noisy for 2 hours, extremely noisy 1 hour, ha[illegible] nights,
" 31 was slightly noisy 2 hours, quite so for [illegible] out of bed &
quite noisy for 3 hours last night & restless, sleeping

Feb 3/9 Feb 3/93. Wt 134½ pds. Pulse 80. (Has lost 7½ pounds since admission). [illegible] the past 9
nights, has been more or less restless, quite or extremely noisy, & getting out of bed for from 2 to 4
and, once, 7 hours, each night. Sleeping 13. 5. or 7 hours, (averaging about 4 hours sleep a night).
" 11/10 Feb 11/93. Has rested & slept well (8 hours) in each of past 2 nights. Febr 20/93. For the past 9
nights, has been slightly noisy for 1 or 2 hours, at night; only occasionally being out of bed; &
sleeping almost uniformly 7 or 8 hours each night. Examined today by Dr. P. & the following
points noted. Tongue has marked tremor. Incoordination considerable; by standing an effort,
and by general muscular weakness. Patellar Reflex 5 or 7 (Dr P's scale). Articulation drawling &
difficult. Facial expression not very much impaired

Summary. During the months of January, by day, was very restless, walking up & down
the hall; talking constantly; could scarcely sit still a minute. At sight we know certain people,
talk about the races; says "he owns all the fast horses in the Country". Seems to talk more about
horses, than any other subject. Wants his "head cured" he says. Asks to have telegrams sent quite
frequently. Seems satisfied, even if his requests are not complied with. Appetite good.
At present date, is still quite talkative, although not nearly so much as formerly. Is

1893

Feb 20. (Contd) Is comparatively calm & quiet; sits now in a chair the greater part of the time, while in the hall. Occasionally walks up & down, but is not now so restlessly active. Is not noisy now by day. Is also much more quiet & sleeps fairly well at night.
Mar 24 March 24/93. Appears to the attendants, to have had a spell this morning. He could not be made to speak — seemed dull - remaining in bed until 9 o'clock; quite rapidly became unusual —
" 27 March 27/93. Is quiet at night; seems to rest and sleep well. Moves about a good deal by day, aim-
" 31 lessly; good - natured, happy & contented. Habits fairly good. Mar 31/93. Lying around on floor & in seats
to day; will not sit up. ——
Apr 20 April 20/93. On 6 or 7 nights, since the last note, more especially recently, has been restless & noisy, on one night
sleeping none at all; has also been somewhat more restless by day, than formerly.
May 3/14 May 1/93. Had a "crying spell" this morning. May 3/93. Is to a daily gaining in flesh. May 19/93. At times,
" 22 has been refusing meals, for a whole days at a time; at others, has been eating voraciously. Is full of delusions.
Thinks "his food is poisoned". May 22/93. Continues restless & quite noisy each night, sleeping only from 3 to
5 hours up to about the 5th inst; since then has been much quieter & less noisy & has been sleeping, as a
rule, 7 hours each night (only on 1 or 2 nights, 5 hours). By day, has been more or less noisy & restless,
some days, extremely so. Walks up & down the hall or sits in a chair, talking to himself, gesticulating &c.
" 31 Seems happy & contented. May 31/93. Appetite fair; bowels regular. Behaves quite well, except
when in dining room; trouble to make him eat; says "his food is poisoned". Complains that
he has been robbed, poisoned &c. Talks very delusively. Habits are clean.
June 5 June 5/93. Has lost greatly in weight, during the past month, without apparent cause.
" 30 June 30/93. Appetite is fair only. Bowels normal. Is noisily talkative at times; continually
talking to himself. Still shows delusions. Is occasionally noisy at night for a few hours.
Seems quite happy & contented. "Always feels well". —
July 3 July 3/93. Has lost very markedly in flesh, during past 4 weeks, though appetite has been good.
" 31 Conduct & behavior, by day, as usual. Talks a great deal to himself; gesticulating &c
Still full of his old delusions. — Is noisy nearly all the time.
Aug 31 Aug 31/93. Continues about as last described. Still holds to his delusions. Is noisily talkative -
Sept 7 Sept 7/93. Seemed to have a sort of "spell" this morning & has been kept in bed today, per instructions.
Ate a little breakfast, but a good dinner & supper — Had a passage from bowels this p.m. Is apparently
" 8 not so nervous as he has been for some days, & seems a little brighter. Sept 8/93. Patient slept poorly
" 9 last night; coughing a good deal, at intervals. Sept 9/93. Restless 2 hours, sleeping 8 hours, last night.
Has remained confined to his bed, daily. Lies there in a helpless, paretic way. Takes some nourishment.
" 10 Sept 10/93. Slept but 2 hours last night; was restless 4 hours or so. Lies quietly in bed. Is now taking a
little more food than before he was confined to bed. Had a natural passage from bowels today.
" 11 Is quiet & appears to be asleep most of the time. Sept 11/93. Restless 3 hours, but slept 8 hours, last night.
" 12 Still lies quietly in bed in a half conscious way. Sept 12/93. Slept 7 hours last night; restless for 2 hours.
Is still taking his food, but seems to be losing strength & is gradually growing weaker. ——
" 13 Sept 13/93. Was restless 2 hours, sleeping 7 hours, last night. Is gradually failing in strength.
" 14 Sept 14/93. Slept 4 hours last night, being restless for 5 hours or so. Patient failed quite rapidly
during the night, and died at 8 A.M. today. Relatives were kept advised of his
critical condition — Remains were removed by a brother, from Omaha —

- Died -

Whole No. 3237.

Residence, 800 Nicollet Ave

Date Admission, 19th January 1893.

Admitted by, D Phelps Hour, 7 PM

How Sent, Jno H. Steele, Jap & Sten

Sex, male

Age, 29

Civil Condition, married

Children, two (2)

Age Youngest Child,

Occupation, Express driver. Rea

Degree Education, Fairly well educat

Profession Religion, Not a Church mem

Habits, Good

Nativity, Indiana

Physicians Committing, E.H. Stockton & ass agrees

Correspondents, (uncle) D. E. H. Stockton, 125 Central Ave Mpls, Minn
or wife 800 Nicollet Ave



No. for Year, 149.

Insane Relatives, none; father living good; mother living good health an aunt died - Uterine Cancer

Cause Exciting, Financial reverses -

...posing,

...General Paresis

...g Bodily Disorder, Pupils dilated; react sluggishly; tongue & lips tremulous; face expressionless - gait slow - deliberate

...t, not

...ttack, about 1 year ago

about 1 year

1st

...ons,

...ck, about 38

...g, 17th January 1894

...al, 11 months and 24 days

...d: General Paresis.

4/10/93 Mrs J. E. Lent
(mother) 224. 4th St. East Fourth East Minneapolis Minn

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by D. Baker Jany 27/93

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Seems poor

Recent Events, probably is poor.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Seems dull

Correct or Illusive, fairly correct

REASONING POWER:

Ordinary Subjects,

Own Mental State, has some idea of his Condition

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Left eyelid droops. Hesitates in being aroused. Eyeballs do not follow each other in their movements; left not following right in certain directions.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, unhappy

DELUSIONS:

Systematized or Not, none definite detected

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none detected

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent as far as it went.

Voluble or Reticent, hesitates much before answering questions - attempts responds freely & promptly.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in WEIGHT, 135½ lbs 1/24/93. NUTRITION, below normal.

WOUNDS OR ABNORMALITIES, Wounds(?). Has retention of urine -

TONGUE, Tremors, markedly tremulous Coatings, quite heavily; flabby. Promptness Movement, slow

PUPILS, Equality, markedly unequal Size, left larger; right about normal.

Response Light, slight Accommodation, a little.

SIGHT, of left eye impaired -

HEARING,

COORDINATION, Arms, Finger to nose, eyes shut, fairly good.

Legs, Standing at foot, somewhat unsteady. Standing, eyes shut, sways a good deal.

TREMORS, Hands, yes Tongue, Marked tremor -

Facial Muscles, tremors, on intention. General,

REFLEXES, Patellar, Seems equal - markedly exaggerated - about 10 - Dr P's scale -

Other Reflexes,

ARTICULATION, Hesitating, somewhat Slurred, somewhat

FACIAL EXPRESSION, decidedly dull -

SENSIBILITY,

HEART, Seems normal

LUNGS, Seem normal - Chest 35 in Expansion (2).

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, ~~Dirty~~, untidy -	Clean,	Careless,
BOWELS, Normal,	Constipated, yes	Irregular,
APPETITE, Good, fairly	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular, yes. Retwell usually.
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") See history that comes with patient.

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1893

This patient was brought here by Dr. E St. Stockton and patients mother, with following history. Habits are good. Cause of this (the first attack) is financial reverses; form is Chronic. Pupils are dilated, react sluggishly; tongue and lips tremulous; face expressionless; gait slow, deliberate. About 1 year ago, became dull, slow of comprehension, with minor & major attacks of unconsciousness. Insanity is now manifested by suspicions, fear of starvation, occasional attacks of excitement, with unconscious attacks. Has threatened to injure others - Is not suicidal. Is not destructive or filthy but is disinclined to wait upon himself. (Bowels con.) not subject to any bodily disease. Has not been restrained or confined. Tonics & alterative Dr. has been given; negative results. Note. Patients parents were born in New York, but patient was born in Indiana & came to Minneapolis 14 years ago. Was engaged in Real Estate business but lost heavily. Everything; and was obliged to drive wagon & work hard. During Summer of '92, his friends noticed that he was dull & listless. At one time was found on his wagon unconscious, and, since then, has had "chill" but really slightly unconscious attacks. Has gradually grown more stupid. Delusions of suspicion & fear developed and, at times, thinks the family will starve, and he must kill them to end their misery. Is fairly well educated; not a Church member - His ancestors were not blood relatives. His trouble is increasing but variable, and from a shattered, a few hours, seems quite like himself. Family history good.

Jan 20/93 Jan 20/93. Was quiet all last night & slept 8 hours. Jan 21/93. Restless for 4 hours, out of bed 20 or 30 times, wanting to dress, and "to go up Stairs", sleeping but 2 hours, last night. Jan 22/93. Last night, was restless for 4 hours, out of bed, trying to get out into the hall & slept but 2 hours. Am. Is constipated. Given laxative. Pulse slow. Eat fairly. 5 Pm. Pulse 72. R 24. Jan 23/93. Restless all last night, sleeping none at all; out of bed the greater part of the time, & pounding at the door of his room - Am. Had retention of urine (due to inattention) - passed his water now, when asked to do so. Is still constipated. Again given medicine. Jan 24/93. Again restless for 2 hours last night, but slept 5 hours. Bowels moved. Resists dressing & undressing, going to dining room & everything - Sleeps none, he says. Bowels have moved today & he has passed his water. 5 Pm. Pulse 78. -

" 25 Jan 25/93. Restless for 4 hours, out of bed, wanting to go away; sleeping but 4 hours last night -

" 26/27 Jan 26/93. Passed a night similar to the preceding one. Jan 27/93. Rested well last night; being restless but 1 hour, sleeping 7 hours. Am. Has difficulty in passing his urine.

" 28/29 Jan 28/93. Restless, not being in bed at all, last night. Jan 29/93 Restless for 2 hours, sleeping 4

" 30 hours last night. Jan 30/93. Remained quietly in bed & slept 8 hours last night.

" 31 Jan 31/93. Out of bed, pounding on door. Slept 8 hours last night. Am. Would not get up to his breakfast, because he did not want to. Continues very stubborn and resists being undressed & dressed. Was to day transferred to B2. —

Feb 1/93 Feb 1/93. 830 am. Pulse 68. Feb 4/93. Since last note on this subject, patient has been restless, noisy and frequently out of bed at night, sleeping only from 4 to 5 hours, each night. Has become dirty in habits. Today was moved to C4. — Feb 5/93. Was restless & out of bed for 5 hours, last night, sleeping but 3 hours

" 5 Feb 6/93. Eating very poorly. Feb 7/93. Has refused food the past 4 meals. Feb 8/93. Eats nothing; takes only milk.

" 13/18 Feb 13/93. Is failing rapidly.

" 20 Feb 20/93. For the first few nights after the last noted transfer, patient was restless, noisy & out of bed, at night, sleeping only about 4 or 5 hours each night; since then, has become much more quiet and restful (though occasionally getting out of bed) & sleeping 6, 7 or 8 hours each nights.

1893

NAME. Frank. E. Lent

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
Jany 24	135½			
Feby 1	136½		1	
Mar 5th	120¾	68		15¾
April 4	110½	82		10½
May 3	104½	76		5¾
June 3d	— Home —			
July 3d	118	96	2	(Gain)
Aug 7th	122	78	9½	
Sept 4th	123¾	80	1¼	
Oct 3d	121½	74		1¾
Nov 7th	126	80	11½	
Dec 23	129½	72	3½	
1894 Jany 1st	116	100		(Abed)

drinks about 2½ qts of milk daily. Does not cause much

Out to night of the 22d & 23d Inst was restless noisy and sleeping but 4 & 5 hours. Last night and night before slightly noisy, and slept 7 hours each night. rest of rest sleeps & behavior at night. With exception up & around daily, fairly tidy in appearance - resisting attempts to dress & undress him - Has very irregular in regard to eating, sometimes food altogether - Was always very tidy in his habits. While at the ward, sits quietly on a bench, apart from the troubled with incontinence of urine.

his mother. Mar 27/93. Remarkably quiet at night. walking about very slowly & hesitatingly - Is quite thin feeble, physically & mentally. For some time past very poorly; recently has taken it more freely. Has him to empty his bladder. On the 25th Inst. had a pe- hair to the floor, rolling over & over in one direction for several - No definite convulsive movements seen and then got up promptly and walked quite rapidly down the more excitable. Quite quickly relapsed into his usual Complains that he is not well, but does 8/93. 7 Am. Pulse 65 R 16. To 97.8. Was ordered & be kept in 29/93. 7 Am. " 58 " 16 " 98.2 Bowels moved. —

Apr 1/93 April 1/93. 7 Am. Pulse 61 R 15. To 98.2. April 2/93. Was let get up today, asks remained in bed so poorly.

" 3 April 3/93. Has small abscess & inflammation of foot; was put to bed & nurse attended to.

" 4/5 April 4/93. 7 Am. Pulse 63. R 16. To 97. 5 Pm. Pulse 62. R 15. To 99.2. April 5/93. 7 Am. Pulse 62. R 18 To 96.6. April 7/93. Foot healed rapidly & well. Temp. Bowels active. April 12/93. Remained in bed

" 21 this morning, of his own will. April 21/93. Is somewhat restless for from 1 to 3 hours at night; apparently sleeping from 6 to 7 hours. For the past 9 day, has remained the greater part of the time in bed; restless by spells; getting up, but on the whole, lying more quietly. Was ordered up this morning. Takes only bread & milk. Is feeble. Head is bent forward on his chest; thin hands cold & blue, and temperature subnormal. Was put on Mosquera's beef-meal today -

" 25/26 April 25/93. Is refusing his beef-meal today. April 27/93. Has today visited by uncle. April 28/93. Has in bed

May 3 Yesterday & again today. May 3/93. Is laughing this morning; says he is well". Has been losing greatly in weight.

" 18 May 18/93 Today, visited by wife & mother. May 19/93. Would not put on his clothes this morning; to avoid a struggle,

" 29 was left in bed. May 29/93. Ate & slept at night, as described in note of 21st Inst. Appetite has continued fair; bowels normal; Behavior quiet; was 21 days in bed during this month, being more quiet there & with less danger of injury or mischief & less waste of strength. Was up part of time, the last of the month. Talks very little; could only be made to speak by urging; Habits very dirty.

(carried to page 396)

1893

This patient was brought here by Dr E St. Stoc
history. Habits are good. Cause of this (the
Pupils are dilated, react sluggishly; tongue
deliberate. About 1 year ago, became dull
of unconsciousness. Insanity is now
-ional attacks of excitement, unit
Is not suicidal. Is not destructive
not subject to any bodily disease.
given; negative results. Note.
Came to Minneapolis 14 Years ago
obliged to drive wagon work
At one time was found
unconscious attacks. Ov
and, at times, thinks he family
well educated; not a Church mem.
Increasing but variable, and for a short

Jan 20/93. Was quiet all last night & slept
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breakfast, because he did not want to. Continues very stubborn and resists being undressed & dressed.
Was today transferred to B2. —

Feb 1/93. 830 Am. Pulse 68. Feb 4/93. Since last note on this subject, patient has been restless, noisy
and frequently out of bed at night, sleeping only from 4 to 5 hours, each night. Has become dirty in habits.
" 5 Today was moved to C4. — Feb 5/93. Has restless & out of bed for 5 hours, last night, sleeping but 3 hours
" 15/16 Feb 15/93. Is eating very poorly. Feby 17/93. Has refused food the past 4 meals. Feby 18/93. Eats nothing; takes only milk.
" 20/18 Feby 20/93. For the first few nights after the last noted transfer, patient was restless, noisy & out of bed, at
night, sleeping only about 4 or 5 hours each night; since then, has become much more quiet and
restful (though occasionally getting out of bed) & sleeping 6, 7 or 8 hours each night.

Feb 25/93. Takes no solid food, but drinks about 2½ qts of milk daily. Does not cause much
" 26 trouble in hall in day time. Feb 26/93. Out two nights of the 22d & 23d last was restless noisy and
out of bed about ½ the time, each night, sleeping but 4 or 5 hours. Last night and night before
was much quieter, though occasionally slightly noisy, and slept 7 hours each night.
" 27 Feby 27/93. See above notes for record of rest sleep & behavior at night. With exception
of the 1st day after admission, has been up & around daily, fairly tidy in appearance -
Has been more or less frequently stubborn & resisting attempts to dress & undress him -
& otherwise causing the attendants trouble - Has very irregular in regard to eating, sometimes
taking no solid food, at others, refusing food altogether - Was also very dirty in his habits.
Has become very dull & silent of late. While at the ward, sits quietly on a bench, apart from the
others, silent and idle. Is somewhat troubled with incontinence of urine.
March 1/93. March 4/93. Visited yesterday & today by his mother. Mar 27/93. Is uniformly quiet at night.
By day, is up, sitting in a chair or walking about very slowly & hesitatingly - Is quite thin
and looks cyanotic (somewhat). Is quite feeble, physically & mentally. For some time past
has taken only fluid food, for a time very poorly; recently has taken it more freely. Has
to be led to the water closet in order to get him to empty his bladder. On the 25th inst. had a pe-
- culiar fit or "spell" - falling from a chair to the floor, rolling over & over in one direction for several
feet, with saliva coming from mouth - No definite convulsive movements seen and there
did not seem any tendency to coma - got up promptly and walked quite rapidly down the
hall & pounded on a screen, seeming more excitable. Quite quickly relapsed into his usual
former state, without perceptible change. Complains that he is not well, but does
" 28 not specify where he feels ill - March 28/93. 7 Am. Pulse 65 R 16. Temp 97.8 Was ordered & be kept in
" 29 bed by the Dr. Restless & get up often. Mar 29/93. 7 Am. " 58 . 16 . 98.2 Bowels moved. —
" 31 March 31/93. 7 Am. Pulse 72 R 16. Temp 98.8. —
April 1/93. April 1/93. 7 Am. Pulse 61 R 15. Temp 98.2. April 2/93. Was let get up today, asks remained in bed so poorly.
" 3 April 3/93. Has small abscess & inflammation of foot; was put to bed & nurse attended to.
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hands cold & blue, and temperature subnormal. Was put on Mosquer as beef-meal today -
" 25/26 April 25/93. Is refusing his beef-meal today. April 27/93. Was today visited by uncle. April 28/93. Was in bed
May 3 Yesterday & again today. May 3/93. Is laughing this morning; says "he is well". Has been losing greatly in weight.
" 18/19 May 18/93 Today, visited by wife & mother. May 19/93. Would not put on his clothes this morning, to avoid a struggle,
" 29 was left in bed. May 29/93. Eats & sleeps at night, as described in note of 21st inst. Appetite has continued
fair; bowels normal; behavior quiet; was 21 days in bed during this month, being more quiet there & with less
danger of injury or mischief & less waste of strength. Was up part of time, the last of the month. Talks very little;
could only be made to speak by urging; Habits very dirty.

(carried to page 396)

Whole No. 3238

Residence, 123 So. Wash. Ave

Date Admission, 19th January 1893.

Admitted by, Dr Phelps Hour, 7 PM.

How Sent, John A. Steele, Supt Steam[illegible]

Sex, Male

Age, 27 Years

Civil Condition, Single

Children, No

Age Youngest Child,

Occupation, Rancheman

Degree Education,

Profession Religion, Not a church member

Habits, Good

Nativity, Pennsylvania

Physicians Committing, D. J. Hill and H. W. Brazie

Correspondents, G. L. Abbott, 123 Wash Ave So: Minneapolis Minn
(Father)

Addressed — Father of Wm Abbott
G. L. Abbott
Post Office Block
Minneapolis
Minn.

June '93

G. L. Abbott
Post Office Bldg
Minneapolis
Minn

Sep 6 93

w/372

EXAMINATION ON ADMISSION.

– Entd by Dr Baker Jany 27th 1893 = MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, very Confused
Quick or Sluggish, fairly active.

MEMORY:
Past Events, } probably poor.
Recent Events,
Special Subjects,

PERCEPTIVITY:
Alert or Dull, } Confused
Correct or Illusive,

REASONING POWER:
Ordinary Subjects, } Poor. "Is at Dr Hunter's"
Own Mental State,
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Yes – restless
Depressed,

DELUSIONS:
Systematized or Not, } That he is down at Dr Hunter's + concerning Dr H's wealth –
Special Subjects,
Transitory or Not,

HALLUCINATIONS: (?)

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, incoherent.
Voluble or Reticent, Changeable; talks freely at times, + again very little.

GENERAL DESCRIPTIVE REMARKS:
Patient sick – Examined in bed. Has sores on lips + teeth. Says "he is down at Dr Hunter's" Denies his name – Says he is not Abbott" – Says "he is not sick for Dr Hunter cured him of the catarrh" Says repeatedly "he is down there now and that settles it" – Claims that Dr Hunter has more wealth, gold mines &c than any other man in the U.S. There is not anything he can't cure – "has a big trunk there" – "started patient off with 12 big horses – "went up a steep hill &c"

W J Abbey telegraph to if "charge"

Mr R M. Abbey
2351 La Salle St
Chicago
Ill

Mrs Hattie Dorny
334 West 15th St. Near Market
Chicago
Ill

Oct 20/93

Dear Kilbourne – 20/373
you have my sons
adress
2351 La Salle St (Chicago) –
– South Side

W. J. Abbott's Mother

my adress is) Mary Abbey
3245 Henry St
near Margaret St
Chicago Ill
West side

we have moved from 15th St
to Henry St

Nov 1893

poor.

movement of all
opening & move-
ments. –

Careless,
Irregular, yes
Poor,
Irregular,
TEMP., – –

HISTORICAL.

LENGTH OF INVASION, 1 Year ONSET GRADUAL OR SUDDEN, gradual –

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, } No knowledge can be obtained from him
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of William J. Abbott

Whole No. 3238
Residence, 123 So. Wash. Ave
Date Admission, 19th January 1893.
Admitted by, D. Phelps Hour, 7 PM.
How Sent, John A. Stelle, Jeff. Hennepin County
Sex, Male
Age, 27 Years
Civil Condition, Single
Children, No
Age Youngest Child,
Occupation, Ranchman
Degree Education,
Profession Religion, Not a church member
Habits, Good
Nativity, Pennsylvania
Physicians Committing, L. J. Stille and H. W. Brazie
Correspondents, G. L. Abbott, 123 Wash. Ave So: Minneapolis Minn (Father)

No. for Year, 150.
Insane Relatives, None; insanity not hereditary
Cause Exciting, Exposure
Cause Predisposing, not stated
Form, General Paresis
Accompanying Bodily Disorder, No
Suicidal or Not, not
Date of this Attack, one year ago
Duration, one year
No. of Attack, 1st
No. of Admissions,
Age First Attack, 26 years.
Time of Leaving, 13th December 1893
Time in Hospital, 10 mos 24 days
Result, Died; General Paresis

EXAMINATION ON ADMISSION.

Evily D. Baker Jany 21st 1893 = MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, very Confused
Quick or Sluggish, fairly active.

MEMORY:
Past Events, Probably poor.
Recent Events,
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Confused
Correct or Illusive,

REASONING POWER:
Ordinary Subjects, Poor. "Is at D. Hunter's"
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Patient sick - Examined in bed. Has sores on lips & teeth. Says "he's down at D. Hunter's" Denies his name - says he is not Abbott" - Says "he is not sick for D. Hunter cured him of the catarrh." Says repeatedly "he's down there now and that settles it" - Claims that D. Hunter has more wealth, gold mines &c than any other man in the U.S. Knew is not anything he can't cure - "has a big trunk there" - "started patient off with 12 big horses - "went up a steep hill &c"

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Yes - restless
Depressed,

DELUSIONS:
Systematized or Not, That he is down at D. Hunter's & concerning
Special Subjects, D. H's wealth -
Transitory or Not,

HALLUCINATIONS: (?)

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, incoherent.
Voluble or Reticent, Changeable; talks freely at times, & again very little.

# of William J. Abbott

...raph to if "change"

...poor.

...l.

...ravement of all ...ipting to move ...hinking. -

15th St. Near Market

Chicago

Ill

Oct 2

Dear Kilbourne - 20/373
you have my sins
adress
23.57, La Salle St etc) -
South Side

W. J. Abbott
Author

my adress is) Mary Ahley
325 Henry St
near Morgrid St
Chicago Ills
West side

we have moved from 15th St
to Henry St

Nov 1893

Careless,
Irregular, Yes
Poor,
Irregular,
TEMP., - -

HISTORICAL.

LENGTH OF INVASION, 1 Year ONSET GRADUAL OR SUDDEN, gradual -

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,
} No knowledge can be obtained from him

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Date Admission, 19th January 1893.

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How Sent, John A. Stelle Jo. P. Hennep

Sex, Male

Age, 27 Years

Civil Condition, Single

Children, No

Age Youngest Child,

Occupation, Ranchman

Degree Education,

Profession Religion, Not a Church Member

Habits, Good

Nativity, Pennsylvania

Physicians Committing, L. J. Hill and H. W. Brazie

Correspondents, G. L. Abbott, 123 Wash Ave So. Minneapolis Minn
(Father)

Addressed — Letter of Wm Abbott
G. L. Abbott
Post Office

EXAMINATION

— Exd by Dr. Baker Jany 27th 1893 = MENTAL CHA

MENTAL ACTIVITY:

Clear or Confused, Very Confused

Quick or Sluggish, fairly active.

MEMORY:

Past Events, Probably poor.

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Confused

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Poor. "Is at Dr. Hunter's"

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Patient sick — Examined in bed. Has sores on lips & teeth. Says "he's down at Dr. Hunter's" Denies his name — Says he is not Abbott" — Says "he is not sick for Dr. Hunter cured him of the catarrh" Says repeatedly "he's down there now and that settles it" — Claims that Dr. Hunter has more wealth, gold mines &c than any other man in the U. S. There is not anything he can't cure — "has a big trunk there" — Started patient off with 12 big horses — "We strap a steep hill &c"

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Indi

Exalted restless

Depressed,

DELUSIONS:

Systematized or Not, That he is down at Dr.

Special Subjects, Hunter's & concerning

Transitory or Not, Dr. H's wealth —

HALLUCINATIONS: (?)

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Incoherent.

Voluble or Reticent, Changeable, talks freely at times, & again very little.

W J Abbey telegraph to if "charge"

Wm R M. Abbey
2357 La Salle St
Chicago
Ill —

Wm Hattie Drury
334 West 15th St. Near Market
Chicago
Ill — —

Oct 20/93

poor.

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ipting to move-
kmuscles —

SENSIBILITY,

HEART, (?)

LUNGS, Seem normal; (Examination Hasty) —

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Yes Clean, Careless,

BOWELS, Normal, Constipated, Yes Irregular, Yes

APPETITE, Good, Medium, Yes: doesn't take solid food Poor,

SLEEP, Good, Poor, Yes Irregular,

PULSE, See Record RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 1 Year ONSET GRADUAL OR SUDDEN, Gradual —

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations, No knowledge can be obtained from him

Brothers or Sisters,

Whole No. 3238

Residence, 123 So. Wash. A

Date Admission, 19th January 18

Admitted by, D. Phelps Hour, 7

How Sent, John A. Steele, Jr. P

Sex, Male

Age, 27 Years

Civil Condition, Single

Children, No

Age Youngest Child,

Occupation, Ranchman

Degree Education,

Profession Religion, Got a Chance

Habits, Good

Nativity, Pennsylva

Physicians Committing, L. J. Steele

Correspondents, G. L. Abbott, 123 Wash Texas
(Father) Maple Mea

Trustees
J. W. Mason, Fergus Falls
T. H. Titus, Rochester
J. F. Meagher, Mankato
W. A. Jones, M. D., Minneapolis
John Peterson, St. Peter.

Rochester State Hospital.

Arthur F. Kilbourne, Medical Superintendent
Robert A. Phelps, Asst. Med. Superintendent
William H. Knapp, Accounting Officer

Rochester, Minn.

4 8

EXAMINATIO

– Evidly Dr. Baker Jany 27th 1893 –

MENTAL CH

MENTAL ACTIVITY:

Clear or Confused, Very Confused

Quick or Sluggish, fairly active.

MEMORY:
Past Events,
Recent Events,
Special Subjects, } Probably poor.

PERCEPTIVITY:
Alert or Dull,
Correct or Illusive, } Confused

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects, } Poor. "Is at Dr. Hunter's"

GENERAL DESCRIPTIVE REMARKS:

Patient sick – Examined in bed. Has sordes on lips & teeth. Says "he's down at Dr. Hunter's" Denies his name – Says "he is not Abbott" – Says "he is not sick for Dr. Hunter cured him of the catarrh." Says repeatedly "he's down there now and that settles it" – Claims that Dr. Hunter has more wealth, gold mines &c than any other man in the U. S. Knows it not anything he can't cure – "has a big trunk there" – Started patient off with 12 big horses – "Went up a steep hill &c"

In

Exal – restless

Depressed,

DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not, } That he is down at Dr. Hunter's & concerning Dr. H's wealth –

HALLUCINATIONS: (?)

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, incoherent.

Voluble or Reticent, Changeable, talks freely at times, & again very little.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 4½ in WEIGHT, NUTRITION, Rather poor.

WOUNDS OR ABNORMALITIES, Scratch on face. Abnormalities, none detected –

TONGUE, Tremors, won't show tongue Coatings, – yes – Promptness Movement, – –

PUPILS, Equality, unequal, right the larger. Size, not far from normal.

Response Light, Can't test Accommodation, Can't test –

SIGHT, probably fair

HEARING, probably fair

COORDINATION, Arms, Can't test accurately – as he won't try
Legs, Standing on feet, somewhat unsteady –

TREMORS, Hands, Tongue,

Facial Muscles, yes, on attempting to talk quite marked General, has irregular, jerking movement of all the muscles on attempting to move –

REFLEXES, Patellar, difficult to test accurately – left seems absent, right present but diminished. –

Other Reflexes,

ARTICULATION, Hesitating, yes Slurred, Jerky

FACIAL EXPRESSION, dull

SENSIBILITY,

HEART, (?)

LUNGS, seem normal; (Examination hasty) –

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, yes Clean, Careless,

BOWELS, Normal, Constipated, yes Irregular, yes

APPETITE, Good, Medium, yes: doesn't take solid food Poor,

SLEEP, Good, Poor, yes Irregular,

PULSE, See Record RESP., – – TEMP., – –

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 1 year ONSET GRADUAL OR SUDDEN, gradual –

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters, } No knowledge can be obtained from him

1893

This man was brought here by a Deputy Sheriff, with following history. Is a ranchman. Habits are good. Insanity not hereditary. Cause of this (the first attack) is exposure; about 2 years ago, was caught in a blizzard; suffered severely; was rendered snow-blind; nearly perished. Form of attack is fanciful & paranoimal. No accompanying bodily disorder. First symptoms of disease were manifested one year ago. Lyloss of memory, inability to write or compose, confusion of ideas. Insanity is now shown by imaginary disease & pains. Not disposed to injure others. Not suicidal, nor filthy nor destructive. No bodily disease. Has not been restrained or confined nor under medical treatment.

Jan 20 Jan 20/93. Was restless for 4 hours, sleeping 5 hours, last night. 830 Am. Pulse 104. Lies in bed. Answers & talks. Is restless. Refused breakfast & would not permit taking of temperature; skin moist & hot. 630 Pm. P 106

" 21 Jan 21/93. Slept well, 8 hours, last night. Was choked & had his face scratched by room-mate, during night. 830 am. Pulse 118. T(e) 100. Jan 22/93. Has restless all last night; out of bed frequently, kept mate. soiled his bed. Am. Had to be fed last night & this morning. Pulse 75, in bed. Pm. Is very restless.

" 23 Jan 23/93. Out of bed for 4 hours or so; restless all last night; sleeping none. 830 am. Is constipated. Pulse 95.

" 24/25 Jan 24/93. Slept 4 hours last night, restless only 1 hour. 830 am. Pulse 96. T(e) 100.2 Jan 25/93. Last night was restless for 3 hours, sleeping 5 hours. Again soiled his bed. 830 am. Pulse 78. T(e) 99.2.

" 26 Jan 26/93. Was restless for 8 hours, noisy & talking; slept none at all last night. 9 am. P 78. T(e) 99.

" 27 Jan 27/93. Last night was restless for 5 hours, & talkative, sleeping but 3 hours. 9 am. P 98. T(e) 98.6

" 28 Acts quite hysterically this morning. Has examined today, in bed. (See Record). Jan 28/93. Again restless & talking for 4 hours, sleeping but 4 hours, last night. 730 am Pulse 64. Breath offensive. Is constipated. Jan 29/93. Sleeping but 2 hours last night, being restless for 6 hours. Was talking much in his sleep.

" 29

" 30 830 am. Pulse 78. Jan 30/93. Passed a fairly good night, last night, sleeping 7 hours. Restless but 1 hour. 830 am. Pulse 72. 530 Pm. Pulse 100. T(e) 99. Patient lies in bed; resists almost everything; has a generalized tremor & incoordination; expansive ideas. Is full of queer notions. Expression is somewhat blank, breaking into agitated motion when stirred up. Jan 31/93. Restless for 6 hours, sleeping only 2 hours, last night. 830 am. Pulse 102. T(e) 99.6.

" 31

Feb 1 Feb 1/93. Restless for a few hours last night, but slept sound. 830 am. Pulse 102. T(e) 98.6. 530 Pm. Pulse 102. T(e) 99. Feb 2/93. Last night, was very restless, out of bed often, talking much. Slept but little. 830 am. Pulse 106. T(e) 98.6. 530 Pm. Pulse 106. T(e) 99. Lies in bed; speech exceedingly thick; typical paretic,

" 2

" 3/4 less active, perhaps, than on admission. Feb 3/93. 830 am. Pulse 102. T(e) 98.8. Feb 4/93. 830 am P 112 T(e) 100.4. Temperature is up, but no symptoms corresponding can be found. Feb 5/93. Is very stubborn

" 5

" 9 today; resists feeding quite strongly & drinks milk reluctantly. Feb 9/93. Refuses his milk - has

" 16 taken no food for 2 day. Feb 16/93. For last 2 weeks, has been quite frequently restless at night often out of bed, talking for from 4 to 6 hours each night, sleeping only from 3 to 5 hours, very occasionally

" 17 6 or 7 hours, & for 2 or 3 nights, restless all night, sleeping none at all. Feb 17/93. Was restless, noisy and

" 19 talking all last night & slept none at all. Feb 19/93. Since last note on this subject, has continued restless and noisy at night for from 2 to 3 hours, sleeping 5 or 6 hours each night; on only one occasion, sleeping

" 25 a full night. Feb 25/93. See above note for record of rest, sleep & behavior at night. On admission, patient was in quite an exhausted & nervous condition. Was put to bed where he has remained ever since; had quite a rapid pulse & some rise in temperature. On a few occasions has talked some, but

NAME. W. J. Abbott in underclothing

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.
+ Jany 14th	91½ + 8½ clothes	—		
+ Feby 1	95	—	3½	
+ " 16	86½	—		8½
+ " 24	86	—		½
+ Mar 2d	83½	86		2½
+ " 11th	80			3½
+ " 18th	74½			5½
+ " 25th	70½			4
+ April 11th	83		4½	
+ May 3d	83½	74	½	
+ " 15th	84	—	½	
+ " 22d	84	—	—	
+ June 18th	76	—	—	8
+ July 5th	79½		1½	
+ Aug 3d	84		2	3½
+ Sept 8	76			

OF MR. W. J. Abbott
OSIS.

Today same as before
bowels constipated
weak failing of late
Cautious
Last two days

Aug 9 Ac... poor, more average, only 1½ hours last night. Patient

takes a reasonable amount of nourishment, chiefly eggnog. Bowels are constipated. Cautious

(carried to page 300)

1893

This man was brought
Habits are good. Insani
ago, was caught in a blizz
of attack is painful & p
disease was manifested
-fusion of ideas. Insanity
injure others. Not suicidal
-tramid or confined nor un
ceal treatment.

Jan 20 Jan 20/93. Was restless for 4 hours, sleeping 5 hours, last night. 830 Am. Pulse 104. Lain in bed. Quivers & shakes.
" 21 Restless. Refused breakfast & would not permit taking of temperature; skin moist & hot. 630 Pm P106
Jan 21/93. Slept well, 8 hours, last night. Has choked & had his face scratched by room-mate, during night.
" 22 830 Am. Pulse 118. T(e) 100. Jan 22/93. Has restless all last night; out of bed frequently, slept none.
Boiled his bed. Am. Had to be fed last night & this morning. Pulse 75, in bed. Pm. Is very restless.
" 23 Jan 23/93. Out of bed for 4 hours or so; restless all last night; sleeping none. 830 Am. Is Constipated. Pulse 95
" 24/25 Jan 24/93. Slept 7 hours last night, restless only 1 hour. 830 Am. Pulse 96. T(e) 100.2 Jan 25/93. Last
night, was restless for 3 hours, sleeping 5 hours. Again soiled his bed. 830 Am. Pulse 78. T(e) 99.2.
" 26 Jan 26/93. Was restless for 8 hours, noisy & talking; slept none at all last night. 9 Am. P78. T(e) 99.
" 27 Jan 27/93. Last night was restless for 5 hours, & talkative, sleeping but 3 hours. 9 Am. P98. T(e) 98.6
" 28 Acts quite hysterically this morning. Has examined today, in bed. (See Record). Jan 28/93. Again
restless & talking for 4 hours, sleeping but 4 hours, last night. 730 Am Pulse 64. Breath offensive. Is con-
" 29 -stipated. Jan 29/93. Sleeping but 2 hours last night, being restless for 6 hours. Was talking much in his sleep.
" 30 830 Am. Pulse 78. Jan 30/93. Passed a fairly good night, last night, sleeping 7 hours. Restless but 1 hour.
830 Am. Pulse 72. 530 Pm. Pulse 100. T(e) 99. Patient lies in bed; resists almost everything; has a general-
" 31 -ized tremor & incoordination; & paucity of ideas. Is full of grimaces. Expression is somewhat
blank, breaking into agitated motion when stirred up. Jan 31/93. Restless for 6 hours, sleeping
only 2 hours, last night. 830 Am. Pulse 102. T(e) 99.6.

Feb 1 Feb 1/93. Restless for a few hours last night, but slept sound. 830 Am. Pulse 102. T(e) 98.6. 530 Pm Pulse
" 2 102. T(e) 99. Feb 2/93. Last night, was very restless, out of bed often, talking much. Slept but little.
830 Am. Pulse 106. T(e) 98.6. 530 Pm. Pulse 106. T(e) 99. Lies in bed; speech exceedingly thick; typical parkin-
" 3/4 -sonian attitude & tremor. Is less active, perhaps, than on admission. Feb 3/93. 830 Am. Pulse 102. T(e) 98.8. Feb 4/93. 830 Am P 112
" 5 T(e) 100.4. Temperature is up, but no symptoms corresponding can be found. Feb 5/93. Is very stubborn
" 9 today; resists feeding quite strongly & drinks milk reluctantly. Feb 9/93. Refuses his milk - has
" 16 taken no food for 2 days. Feb 16/93. For last 2 weeks, has been quite frequently restless at night
often out of bed, talking for from 4 to 6 hours each night, sleeping only from 3 to 5 hours, very occasionally
" 17 6 or 7 hours, & for 2 or 3 nights, restless all night, sleeping none at all. Feb 17/93. Was restless, noisy and
" 24 talking all last night & slept none at all. Feb 24/93. Since last note on this subject, has continued restless
and noisy at night for from 2 to 3 hours, sleeping 5 or 6 hours each night; on only one occasion, sleeping
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patient was in quite an excited & nervous condition. Was put to bed where he has remained ever
since; had quite a rapid pulse & some rise in temperature. On a few occasions has talked some, but

22/2238

DETAILED HISTORY OF SICKNESS OF MR. W. J. Abbott
DIAGNOSIS.

1893

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
July 23	7	5	84	87					
24	7	5	78	88					Takes a reasonable amount of nourishment
25	7	5	74	76					
26	7	5	68	76					
27	7	5	80	76					Has twitchings of face. Tongue as before
28	7	5	78	72					Also bowels constipated
29	7	5	72	78					Pulse weak failing of late
30	7	5	60	78					Bowels Costive
31	7	5	80	74					" "
									Twitchings of face & speech

take a reasonable amount of nourishment, chiefly Eggnog. Bowels are constipated. Catheter
(carried to page 300)

DETAILED HISTORY OF SICKNESS OF MR. W. J. Abbott.
DIAGNOSIS.

DATE 1893	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
June 26	7	5	62	64					
" 27	7	5	68	72					
" 28	7	5	68	76					Restless and talking
" 29	7	5	70	84					Bowels Costive
" 30	7	5	72	80					" " Takes what food given him
July 1	7	5	70	82					Rambles. Costive.
" 2	7	5	74	88					Eyes sore probably from exposure to the sun. Has been taken out to walk in the fields. Shows no intelligence
" 3	7	5	66	78					Has severe attack of talking spells. Rambles incoherently also has difficulty in articulating. Bowels Costive
" 4	7	5	72	74					Pulse weak
" 5	7	5	60	76					Weight 127½
" 6	7	5	60	70					Bowels Costive
" 7	7	5	70	72					Bed sore about the sacrum. Is fairly quiet after to
" 8	7	5	70	72					Do having terrible spells this a.m. Same as before.
" 9	7	5	60	76					Bath. Bowels Costive.
" 10	7	5	66	72					Bowels moved.
" 11	7	5	76	80					" "
" 12	7	5	76	70					Has stayed in bed for four days
" 13	7	5	80	78					Has been shaved & kept
" 14	7	5	76	66					Bowels Costive.
" 15	7	5	68	70					
" 16	7	5	68	62					Has some difficulty in articulating
" 17	7	5	64	78					Bowels moved. Costive
" 18	7	5	66	78					Restless and raving
" 19	7	5	86	78					Bowels moved after getting bath
" 20	7	5	84	74					Restless and raving. Costive
" 21	7	5	70	74					Articulates with difficulty
" 22	7	5	80	78					Coffee rather does to day. Bath

take a reasonable amount of nourishment, chiefly Eggnog. Bowels are constipated. Costive

(carried to page 300)

...been re-

...Pulse 104. Sees in bed. Quivers & shakes.

...aking of temperature; skin moist & hot. 630 Pm. P 106

...gar. Was choked & had his face scratched by room-mate, during night.

...100. Jan 22/93. Has restless all last night; out of bed frequently, slept none.

...a. Am. Had to be fed last night & this morning. Pulse 75, in bed. Pm. Is very restless.

Jan 23/93. Out of bed for 4 hours or so; restless all last night; sleeping none. 830 Am. Is Constipated. Pulse 75.

" 24/93. Jan 24/93. Slept 7 hours last night, restless only 1 hour. 830 am. Pulse 96. T(R) 100.2. Jan 25/93. Last night was restless for 3 hours, sleeping 5 hours. Again soiled his bed. 830 am. Pulse 78. T(R) 99.2.

" 26 Jan 26/93. Was restless for 8 hours, noisy & talking; slept none at all last night. 9 am. P 78. T(R) 99.

" 27 Jan 27/93. Last night was restless for 5 hours & talkative, sleeping but 3 hours. 9 am. P 98. T(R) 98.6

" 28 Acts quite hysterically this morning. Has examined today, in bed. (See Record). Jan 28/93. Again restless & talking for 4 hours, sleeping but 4 hours, last night. 730 am Pulse 64. Breath offensive. Is Constipated. Jan 29/93. Sleeping but 2 hours last night, being restless for 6 hours. Was talking much in his sleep.

" 30 830 Am. Pulse 78. Jan 30/93. Passed a fairly good night, last night, sleeping 7 hours. Restless but 1 hour. 830 am. Pulse 72. 530 Pm. Pulse 100. T(R) 99. Patient lies in bed; resists almost everything; has a generalized tremor & incoordination; & passive ideas. Is full of queer motions. Expression is somewhat blank, breaking into agitated motion when stirred up. Jan 31/93. Restless for 6 hours, sleeping only 2 hours, last night. 830 Am. Pulse 102. T(R) 99.6.

Feb 1 Feb 1/93. Restless for a few hours last night, but slept most. 830 Am. Pulse 102. T(R) 98.6. 530 Pm. Pulse

" 2 102. T(R) 99. Feb 2/93. Last night, was very restless, out of bed often, talking much. Slept but little. 830 Am. Pulse 106. T(R) 98.6. 530 Pm. Pulse 106. T(R) 99. Lies in bed; speech exceedingly thick; typical paretic,

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" 5 T(R) 100.4. Temperature is up, but no symptoms corresponding can be found. Feb 5/93. Is very stubborn

" 9 today; resists feeding quite strongly & drinks milk reluctantly. Feb 9/93. Refuses his milk - has

" 16 taken no food for 2 days. Feb 16/93. For last 2 weeks, has been quite frequently restless at night often out of bed, talking for from 4 to 6 hours each night, sleeping only from 3 to 5 hours; very occasionally

" 17 6 or 7 hours, & for 2 or 3 nights, restless all night, sleeping none at all. Feb 17/93. Was restless, noisy and

" 18 talking all last night & slept none at all. Feb 18/93. Since last note on this subject, has continued restless and noisy at night for from 2 to 3 hours, sleeping 5 or 6 hours each night; on only one occasion, sleeping a full night. Feb 25/93. See above notes for record of rest, sleep & behavior at night. On admission, patient was in quite an excited & nervous condition. Was put to bed where he has remained ever since; had quite a rapid pulse & some rise in temperature. On a few occasions has talked some, but

: Speech
refused
& fed.
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Has lately
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= in
elsewhere).

20/373

DETAILED HISTORY OF SICKNESS OF MR. W.J. Abbott
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
1893 May									
11	7	5	70	76					Is in bed — quiet — No symptoms of Insanity
12	7	5	78						Is brighter & irritable in answer to questions
13	7	5	72	73					
14	7	5	64	83					Bowels Costive
15	7	5	76						Weight 84 lbs. Appetite very good. Visited by mother
16	7	5	74	78					Absent daily. Eyes same as last week
17	7	5	76	70					Very quiet all day
18	7	5	90	87					
19	7	5	88						Face swollen appear more sluggish than usual.
19									Visited by mother.
20	7	5	82	76					8th Bath
21	7	5	80	76					
22	7	5	74	62					Weight 84 — No change in any way
23	7	5	76						Appears the same from day to day
24	7	5	62	60					Has quietly rested through the whole round of suggestion.
25	7	5	60	78					Bed — is quite sore.
26	7	5	60	64					
27	7	5	60	70					Very restless all day
28	7	5	62	69					" quiet " "
29	7	5	70	70					Bowels regular
30	7	5	78	70					Bowels moved freely — Bath
31	7	5	64	66					
June 1	7	5	80	78					
2	7	5	74	80					Restless and noisy
3	7	5	70	72					Bath
4	7	5	74	66					Restless and noisy
5	7	5	66	76					Noisy all day
6	7	5	64	78					Visited by Father
7	7	5	70	80					Talks when spoken to, jumps from bed
8	7	5	70	76					takes off his bed trunk at times
9	7	5	84	76					Bowels Costive
10	7	5	74	78			98.4		Back — Restless all day
11	7	5	70	88					Bowels moved. Restless all day
12	7	5	72	72					Seems to think someone is going to take away his bed
13	7	5	70	78					Restless and noisy all day
14	7	5	70	70					Bowels moved
15	7	5	60	66					
16	7	5	60	64					
17	7	5	68	76					Restless all day — Bath
18	7	5	68	72					Talking and restless all day
19	7	5	68	84					Noisy 5 P.M. Bowels moved freely, weight 76
20	7	5	78	68					
21	7	5	70	60					Restless the greater part of the day
22	7	5	68	70					Restless. Fell out of bed.
23	7	5	60	74					Talking and restless all day
24	7	5	64	74					Bath.
25	7	5	66	68					

(carried to page 300)

Jan 22/93. Has restless all last night; out of bed frequently, slept none. Pulse 104. Sees bed. Quivers & shakes. ... taking of temperature; skin moist & hot. 6.30 Pm. P 106 ... night. Has dodged & had his face scratched by room-mate, during night. ... (100. Jan 22/93. Has restless all last night; out of bed frequently, slept none. ... vet. Am. Had to be fed last night & this morning. Pulse 75, in bed. Pm. Is very restless.
Jan 23/93. Out of bed for 4 hours or so; restless all last night; sleeping none. 830 Am. Is constipated. Pulse 75.
Jan 24/93. Slept 7 hours last night, restless only 1 hour. 830 am. Pulse 96. T(R) 100.2. Jan 25/93. Last night was restless for 3 hours, sleeping 5 hours. Again soiled his bed. 830 am. Pulse 78. T(R) 99.2.
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830 am. Pulse 78. Jan 30/93. Passed a fairly good night, last night, sleeping 7 hours. Restless but 1 hour.
830 am. Pulse 92. 530 Pm. Pulse 100. T(R) 99. Patient lies in bed; resists almost everything; has a generalized tremor & incoordination; & passive ideas. Is full of queer motions. Expression is somewhat blank breaking into agitated motion when stirred up. Jan 31/93. Restless for 6 hours, sleeping only 2 hours, last night. 830 Am. Pulse 102. T(R) 99.6.
Feb 1/93. Restless for a few hours last night, but slept sound. 830 Am. Pulse 102. T(R) 98.6. 530 Pm. Pulse 102. T(R) 99. Feb 2/93. Last night, was very restless, out of bed often, talking much. Slept but little.
830 Am. Pulse 106. T(R) 98.6. 530 Pm. Pulse 106. T(R) 99. Lies in bed; speech exceedingly thick; typical paretic, less active, perhaps, than on admission. Feb 3/93. 830 Am. Pulse 102. T(R) 98.8. Feb 4/93. 830 Am. P 112. T(R) 100.4. Temperature is up, but no symptoms corresponding can be found. Feb 5/93. Is very stubborn today; resists feeding quite strongly & drinks milk reluctantly. Feb 9/93. Refuses his milk - has taken no food for 2 days. Feb 16/93. For last 2 weeks, has been quite frequently restless at night often out of bed, talking for from 4 to 6 hours each night, sleeping only from 3 to 5 hours, very occasionally 6 or 7 hours, & for 2 or 3 nights, restless all night, sleeping none at all. Feb 17/93. Was restless, noisy and talking all last night & slept none at all. Feb 24/93. Since last note on this subject, has continued restless and noisy at night for from 2 to 3 hours, sleeping 4 or 5 hours each night; on only one occasion, sleeping a full night. Feb 25/93. See above note for record of rest, sleep & behavior at night. On admission, patient was in quite an exhausted & nervous condition. Was put to bed where he has remained ever since; had quite a rapid pulse & some rise in temperature. On a few occasions has talked some, but ... take a reasonable amount of nourishment, chiefly eggnog. Bowels are constipated. Catches

MEDICAL NOTES IN THE CASE OF W. J. Abbott.

MO.	DA.	HR.	PULS.	TEMP.	RESP.	NOTES BY NURSE.	NOTES BY PHYSICIAN.
April	10	2.00	84				
		5.00	80				
	11	7.00	80			Takes food very well restless all day.	
		5.00	82				
	12	7.00	82			Bed sore doing nicely	Patient seems to be growing stronger.
		5.00	92			Bath.	
	13	7.00	84				
		5.00	84				
	14	7.00	82			Quite restless and noisy at times	
		5.00	102				
	15	7.00	84				
		5.00	86				
	16	7.00	72				
		5.00	78				
	17	7.00	88			Bowels Costive (11) Enema of Soap & Suds	
		5.00	88			11.30 Bowels moved.	
	18	7.00	84				
		5.00	84				
	19	7.00	76				
		5.00	72				
	20	7.00	82				
		5.00	74				
	21	7.00	76				
		5.00	74			Restless all day	
	22	7.00	74				
		5.00	66				
	23	7.00	78			Visited by Mother almost daily.	
		5.00	78				
	24	7.00	68				
		5.00	108				
	25	7.00	78			Bowels Moved	Gave him bath.
		5.00	74				
	26	7.00	68				
		5.00	80				
	27	7.00	70				
		5.00	190				
	28	7.00	70			Bowels Moved (9) 4 P.M.	gave bath
		5.00	100				
	29	7.00	82				
		5.00					
	30	7.00	88				
		5.00	87				
May	1	7.00	74				Patient quiet & Comfortable by
		6.00	76				Day Nurse does not eat well
	2	7.00	88				Daily
		5.00	118	102 4/5			Slowly - Symptoms unchanged
	3	7.00	74	98			
		5.00	90				
	4	7.00	86	98		Appetite very good - Food Lutose & Chiefly liquid	
		6.00	66				
	5	7.00	64				
		5.00	68				
	6	7.00	74				
		5.00	60			2 P.M. Had slight movement.	
	7	7.00	70				
		5.00					
	8	7.00	94				
		5.00	76				
	9	7.00	70			Quite restless quiet in typically paretic	
		5.00				way from use of his back - Bowels in a Jersey	
	10	7.00	68			Bowels moving regular, in suitable way	
		5.00	70				

May 9/93. Sleep, this month, has continued poor; in the average, only 1 to 2 hours each night. Patient takes a reasonable amount of nourishment, chiefly Eggnog. Bowels are constipated. Continues

(carried to page 300)

...ulse 104. Lies in bed. Quivers & shakes.

...ning of temperature; skin moist & hot. 6.30 P.M. P 106

...gar. Has choked & had his face scratched by room-mate, during night.

(c) 100. Jan 22/93. Has restless all last night; out of bed frequently, slept little.

...ver. Am. Had to be fed last night & this morning. Pulse 75, in bed. PM. Is very restless.

Jan 23/93. Out of bed for 4 hours or so; restless all last night; sleeping none. 8.30 am. Is constipated. Pulse 75.

" 24/93 Jan 24/93. Slept 4 hours last night, restless only 1 hour. 8.30 am. Pulse 96. T(R) 100.2. Jan 25/93. Last night was restless for 3 hours, sleeping 5 hours. Again soiled his bed. 8.30 am. Pulse 78. T(R) 99.2. -

" 26 Jan 26/93. Was restless for 8 hours, noisy & talking; slept none at all last night. 9 am. P 78. T(R) 99. -

" 27 Jan 27/93. Last night was restless for 5 hours, talkative, sleeping but 3 hours. 9 am. P 98. T(R) 98.6 -

" 28 Acts quite hysterically this morning. Has examined today, in bed. (See Record). Jan 28/93. Again restless talking for 4 hours, sleeping but 4 hours, last night. 7.30 am Pulse 64. Breath offensive. Is constipated. Jan 29/93. Sleeping but 2 hours last night, being restless for 6 hours. Was talking much in his sleep -

" 29 -

" 30 8.30 am. Pulse 78. Jan 30/93. Passed a fairly good night, last night, sleeping 7 hours. Restless but 1 hour. 8.30 am. Pulse 72. 5.30 PM. Pulse 100. T(R) 99. Patient lies in bed; resists almost everything; has a generalized tremor & incoordination; expansive ideas. Is full of queer notions. Expression is somewhat

" 31 blank, breaking into agitated motion when stirred up. Jan 31/93. Restless for 6 hours, sleeping only 2 hours, last night. 8.30 am. Pulse 102. T(R) 99.6.

Feb 1 Feb 1/93. Restless for a few hours last night, but slept sound. 8.30 am. Pulse 102. T(R) 98.8. 5.30 PM. Pulse

" 2 102. T(R) 99. Feb 2/93. Last night, was very restless, out of bed often, talking much. Slept but little.

8.30 am. Pulse 106. T(R) 98.6. 5.30 PM. Pulse 106. T(R) 99. Lies in bed; speech exceedingly thick; typical paretic,

" 3/93 less active, perhaps, than on admission. Feb 3/93. 8.30 am. Pulse 102. T(R) 98.8. Feb 4/93. 8.30 am. P 102

" 5 T(R) 100.4. Temperature is up, but no symptoms corresponding can be found. Feb 5/93. Is very stubborn

" 9 today; resists feeding quite strongly & drinks milk reluctantly. Feb 9/93. Refuses his milk - has

" 10 taken no food for 2 days. Feb 10/93. For last 2 weeks, has been quite frequently restless at night often out of bed, talking for from 4 to 6 hours each night, sleeping only from 3 to 5 hours, very occasionally

" 17 6 or 7 hours, & for 2 or 3 nights, restless all night, sleeping none at all. Feb 17/93. Was restless, noisy and

" 24 talking all last night & slept none at all. Feb 24/93. Since last note on this subject, has continued restless

and noisy at night for from 2 to 3 hours, sleeping 5 or 6 hours each night; on only one occasion, sleeping

" 25 a full night. Feb 25/93. See above note for record of rest, sleep & behavior at night. On admission, patient was in quite an excited & nervous condition. Was put to bed where he has remained ever since; had quite a rapid pulse & some rise in temperature. On a few occasions has talked some, but

CLINICAL NOTS IN THE CASE OF W. J. Abbott

	NO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
March 1893		10	5 PM	82				
		11	730	70				
		11	5.00	80				
		12	730	82			9 AM. Gave bath.	
		12	5.00	82				
		13	730	84				
		13	5.00	86				
		14	730	72			Very restless and Noisy at times	
		14	5.00	80				
		15	730	74			Bed sore is doing nicely slept part of the day.	
		15	5.00	80				
		16	730	72			Slept during the night bowels moved. 7.30 Gave him bath	
		16	5.00	78			1 PM. Bowels moved gave him bath.	
		17	730	76			9 AM. Bowels Moved freely.	
		17	5.00	84				
		18	730	82			730. Bowels Moved Gave bath.	
		18	5.00	100				
		19	730	84				
		19	5.00	96				
		20	730	82			7.30 Bowels Moved Bed sore about the same	
		20	5.00	86				
		21	730	84			9.30 Bowels Moved freely.	
		21	5.00	80				
		22	730	76			" "	Bed sore doing nicely.
		22	5.00	74				
		23	730	80				
		23	5.00	82				
		24	730	88			P. M. Irritated by Mother	appears to Murmur but day
		24	5.00	102			Nothing.	
		25	730	88			9 am. Appears brighter.	
		25	5.00	101	100.6			
		26	730	86				
		26	5.00	108			Doing nicely takes Nourishment freely.	
		27	730	90				
		27	5.00	90				
		28	730	88				
		28	5.00	126	101.2		Ate some Milk toast for dinner	
		29	730	90			8 P. Enema of Soap Suds.	
		29	5.00	92				
		30	730	80			Takes Nourishment fairly well bed sore doing Nicely.	
		30	5.00	100		100.2	Eating some pie. Is fond of Cake.	
		31	730	88				
		31	5.00	92				
April		1	730	98	100.2		4 P. M. Bowels moved freely	
			5.00	99	101			
		2	9.00	82	100.2			
			6.00	86	101.8			
		3	730	86	99.6			
			6.30	91	100.2			
		4	730	100	99.4			
			5.00	102	100.8			
		5	730	96				
			5.00	100				
		6	7.00	80				
			5.00	92	99.2		Bowels moved a number of times during the day.	
		7	7.00	94			9 am. Bowels Moved. 2 P.M. Bath.	
			5.00	100				
		8	7.00	88			2 P.M. Gave bath.	Bowels Moved a Number of times during the day
			5.00	88	99.2		2 P.M. Gave Enema & Soap Suds	bowels moved.
		9	7.00	86				
			5.00	92			Restless all day	

Aug 9 | Aug 9/93. Sleep, this month, has continued poor; in the average, only 1 to 2 hours each night. Patient takes a reasonable amount of nourishment, chiefly Eggnog. Bowels are constipated. Catheter

(carried to page 300)

...ught. Has clubbed & had his face scratched by room-mate, during night.
...(e) 100. Jan 22/93. Has restless all last night; out of bed frequently, slept none.
...in bed. Am. Had to keep last night & this morning. Pulse 75, in bed. Pm. Is very restless.
23 Jan 23/93. Out of bed for 4 hours or so; restless all last night; sleeping none. 830 Am. Is Constipated. Pulse 75.
" 24/25 Jan 24/93. Slept 4 hours last night, restless only 1 hour. 830 am. Pulse 96. T(e) 100.2 Jan 25/93. Last night was restless for 3 hours, sleeping 5 hours. Again soiled his bed. 830 am. Pulse 78. T(e) 99.2.
" 26 Jan 26/93. Was restless for 8 hours, noisy & talking; slept none at all last night. 9 am. P 76. T(e) 99.
" 27 Jan 27/93. Last night was restless for 5 hours, & talkative, sleeping but 3 hours. 9 am. P 98. T(e) 98.6
" 28 Acts quite hysterically this morning. Has examined today, in bed. (See Record). Jan 28/93. Again restless & talking for 4 hours, sleeping but 4 hours, last night. 730 am Pulse 64. Breath offensive. Is Constipated. Jan 29/93. Sleeping but 2 hours last night, being restless for 6 hours. Was talking much in his sleep.
" 30 830 Am. Pulse 78. Jan 30/93. Passed a fairly good night, last night, sleeping 7 hours. Restless but 4 hours. 830 Am. Pulse 72. 530 Pm. Pulse 100. T(e) 99. Patient lies in bed; resists almost everything; has a generalized tremor & incoordination; & passive ideas. Is full of queer motions. Expression is somewhat
" 31 blank, breaking into agitated motion when stirred up. Jan 31/93. Restless for 6 hours, sleeping only 2 hours, last night. 830 Am. Pulse 102. T(e) 99.6.
Feb 1 Feb 1/93. Restless for a few hours last night, but slept most. 830 Am. Pulse 102. T(e) 98.6. 530 Pm. Pulse
" 2 102. T(e) 99. Feb 2/93. Last night, was very restless, out of bed often, & talking much. Slept but little. 830 Am. Pulse 106. T(e) 98.6. 530 Pm. Pulse 106. T(e) 99. Lies in bed; speech exceedingly thick; typical paretic,
" 3/4 less active, perhaps, than on admission. Feb 3/93. 830 Am. Pulse 102. T(e) 98.8. Feb 4/93. 830 Am. P 112
" 5 T(e) 100.4. Temperature is up, but no symptoms corresponding can be found. Feb 5/93. Is very stubborn
" 9 today; resists feeding quite strongly & drinks milk reluctantly. Feb 9/93. Refuses his milk - has
" 10 taken no food for 2 days. Feb 10/93. For last 2 weeks, has been quite frequently restless at night often out of bed, talking for from 4 to 6 hours each night, sleeping only from 3 to 5 hours, very occasionally
" 17 6 or 7 hours, & for 2 or 3 nights, restless all night, sleeping none at all. Feb 17/93. Was restless, noisy and
" 24 talking all last night & slept none at all. Feb 24/93. Since last note on this subject, has continued restless and noisy at night for from 2 to 3 hours, sleeping 5 or 6 hours each night; on only one occasion, sleeping
" 25 a full night. Feb 25/93. See above note for record of rest, sleep & behavior at night. On admission, patient was in quite an excited & nervous condition. Was put to bed where he has remained ever
since; had quite a rapid pulse & some rise in temperature. On a few occasions has talked some, but

...104. Skin hot. Quivers & shakes.
...of Temperature; skin moist & hot. 630 Pm P106
...ved & had his face scratched by room-mate, during night.
...Jan 22/93. Has restless all last night; out of bed frequently, slept none.
...was to bed last night & this morning. Pulse 75, in bed. Rm. Is very restless.
...Out of bed for 4 hours or so; restless all last night; sleeping none. 830 Am Is Constipated. Pulse 75.
27 Jan 27/93. Slept 4 hours last night, restless only 1 hour. 830 Am. Pulse 96. T(R) 100.2. Jan 25/93. Last night, was restless for 3 hours, sleeping 5 hours. Again soiled his bed. 830 Am. Pulse 78. T(R) 99.2.
26 Jan 26/93. Was restless for 8 hours, noisy & talking; slept none at all last night. 9 Am. P78. T(R) 99.
25 Jan 25/93. Last night was restless for 5 hours, talkative, sleeping but 3 hours. 9 Am. P98. T(R) 98.6
28 Acts quite hysterically this morning. Has examined today, in bed. (See Record). Jan 28/93. Again restless & talking for 4 hours, sleeping but 4 hours, last night. 730 Am Pulse 64. Breath offensive. Is constipated. Jan 29/93. Sleeping but 2 hours last night, being restless for 6 hours. Was talking much in his sleep.
29
30 830 Am. Pulse 78. Jan 30/93. Passed a fairly good night, last night, sleeping 7 hours. Restless but 4 hours. 830 Am. Pulse 72. 530 Pm. Pulse 100. T(R) 99. Patient lies in bed; resists almost everything; has a generalized tremor & incoordination; & paucity of ideas. Is full of quick motions. Expression is somewhat blank, breaking into agitated motion when stirred up. Jan 31/93. Restless for 6 hours, sleeping only 2 hours, last night. 830 Am. Pulse 102. T(R) 99.6.
31
Feb 1 Feb 1/93. Restless for a few hours last night, but slept sound. 830 Am. Pulse 102. T(R) 98.6. 530 Pm Pulse
2 102. T(R) 99. Feb 3/93. Last night, was very restless, out of bed often, talking much. Slept but little. 830 Am. Pulse 106. T(R) 98.6. 530 Pm. Pulse 106. T(R) 99. Lies in bed; speech exceedingly thick; typical parkie,
3 less active, perhaps, than on admission. Feb 3/93. 830 Am. Pulse 102. T(R) 98.8. Feb 4/93. 830 Am P112
5 T(R) 100.4. Temperature is up, but no symptoms corresponding cause found. Feb 5/93. Is very stubborn
9 today; resists feeding quite strongly & drinks milk reluctantly. Feb 9/93. Refuses his milk - has
16 taken no food for 2 days. Feb 16/93. For last 2 weeks, has been quite frequently restless at night often out of bed, talking for from 4 to 6 hours each night, sleeping only from 3 to 5 hours, very occasionally
17 6 or 7 hours, & for 2 or 3 nights, restless all night, sleeping none at all. Feb 17/93. Was restless, noisy and
19 talking all last night & slept none at all. Feb 19/93. Since last note on this subject, has continued restless
and noisy at night for from 2 to 3 hours, sleeping 5 or 6 hours each night; on only one occasion, sleeping
25 a full night. Feb 25/93. See above notes for record of rest, sleep & behavior at night. On admission, patient was in quite an exhausted & nervous condition. Was put to bed where he has remained ever since; had quite a rapid pulse & some rise in temperature. On a few occasions has talked some, but

...Derous; speech
...repeated
...d food.
...in other way.
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...y father.
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...2 to 4 hours
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.../93. Bed-
...in bed.
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'CLINICAL REPORT.

PATIENT'S NAME W. J. Abbott CASE NO. _____ REC. COMMENCING _____

	Pulse A.M.	Pulse P.M.	Temp. A.M.	Temp. P.M.	
March 1					Bed from forenoon
2					
3					
4					
5					bowels moved
6					rests quietly in bed 8 or ninth day
7					Bowels not moved since 2nd
8					
9					
		330		116	
3	830	112		988	Drinks about 2½ qts per day. (Milk).
4	836	112		1004	Drinks more & Temperature up but no symptoms corresponding can be found. Trouble about Temperature
5.	8 AM	86		998	very stubborn: resists feeding quite strongly.
6	8	92		1002	
					drinks reluctantly
7	8	86			will not drink milk.
8	8	100			No food.
9	8	76			
10	8	68			drank only a few swallows milk
11	8	86			730 drank about ½ pint quite reluctantly, totals in 3 pts.
12	8	92			Total milk today 2 qts.
13	8	90			2 qts milk; bowels constipated.
14	8	66			2 qts " "
15	8	60			
16	8	60			Wt. 86½
17	8	70		998	2 qts of milk per day.
18	8	68			
19	8	98			
20	8	98			Bowels not yet moved.
21	8	100		998	
22	8	76			
23	8	98			
24	8	104			Bowels not moved.
25	8	82			have moved freely
26	8	92			
27	8	78			
Mar	1	102			

Aug 9 Aug 9/93. Sleeps this month, has continued poor; in the average, only 1 to 2 hours each night. Patient takes a reasonable amount of nourishment, chiefly Eggnog. Bowels are constipated. Catheter

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ing out- each morning for Dr to make note

DETAILED HISTORY OF SICKNESS OF MR. W. J. Abbott—
DIAGNOSIS.

DATE	HOUR	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	OTHER DATA.
Jany. 30th								Patient lies in bed - Resists almost everything - Has a general tremor Is ill co-ordinated - Is full of queer motions - Expression somewhat blank, breaking into agitated motion when stirred up
1	8.30	106				98.6		Lies in bed - Speech exceedingly thick - Typical parties - Has active pickup - Is in admission —
		130		96			99	
2	8.30			116				Drinks about 2½ qts. Per day. (Milk).
3	8.30		112			98.8		
4	8.30		112			100.4		Drinks more & Temperature up but no symptoms corresponding can be found.
5	8 am		86			99.2		Very stubborn: resists feeding quite stroggly.
6	8		92			102.2		
7	8		86					Drinks reluctantly.
8	8		100					Will not drink milk.
9	8		76					No Temp.
10	8		68					Drank only a few swallows milk
11	8		86					7.30 drank about ½ pint quite reluctantly. Total to day 3 pts.
12	8		92					Total milk today, 2 qts.
13	8		90					2 qts milk) Bowels constipated.
14	8		66					2 qts. " "
15	8		60					
16	8		60					Wt. 86½
17	8		70			99.8		2 qts of milk per day.
18	8		68					
19	8		66					
20	8		78					Bowels have not moved.
21	8		100			102.2		
22	8		76					
23	8		78					
24	8		104					Bowels not moved.
25	8		82					" " have moved freely
26	8		92					
27	8		78					
Mar 1		102						

Jany 26/93. Pulse 104. Lies in bed. Quivers & shakes.
... taking of Temperature; skin moist & hot. 6.30 Pm P106
... night. Has choked & had his face scratched by room-mate, during night.
... 100. Jan 22/93. Has restless all last night; out of bed frequently, slept none.
... ver. Am. Had to be fed last night & this morning. Pulse 75, in bed. Pm. Is very restless.
23 Jan 23/93. Out of bed for 4 hours or so; restless all last night; sleeping none. 8.30 Am. Is constipated. Pulse 75.
24/25 Jan 24/93. Slept 4 hours last night, restless only 1 hour. 8.30 am. Pulse 96. Temp 100.2. Jan 25/93. Last night, was restless for 3 hours, sleeping 5 hours. Again soiled his bed. 8.30 am. Pulse 78. Temp 99.2.
26 Jan 26/93. Was restless for 8 hours, noisy, talking; slept none at all last night. 9 am. P78. Temp 99.
27 Jan 27/93. Last night was restless for 5 hours, talkative, sleeping but 3 hours. 9 am. P98. Temp 98.6
28 Acts quite hysterically this morning. Has examined today, in bed. (See Record). Jan 28/93. Again restless talking for 4 hours, sleeping but 4 hours, last night. 7.30 am Pulse 64. Breath offensive. Is constipated. Jan 29/93. Sleeping but 2 hours last night, being restless for 6 hours. Was talking much in his sleep.
30 8.30 Am. Pulse 78. Jan 30/93. Passed a fairly good night, last night, sleeping 7 hours. Restless but 1 hour. 8.30 am. Pulse 92. 5.30 Pm. Pulse 100. Temp 99. Patient lies in bed; resists almost everything; has a generalized tremor & incoordination; is expansive ideas. Is full of queer motions. Expression is somewhat
31 blank, breaking into agitated motion when stirred up. Jan 31/93. Restless for 6 hours, sleeping only 2 hours, last night. 8.30 Am. Pulse 102. Temp 99.6.
Feb 1 Feb 1/93. Restless for a few hours last night, but slept most. 8.30 Am. Pulse 102. Temp 98.6. 5.30 Pm. Pulse
2 102. Temp 99. Feb 2/93. Last night, was very restless, out of bed often, talking much. Slept but little.
8.30 Am. Pulse 106. Temp 98.6. 5.30 Pm. Pulse 106. Temp 99. Lies in bed; speech exceedingly thick; typical parties,
3/4 less active, perhaps, than on admission. Feb 3/93. 8.30 Am. Pulse 102. Temp 98.8. Feb 4/93. 8.30 Am P112
5 Temp 100.4. Temperature is up, but no symptoms corresponding can be found. Feb 5/93. Is very stubborn
9 today; resists feeding quite strongly & drinks milk reluctantly. Feb 9/93. Refuses his milk - has
16 taken no food for 2 days. Feb 16/93. For last 2 weeks, has been quite frequently restless at night
often out of bed, talking for from 4 to 6 hours each night, sleeping only from 3 to 5 hours, very occasionally
17 6 or 7 hours, & for 2 or 3 nights, restless all night, sleeping none at all. Feb 17/93. Was restless, noisy and
18 talking all last night & slept none at all. Feb 18/93. Since last note on this subject, has continued restless
and noisy at night for from 2 to 3 hours, sleeping 5 or 6 hours each night; on only one occasion, sleeping
25 a full night. Feb 25/93. See above note for record of rest, sleep & behavior at night. On admission,
patient was in quite an excited & nervous condition. Was put to bed where he has remained ever
since; had quite a rapid pulse & some rise in temperature. On a few occasions has talked some, but

Aug 9 Aug 9/93. Sleeps this month, has continued poor; in the average, only 1 to 2 hours each night. Patient takes a reasonable amount of nourishment, chiefly eggnog. Bowels are constipated. Catheter

(carried to Page 300)

...tes.
...630 Pm P106
...e, during night.
...equently, slept some.
...S. Pm. Lovery restless.
...30 Am. Is Constipated. Pulse 75.
...ase 96. T(e) 100.2. Jan 25/93. Last
...bed. 830 Am. Pulse 78. T(e) 99.2.-
...me at all last night. 9 Am. P78. T(e) 99.-
...e, sleeping but 3 hours. 9 Am. P98. T(e) 98.6-
...ined today, in bed. (See Record). Jan 28/93. Again
...ers, last night. 730 Am Pulse 64. Breath offensive. Is con-
" 29 -...
" 30 830 A...
830. Am
...98. T(e) 99. Patient lies in bed; resists almost everything; has a general-
-ized tres... ...row; Expansive ideas. Is full of queer motions. Expression is somewhat
" 31 blank, brea... ...ipated motion when stired up. Jan 31/93. Restless for 6 hours, sleeping
only 2 hours, la... ...ight. 830 Am. Pulse 102. T(e) 99.6.

Feb 1 Feb 1/93. Restless for a few hours last night, but slept sound. 830 Am. Pulse 102. T(e) 98.8. 530 Pm Pulse
" 2 102. T(e) 99. Feb 2/93. Last night, was very restless, out of bed often, talking much, slept but little.
830 Am. Pulse 106. T(e) 98.6. 530 Pm. Pulse 106. T(e) 99. Lies in bed; speech exceedingly thick; typical paretic,
" 3/93 less active perhaps, than on admission. Feb 3/93. 830 Am. Pulse 102. T(e) 98.8. Feb 4/93. 830 Am P112
" 5 T(e) 100.4. Temperature is up, but no symptoms corresponding can be found. Feb 5/93. Is very stubborn
" 9 today; resists feeding quite strongly, drinks milk reluctantly. Feb 9/93. Refuses his milk - has
" 16 taken no food for 2 days. Feb 16/93. For last 2 weeks, has been quite frequently restless at night,
often out of bed, talking for from 4 to 6 hours each night, sleeping only from 3 to 5 hours; very occasionally
" 17 8 or 9 hours, & for 2 or 3 nights, restless all night, sleeping none at all. Feb 17/93. Was restless, noisy and
" 19 talking all last night & slept none at all. Feb 19/93. Since last note on this subject, has continued restless
and noisy at night for from 2 to 3 hours, sleeping 5 or 6 hours each night; on only one occasion, sleeping
" 25 a full night. Feb 25/93. See above notes for record of rest, sleep & behavior at night. On admission,
patient was in quite an exhausted & nervous condition. Was put to bed where he has remained ever
since; had quite a rapid pulse & some rise in temperature. On a few occasions has talked some, but

talk has been quite incoherent; actions resemble those of an hysterical person; speech also & quite typical of general paresis. Appetite has been poor at all times; has frequently refused food and milk & has also strenuously resisted efforts to feed him. Now takes only liquid food. Has become very dirty in habits and resists changing his bed - Is persistently resisting in other ways. From time to time, has had to be restrained in bed. There seems to be no very marked change in his condition since his admission, although he has lost considerable in flesh. Has lately been lying in bed more quietly. Bowels have been obstinately constipated. (See Record attached)

Mar 28 March 28/93. Is almost nightly more or less restless, but quiet, sleeping from none at all to 6 or 7 hours.
Lies in bed comparatively quietly by day, moving very little; when questioned answers none at all, looking
blankly or occasionally smiles a little & attempts an indistinct reply - Has recently been visited
by his mother, for a number of days in succession.

Apl 22 April 22/93. Very often restless, somewhat noisy, at night. Sleeping from little to fairly well. Lies in bed,
not getting out. Has kept his bed by day. Is happy, laughing & attempting to talk some. Has had "spells" of
pounding himself & seems frightened at times by hallucinatory sights. Has gained in flesh. Bed sores is healing.
Is visited about every other day by his mother; this, for some time past.

May 19/93 May 19/93. Mm. Right side of face appears somewhat swollen. May 22/93. For first 3 weeks in the
part 4, sleep was quite poor, only from 2 to 4 hours at night, being restless & somewhat noisy - for the
last week, has been more restful at night and has slept better (5 to 8 hours each night). Is still confined to
his bed; lies there quietly; in a typically paretic way, prone on his back. Is failing rather slowly;
Symptoms are unchanged. Answers questions in a jerky, irritable way - Habits have become quite dirty.
" 25 His mother still keeps up her regular visits to patient - (See attached record.) - May 25/93. Back is
" 31 becoming quite sore; probably from lying continually upon it. May 31/93. No material change.

June 6 June 6/93. Has been restless & noisy, the greater portion of the past few days. Today, visited by father.
" 8 June 8/93. Takes what nourishment is given him. Bowels, at times, constipated. Is full of
" 12 delusions. Talks of his "big trunk," at times. June 12/93. Is restless & uneasy. Secretes thick
" 18 mucus in throat. June 18/93. Has lost 8 pounds in weight in past 24 weeks
" 30 June 30/93. Sleep & rest at night have continued quite poor, patient sleeping only from 2 to 4 or 5
hours in each, rarely 6 or 7 hours. Has frequently been reported as noisy, sometimes quite so,
on many of the nights. Occasionally falls out of bed. Is dirty in habits.

July 2 July 2/93. Eyes are so; probably from irritation by his own hands. Has had muscular twitchings.
" 7 Shows less of intelligence now. Has difficulty in swallowing, at times. July 7/93. Bed-
" 10 sore about the same. Is fairly quiet of late. July 10/93. Has slept more quietly in bed.
" 20 For past few days, has been more paretic & helpless. July 20/93 Has had quite frequent
" 31 twitching - "spells." July 31/93. Patient's rest at night has continued very much broken & sleep
has been quite poor; sometimes sleeping from 2 to 3 or 4 hours; at others, not sleeping any; restless,
noisily talkative, when awake. Is still confined to his bed. Lies there sometimes quietly; again
is very restless. Is becoming more & more paretic & helpless. Has great difficulty in
swallowing, at times. Twitching "spells" continue. Habits are very dirty. (See attached record).

Aug 9 Aug 9/93. Sleep this month, has continued poor; in the average, only 1 to 2 hours each night. Patient
takes a reasonable amount of nourishment, chiefly Eggnog. Bowels are constipated. Catches

(carried to page 380)

Personal and Medical History of Jens Guvene

(Farm Name)

Whole No. 3240.
Residence, Town of Ithaca
Date Admission, 21st January 1893.
Admitted by, D. Phelps Hour, 2 PM
How Sent, C. W. Pye, Court Comm. Tioga County
Sex, male
Age, 33
Civil Condition, married
Children, one child
Age Youngest Child,
Occupation, Farmer
Degree Education,
Profession Religion, Not a Church member
Habits, Has always been a hard drinker
Nativity, Norway
Physicians Committing, C. V. Lynde and A. J. Schmidt
Correspondents, (See Note Book)

No. for Year, 152
Insane Relatives, Insanity not hereditary.
Cause Exciting, Excessive drinking + "Keely treatment"
Cause Predisposing, not stated
Form, Mania - a - potu
Accompanying Bodily Disorder, Not so far as known
Suicidal or Not, Threatened; propensity now active.
Date of this Attack, about 10 days ago
Duration, about 10 days
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 33 Years
Time of Leaving, May 18" 93
Time in Hospital, 3 ms. 27 ds.
Result, Died
Pulmonary Tuberculosis.

EXAMINATION ON ADMISSION.

Exd by D Baker Jany 27/93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Fairly active

MEMORY:
Past Events,
Recent Events, Good
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Fairly alert
Correct or Illusive, Fairly Correct

REASONING POWER:
Ordinary Subjects,
Own Mental State, Seems to reason well
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Has a cough. Also shortness of breath on exertion. Used to have drink habits. Took the "Keely treatment" recently. Came back only about 20 days ago. Caught this cold there, while bathing. When he got there spells, which brought him here, was afraid he would do himself harm + the Asst Physician sent him here —

EMOTIONAL STATE:
Normal, Calm, Fairly Conors
Indifferent,
Exalted,
Depressed, Lachem, by spells.

DELUSIONS:
Systematized or Not, None detected
Special Subjects,
Transitory or Not,
HALLUCINATIONS: had "of hearing" possibly "of sight"
ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Voluble

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 4 3/4 in WEIGHT, 130½ lbs (1/27/93) - (was brought in 135 - 140 lbs -) NUTRITION, below normal
WOUNDS OR ABNORMALITIES, none -
TONGUE, Tremors, Slight Coatings, Slight Promptness Movement, fairly prompt
PUPILS, Equality, Equal Size, abnormal
Response Light, readily Accommodation, None
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Finger to nose, Eyes shut, good
Legs, Standing a foot, does well - Standing, Eyes shut, fairly steady -
TREMORS, Hands, None Tongue, Slight
Facial Muscles, None, on intention General,
REFLEXES, Patellar, Equal; somewhat exaggerated; 7 - 8 Dr. Pt. Scale -
Other Reflexes,
ARTICULATION, Hesitating, None Slurred, fairly good
FACIAL EXPRESSION, abnormal
SENSIBILITY,
HEART, Sounds clear; heart accelerated
LUNGS, Has a cough; see daily record - Girth 35½ in Expansion 2½ in
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, yes	Careless,
BOWELS, Normal,	Constipated, yes	Irregular, yes
APPETITE, Good,	Medium,	Poor, rather
SLEEP, Good, fairly	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

1893

This man was brought here by Deputy A. J. Brien and P. Quveme, broker, Northfield. The following is his history. Is a farmer. Has always been a hard drinker. Supposed cause of this attack is excessive drinking and afterward a course of the "Keeley Treatment" for alcohol and tobacco habits. Time of attack is acute, paroxysmal. No bodily disease as far as known, nor disease. First symptoms were manifested about 10 days ago by a disposition to injure someone. This is 1st attack. He now wants to kill himself or people about him when these attacks come on; showing disposition to injure others still active. Propensity to suicide is now active; has often threatened to kill himself. Is not filthy or destructive. Has been just previous to coming here confined in City Jail. Took the "Keeley Cure" for 3 weeks, dating from Dec 17th 1892. Is a chronic drinker.

Jan 21/22 Jan 21/93. Admitted at 2 PM, today; was put upon B². PM. Pulse 90. Jan 22/93. Was restless for 2 hours, sleeping 6 hours last night. Coughed some during the night. AM. Constipated, given medicine
" 23 PM. Is vomiting & seems in pain. Jan 23/93. Restless for 3 hours, sleeping 4 hours, last night.
" 24 830 Am Pulse 92. Jan 24/93. Last night was restless for 9 hours, sleeping none at all; was greatly troubled by his cough. 830 Am. Pulse 82. Coughs badly at night; rales at apex, left lung; harsh murmurs in right, at apex in front. Is pale & thin - Put on medicines. Probably has
" 25 tuberculosis. Jan 25/93. Slept 4 hrs, was restless 4 hours, last night. 830 Am. Pulse 80. —
" 26 Is constipated. Jan 26/93. Passed a night similar to one preceding. 9 Am. Pulse 94. —
" 27/28 Jan 27/93. Rested fairly well last night, sleeping 7 hours. 9 Am. Pulse 78. Jan 28/93. Slept 5 hours last night, restless but 2 hours. 7.30 Am. Pulse 92. Bowels have not moved for 4 days.
" 29/30 Jan 30/93. Rested some better the past 2 nights, sleeping 6 hours in each, though somewhat restless and continuing to be troubled by his cough. 830 Am. Pulse 84. Jan 31/93. 830 Am. Pulse 84. T(e) 100.4.
Feb 1 Feb 1/93. 830 Am. Pulse 84. T(e) 100.4; 530 Pm. Pulse 96. T(e) 100.8.
" 2 Feb 2/93. 830 Am " 90 " 101.2; 530 Pm " 90 " 101.6.
" 3 Feb 3/93. 830 Am " 84 " 102.4 —
" 4 Feb 4/93. 830 Am " 76 " 101.8 —
" 7 Feb 7/93. Am. Was permitted to dress & get up for a while today. Remained up about 2 hours when he had a hard spell of coughing & went back to bed.
" 11 Feb 11/93. Was taken with colicky pains last night; says has had them several times before.
" 20 Feb 20/93. For past 3 week, has continued more or less restless at night, sometimes getting into bed & sleeping in the early part of that period, only from 3 to 5 hours; later, however, resting better & sleeping 6 or 7 hours, each night. Pm. Was up about 1½ hours today. Feb 21/93. Passed a very poor
" 21 night, last night, being restless all night; coughing considerably & occasionally sweating & vomiting.
" 24 Feb 24/93. For past 3 nights, has continued restless & uneasy, sleeping poorly.
" 25 Feby 25/93. Summary. Patient has had a cough ever since admission. This has troubled him a great deal, especially at nights. Was up & around in the hall up to Jany 30th, at which date he went to bed & has since remained there with the exception of a couple of hours in 2 different days. He has been quiet, causing little or no trouble in coming for him; talks fairly freely; no delusions noted - Takes food regularly & in fair quantities, though he is rapidly losing in flesh. Is good natured & speaks freely about his own condition. Has been much troubled with

NAME. Jens Quveme
(in index & Lothing +)

DATE, 1893.	WEIGHT.	PULSE.	GAIN.	LOSS.	
Jany 24th	131	—			With cloth
" 27 "	130½	—		½	
+ Feby 1	120½			2½	
+ " 16	116¼			4¼	
+ " 24	111			5¼	
+ Mar 2d	107	110		4	
+ " 11th	105			2	
+ " 18th	100½			4½	
+ " 25th	101¾		¾		
+ April 4th	99			2¾	
+ " 11th	96½			2½	
+ " 18th	95			1½	
+ " 25	94			1	
× May 3d	94	94		—	
+ " 15	85	—		9	

SH OF Jens Quveme

BY NURSE	NOTES BY PHYSICIAN.
Pains of bowels being too free	
Engaged Dressing. Has a slight passage of bowels Coughing	
Bowels moved freely Coughs considerable 8 PM. daily.	
Slight passage	
Gave Sponge bath. Bowels Moved freely Bowels too free	
Pains of Pain in chest	
Has B. Rales poor - Loose	Milk etc.

8	700	102	98	38	
	600	113	100.5	40	
9	700	86	95.6	40	
10	600	138	105.2	44	Coughs a great deal and raving phlegm.
10	200	112	99.2	38	
	600	126	102.7	40	
11	700	94	95.5	32	Gave Sponge bath.
	600	132	103	48	
12	200	88	95.4	38	Takes Nourishment fairly Is weaker & in his Condition
	600	100	100	34	Looks very bad - Is very distressed state. Rapid pulse & labored breathing at times -
13	700	100	97.2	38	
	600	94	96.2	40	
14	700	120	98.6	40	
	500	122	95.4	50	
15	700	90	95	32	Weight 85 lbs. Ate no breakfast. Sleeps and perspires a great deal daily. (3) Bowels moved
16	500	112	97.2	48	Coughed almost all day. Ate but very little
	700	118	94	42	
	500	134	103	50	(2) Bowels moved regularly
17	700	110	97.2	38	Appears to be growing weaker steadily
	600	134	103.2	48	
18	700	122	98	40	Expired 11.55 A.M. The most notable thing in his case has been the extreme variations of temperature in his living so long in such desperate state. Mind was quite clear to the last.

1893

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delusions noted - Takes food regularly & in fair quantities, though he is rapidly losing
in flesh. Is good natured & speaks freely about his own condition. He has been much troubled with

CLINICAL NOTES IN THE CASE OF Jens Jensen

MO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
1893 April	18	700	110	96.2	32		
		500	142	105	54	Complains of bowels being too free	
	19	700	94	97.6	36		
		500	108	98.6	38		
	20	700	94	97.2	34	Coughing a good deal during morning.	
		500	140	103		830 Am. Had a slight passage of bowels	
	21	700	98	97.8	32	1 PM. Coughing	
		500	120	102.6	42		
	22	700	88	97.2	30		
		500	112	101.6	34		
	23	700	86	97.2	32	8 a m Bowels moved freely. Coughs considerable	
		500	118	102	40	between 4 and 8 P M. Chills.	
	24	700	96	98	32		
		500	114	101.4	32		
	25	700	110	100.4	40	Had slight passage	
		500	106	100.4	64		
	26	700	104	99.2	38		
		500	130	105	48	7 a m Gave sponge bath	
	27	700	74	94	26	330 P M Bowels moved freely Bowels too free	
		500	115	101.4	40		
	28	700	102	98	44		
		500	132	104.4	40		
	29	700	80	93.8	30		
		500	110	42	100.8	4 Complains of pain in chest	
	30	700	94	97.2	36		
		500	130	105.2			
May	1	700	100	98.2	36	Put on the B. Nail	
		500	115	104.6		Appetite poor - Loves	Milk tote
	2	700	76	98.8	34		
		500	136	105.2	44		
	3	700	94	97	34		
		600	120	102	46		
	4	700	102	98	36		
		600	113	102.4	36		
	5	700	92	98	38		
		500	121	103.1	48		
	6	700	92	98.2	30		
		600	117	104.2	52		
	7	700	92	96.6	36		
		500	130	103.8	36	Appetite poor	
	8	700	102	98	38		
		500	113	100.5	40		
	9	700	86	95.6	40		
		500	138	105.2	44	Coughs a great deal and raising phlegm.	
	10	700	112	99.2	38		
		500	126	102.2	48		
	11	700	94	95.5	32	Gave Sponge bath.	
		500	132	103	48		
	12	700	88	95.4	38	Takes Nourishment fairly well for one in his Condition	
		500	100	100	34	Took very feebly - A very distressing state. Physician	
						was called during night at times.	
	13	700	100	97.2	38		
		500	94	96.2	40		
	14	700	120	98.6	40		
		500	122	95.4	50		
	15	700	90	95	32	Weight 85 lbs. Ate no breakfast. Sleeps and Rests a	
		500	112	97.2	48	great deal during (3) Bowels moved	
	16	700	118	98	42	Coughed almost all day. Ate but very little	
		500	134	103	50	Bowels moved regular.	
	17	700	116	99.2	38	Appears to be growing weaker steadily	
		500	134	103.2	48		
	18	700	122	98	40	Expired 10.5 & 11.5 5 A M - The most notable	

things in his case have been the extreme variations of temperature & his living so long in such desperate state. Mind was quite clear to the last -

MEDICAL NOTES IN THE CASE OF Jers Duvene.

MO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE.	NOTES BY PHESICIAN.
Mar	21	7.30	94	98.4	30	7.30 AM Resting well Morning. 2 PM Coughing Continually and Evening. Phlegm 4.30 Still Coughing and Complaining of Pain in Side 5 Gave Morphine tab.	
		5.00	136	103.6	50		
						6 Restless Moved to Ease resting	
	22	7.30	90	97.4	34	He feels fairly well this Morning Rested well	
		5.00	132	103	46	up to 4 PM. (5) Coughing Continually and Complaining of	
			46			Pain Cued & And Pain in Side gone Gave Morphine tab	
	23	7.30	100	99.6	38	Rested Well until 4 PM then Commenced Coughing	
		5.00	134	102.6	60	(6) Still Coughing gave Morphine tab.	
	24	7.30	104	99.6	36	(5) Resting Coughed Continually from 10 to 7 PM	
						Gave Morphine tab.	
		5.00	104	100.5	38		
	25	7.30	98	98.8	34	8.30 Coughing Continued unable and raving Phlegm.	
		5.00	124	104.6	40	Had a fairly good afternoon	
	26	7.30	100	99.4	32	9 AM. Restless. Has had a very hard afternoon	
		5.00	140	103.8	36	6 PM Gave Morphine	
	27	7.30	96	99.6	34	7.30 Bowels Costive (9 PM Dose of Oil) Had a Number of Coughing	
		5.00	120	103.6	40	Spells this PM. and (6 PM) Complaining being Cued at times (6 PM)	
						Bowels Moved	
	28	7.30	100	99.2	36	7 Resting (11) Bowels Moved (PM) Gave Sponge bath	
		5	122	105	42	4 Coughing Continuously	
	29	7.30	102	99.4	34	9 AM Bowels Costive 9 PM Gave Enema of Soap Suds had no	
		5	138	105.2	48	effect on her Coughed Considerably this P.M.	
	30	7.30	104	97.8	40	1/2 mg Coughing as Injected as in the past Eating some	
		5	132	106	48	Solid food for Supper. 12 Night Gave a hard spell of Coughing	
						Morphine tab.	
	31	7.30	90	96.4	32	4 P.M. Continually Coughing.	
		5	146	106	54	7 " Still " "	
April	1	7.30	81	97	31		
		5.00	147	106.4	43		
	2	7.00	94	98.8	37		
		6.00	135	106.4	54		
	3	7.30	110	101.4	40		
		6.30	33	104.8	68		
	4	7.30	102	99.6	30	7.30 Bowels Costive	
		5.00	130	104.4	36	2.30 Enema of Soap Suds bowels moved Fairly good day.	
	5	9.30	124	98.4	34	Says he rested a great deal during the Night	
		5.00	106	98.4	38		
	6	7.00	100	98.8	32	Bowels Costive (6.30) PM. Gave dose of for bowels.	
		5.00	120	101	42	3 Complains of feeling Sick to Stomach.	
	7	7.00	90	97.2	35	2.30 Bowels Moved.	
		5.00	142	106.4	48	4 P.M. Coughing Continually and raving Phlegm.	
	8	7.00	100	99.4	36	8.30 Sponge bath	
		5.00	118	102.8	30	6 PM Coughing Continually	
	9	7.00	100	99.4	34	4 PM Coughing has Chills and Perspiring (5.30) Pulse	
		5.00	138	103	42	Coughing Gave Morphine tab	
	10	7.00	100	98.4	42	1 Bowels Costive	
		5.00	114	102.2	46	Has had a very hard day.	
	11	7.00	80	98.8	36	11 A.M. Bowels Moved freely	
		5.00	130	102.6	56		
	12	7.00	114	100.2	40	3 PM. Bowels moved freely 5 PM Coughing Continu-	
		5.00	140	105	52	ually and groaning.	
	13	7.00	100	97.6	36	6.30 Bowels moved freely.	
		6.00	110	102	36		
	14	7.00	100	95.6	36		
		5.00	144	106.8	42		
	15	7.00	90	96.8	32	7 am. Bowels moved freely 10 Bowels Moved.	
		5.00	146	105	42		
	16	7.00	90	96.4	32	7 am. Bowels moved 3 PM Bowels moved freely Says his bowels	
		6.00	128	102.4	50	are too loose. 3.30 groaning. (4) Bowels moved.	
	17	7.00	106	99.6	34		
		5.00	136	104.8	68		

Jan 28/93. Was restless for
Am. Constipated, given medicine
s. Sleeping 2 hours, last night.
4 hours, Sleeping none at all; was
gh badly at night; rales at apex, left lung;
thin - Put on Medicines. Probably has
was restless 4 hours, last night. 8.30 am. Pulse 80. —
passed a night similar to one preceding. 9 Am. Pulse 94. —
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Feb 2/93. 8.30 Am " 90 " 101.2; 5.30 Pm " 90 " 101.6.
Feb 3/93. 8.30 Am " 84 " 102.4 —
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Feb 20/93. For past 3 week, has continued more or less restless at night, sometimes getting out of bed, sleeping in the early part of that period, only from 3 to 5 hours; late, however, resting better + sleeping 6 or 7 hours, each night. Pm. Was up about 1½ hours today. Feb 21/93. Passed a very poor night, last night, being restless all night; coughing considerably + occasionally sweating + vomiting.
Feb 24/93. For past 3 nights, has continued restless + uneasy, sleeping poorly.
Feb 25/93. Summary. Patient has had a cough ever since admission. This has troubled him a great deal, especially at nights. Was up + around in the hall up to Jany 30th, at which date he went to bed + has since remained there with the exception of a couple of hours on 2 different days. He has been quiet, causing little or no trouble in coming for him; talks fairly freely, no delusions noted - Takes food regularly + rei fair quantities, though he is rapidly losing in flesh. Is good natured + speaks freely about his own condition. Has been much troubled with

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DETAILED HISTORY OF SICKNESS OF MR. J. Quam.
DIAGNOSIS. March 1 — 93

DATE	HOUR	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	OTHER DATA
Mch 1	7.30	108	140		101.8			8 AM Groaning & Coughing 2 AM. Has very hard Cough
	5	132	150		105.6			ing spell and Pains Considerable phlegm. 6 PM Bowels Moved
" 2	7.30	126	142		103			7.30 AM Bowels Moved. 5 P.M. 5.30 AM Had Cough
	8	128	140		105.4			sweating spells
3	7.30	110	140		101.6			Says it is difficult for him to breath at times
	5	130	148		101			Has had a cough bad day but appears to feel better in the evening
4	7.30	120	142		104.2			appears quite when bottle this Morning. Has had a very
	5	104	134		102			Good day rested Considerable and Coughed little in Am
								Person with yesterday
5	7.30	90	130		98.6			Pains good forenoon but a poor
	5	148	132		105			afternoon
6	7.30	108	140		102			A.M. Groaning and Coughing Considerable
	5	116	142		101			11 AM Gave Laxative Carissa Has been sleeping
7	7.30	110	140		101.6			the greater part of the day and Coughed little
	5	134	136		100.2			Bowels Moved 2 times during the night
7								says he does not feel so well this morning.
								has had a very bad day Coughed Continuously
7								nausea & Vomited at times
8	7.30	114	130		101.4			7.30 A.M. Inflamatty Coughing. Has chills gave him
	5	108	134		101.6			hot whiskey and applied hot hand bags.
9	7.30	102	136		98.6			Complains of being Cold and perspiring. Slight pains
	5	136	148		102			Morning reported Never Left has Coughed
								Continually wet the afternoon.
10	7.30	116	140		103.2			Nose bled 5 times during the early part of the Morning
	5	124	140		104			Complaining of pain in stomach day & Constipation
								10 AM. Gave Clover Salts. 4.30 PM. Had Coughing
								and Vomiting spells.
11	7.30	96	136		100.2			Bowels Moved during the night & Resting quietly
	5	116	140		103			act a.m. Had Nose bled. Had a very poor after
								Noon Cough. Continually.
12	7.30	116	140		102			Has Nose bled in early part of Morning
	5	100	150		100.8			3 PM Coughing & Vomiting. Has had a very hard day
								Patient has been expected to die for over
								a week - Exhibits remarkable strength of mind
								quite clever in insanity but does except
								by weeping & moaning
13	7.30	100	138		101			Complaining of feeling Cold and perspiring.
	5	99	136		100			Coughing had groaning very hard during PM.
14	7.30	186	130		98.4			8 Pains & pain & feeling Cold.
	5	126	128		104			12 PM Coughing Vomiting and Nose bleeding
15	7.30	100	138		101.2			appears Some better this Morning. Has been very
	5	136	146		106			bad this day Coughing Considerable and
								raising phlegm. P.M. Bowels moved.
16	7.30	102	138		98			8 Groaning and had gave Sponge bath.
	5	126	146		104			9 Coughing Continually also Groaning
17	7.30	114	136		101.6			Bowels Moved
	5	134	146		104			Very bad day Coughed Continually
18	7.30	186	130		98			8 AM appears Some better. Resting. Had a fairly good
	5	138	152		106			forenoon but a very poor afternoon. 7 PM Bowels Moved.
19	7.00	104	138		99.2			
	5	150	142		103			
20	7.30	100	137		98.6			7 AM Resting. Complains of pain in left side & arm. 2 PM.
	5	140	154		103			4.30 P.M. Coughing Continually And Complains of Bad pain
								in left side. Applied Mustard Plaster and gave
								Morphine Sitd. which relieved him.

Jan 28/93. Was restless for ... Am. Constipated, given medicine ... sleeping hours, last night. ... hours, sleeping none at all; was ... badly at night; rales at apex, left lung; ... am - Put on medicines. Probably has ... was restless 4 hours, last night. 8.30 am. Pulse 80. — ... passed a night similar to one preceding. 9. Am. Pulse 94. — ... fairly well last night, sleeping 7 hours. 9 Am. Pulse 78. Jan 28/93. ... at night, restless but 2 hours. 7.30 Am. Pulse 92. Bowels have not moved for 4 days. Jan 30/93. Rested some better the past 2 nights, sleeping 6 hours in each, though somewhat restless and continuing to be troubled by his cough. 8.30 am. Pulse 84. Jan 31/93. 8.30 am. Pulse 84. Tem 100.4.

Feb 1 Feb 1/93. 8.30 Am. Pulse 84. Tem 100.4; 5.30 Pm. Pulse 96. Tem 100.8.
" 2 Feb 2/93. 8.30 Am " 90 " 101.2; 5.30 Pm " 90 " 101.6.
" 3 Feb 3/93. 8.30 Am " 84 " 102.4 —
" 4 Feb 4/93. 8.30 Am " 76 " 101.8 —
" 7 Feb 7/93. Am. Was permitted to dress & get up for a while today. Remained up about 2 hours when he had a hard spell of coughing & went back to bed.
" 11 Feb 11/93. Was taken with colicky pains last night; has had them several times before.
" 20 Feb 20/93. For past 3 week, has continued more or less restless at night, sometimes getting off to sleeping in the early part of that period, only from 3 to 5 hours; late, however, resting better & sleeping 6 or 7 hours, each night. Pm. Was up about 1½ hours today. Feb 21/93. Passed a very poor night, last night, being restless all night; coughing considerably & occasionally sweating & vomiting.
" 24 Feb 24/93. For past 3 night, has continued restless & uneasy, sleeping poorly.
" 25 Feb 25/93. Summary. Patient has had a cough ever since admission. This has troubled him a great deal, especially at nights. Was up & around in the hall up to Jany 30th, at which date he went to bed & has since remained there with the exception of a couple of hours on 2 different days. He has been quiet, causing little or no trouble in caring for him; looks fairly healthy, no delusions noted - Takes food regularly & in fair quantities, though he is rapidly losing in flesh. Is good natured & speaks freely about his own condition. He has been much troubled with

...ver and some with night-sweats. Is evidently tubercular.

MEDICAL NOTS IN THE CASE OF Jens Juvene

MO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
Jan	1	830 am	84				
	2	830 am	90	1062			
		5 PM.	20	1016			
	3	8 am	84	1024		Coughs a great deal	
	4	8 am	76	1018		bowels move slightly; rather constipated	
	5	8 am	80	1006		Appetite rather poor	
	6	8 am	90	100.			
	7	8 am	86			Appetite good	
	8	8 am	92			Short & dry cough. Pain in R. side & back. Bowels moved.	5 P.M. vomited - complained of pain in abdomen - gave him medicine.
	9	8 am	72				
	10	8 am	76	99.6		appetite poor. Bowels constipated	
	11	8 am	80	100.6		milk	
	12	830 pm	82	100.2			
		8 am	80	99.8			5 P.M. vomited. Seems to have a good deal of phlegm. Says he feels much relieved from cough. Cold.
	13	8 am	78	99.2		bowels moved slightly; coughs	
	14	8 am	84	99.8		Bowels moved	
	15	8 am	78	99.6		8 P.M. milk	
	16	8 am	82	99.6		Breakfast refused. Wt 116½ lbs. Bowels moved fairly freely	
	17	8 am	88	99.8		Appetite poor	
	18	8 am	84				
	19	8 am	88			Appetite good	
	20	8 am	102	1018		Has coughed considerable coughed very hard last night - was given med, was up about 2 hrs. yesterday.	
	21	8 am	99	99.2			
		1 PM.	108	102.2	40	Coughs spunk of time	
	22	8 am	98	99.6	42	not much pain except middle	
		1 PM.	120	38	103.8		
	23	8 am	88		99.2		
	24	8 am	114	104			
	25	8 am	114	103.2			
	26	8 am	88	99.2		Coughs less. Appetite poor	
	27	8 am	94	101			
	28	8 am	95	100.6	43	Continually coughing. Resting & Complains	
		5 PM.	132	104.6	48.	of being cold. Ab. temp.	

Juan Jr.

...restless for
...sipated, given medicine
... hours, last night.
...sleeping none at all, was
...at night; rales at apex, left lung;
...Out on medicines. Probably has
... 4 hours, last night. 830 am. Pulse 80. —
... similar to one preceding. 9 Am. Pulse 94. —
...night, sleeping 7 hours. 9 Am. Pulse 78. Jan 28/93.
...at 2 hours. 7.30 Am. Pulse 92. Bowels have not moved for 4 days.
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" 90 " 101.6.

Feb 1 Am
" 2
" 3 Feb 3/93
" 4 Feb 4/93
" 7 Feb 7/93. Am. ...get up for a while today - remained up about 2 hours when he had a hard spell ...sent back to bed.
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March 28/93. Is daily confined to his bed, suffering from quite pronounced & rapidly advanced Consumption. Pulse varies from about 100 to 140. Temperature ranges from 98 to 106, very remarkable daily variations being noted. Respiration much accelerated & oftentimes labored & dyspnoeic (see attached record for details) - Is at times troubled with harassing, persistent severe cough. Rest & sleep are oftentimes very much disturbed by restlessness & cough. Patient is delirious & shows some mental disturbance. Is not depressed, but on the contrary, claims that he feels quite well.

New April 2/93. Mentally, patient is quite clear, manifesting no definite delusions, talking calmly, coherently & rationally; neither excited nor depressed, nor markedly enfeebled. Physically, suffers from quite rapidly progressing and far advanced pulmonary tuberculosis. Has a harassing cough, some dyspnoea & mucoid expectoration, some moaning, begun, usually, in the afternoon & lasting along into the night, disturbing his sleep. Has also quite profuse sweatings; alternation of diarrhoea & constipation. In the latter part of the night & the forenoons. He is quite easy & free from cough. Has had some remarkable daily ranges of temperature, Eg from 98 in the morning to 106 in the evening. (See attached Record for details) —

" 27 April 27/93. Puton whisky & malt nut & cod. liver oil. April 26/93. Was today visited by his brother-in-law.
May 1 May 1/93. Sleep and rest at night have continued much broken by his coughing and groaning - he not sleeping more than for from 2 to 3 or 4 hours at night. Alternations of diarrhoea and constipation have also continued; also profuse sweating; Patient sleeps some in the day time, when he appears more free from cough. Has, all along, been quite calm, coherent & rational. Daily ranges of temperature have continued quite marked. Pulse, both day and night, has also been very much accelerated. Has taken nourishment (chiefly milk) fairly well. At times, looks very badly; in a very distressing state. Physically, very pale & has almost appeared to be dying, at times.

Patient steadily grew worse and died at 11.55, this morning (See record attached).

The most notable things in patient's case have been, the extreme variations of temperature and his living so long in such a desperate state. Mind was quite clear, to the last.

Friends and relatives were, from time to time, notified of patient's condition. Word was received from them & they remains here, which was accordingly done.

- Died -

Personal and Medical History of Laurence McLaughlin

Whole No. 3241.

Residence, Rollingstone, Winona Co. Minn. 3241

Date Admission, 23rd January 1893.

Admitted by, D. Kilbourne Hour, 12 M.

How Sent, N. L. Buck, Jr. Winona County

Sex, Male

Age, 35

Civil Condition, Single

Children, —

Age Youngest Child,

Occupation, Farmer

Degree Education,

Profession Religion, Yes. Catholic

Habits, Good

Nativity, Minnesota

Physicians Committing, F. Staples & L. A. Kelly

Correspondents, Mary Ann Kelly
Minnesota City, Minn

No. for Year, 153.

Insane Relatives, brother John, now at Rochester; Insanity hereditary

Cause Exciting, Depressed condition of nervous system

Cause Predisposing, Heredity probably

Form, Melancholia – Chronic

Accompanying Bodily Disorder, no

Suicidal or Not, Threatened but never attempted.

Date of this Attack, about 5 years ago

Duration, about 5 years

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 30.

Time of Leaving, July 17. 1899

Time in Hospital, 6 yr. 5 m. 24 d.

Result, Died. Tuberculosis Pulmonalis.

EXAMINATION ON ADMISSION.

= Exd by Dr. Baker Jany 27/93 = MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events,

Recent Events, Seems to approximate facts

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Poor

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm,

Indifferent, largely.

Exalted,

Depressed, has some depressive ideas

DELUSIONS:

Systematized or Not, more definite detected

Special Subjects,

Transitory or Not,

HALLUCINATIONS: More

ILLUSIONS: More

CONVERSATION:

Coherent or Incoherent, Coherent as far as it goes.

Voluble or Reticent, Very reticent; merely talks in answer to questions –

Personal and Medical History of Laurence McLaughlin

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 9½ WEIGHT, 143½ lbs NUTRITION, rather poor. Is pale.

WOUNDS OR ABNORMALITIES, ? probably none.

TONGUE, Tremors, very tremulous Coatings, none Promptness Movement, unsteady; fairly prompt

PUPILS, Equality, Equal Size, slightly contracted

Response Light, none Accommodation, (?)

SIGHT, probably fairly good

HEARING, somewhat impaired

COORDINATION, Arms, finger to nose, Eyes shut, fairly well done.

Legs, Standing in front, fairly well – Standing, Eyes shut, Sways slightly –

TREMORS, Hands, none Tongue, very tremulous

Facial Muscles, cannot control his face General,

REFLEXES, Patellar, Equal – much exaggerated (9-10 D. Ft. Scale)

Other Reflexes,

ARTICULATION, Hesitating, slightly Slurred, slightly

FACIAL EXPRESSION, Dull

SENSIBILITY,

HEART, Seems good

LUNGS, Seem good – Chest 35 in. Expansion –

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, fairly Careless,

BOWELS, Normal, probably Constipated, Irregular,

APPETITE, Good, yes Medium, Poor,

SLEEP, Good, yes Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters, 1 Brother is here in hospital –

Personal and Medical History of Laurence McLaughlin

1893

This man was brought here by Sheriff J.T. Gay, with the following history. By occupation a farmer; habits good. Insanity is hereditary (brother John now at Rochester Asylum). Supposed cause of this attack (the 1st) is a depressed condition of nervous system; form is Chronic, depressed, paranoeal. No accompanying bodily disorder. First symptoms were manifested about 5 years ago; became depressed; insanity is now manifested by mental depression; outbursts of temper, and fear. Is disposed to injure others, from sudden passion. Suicide has been threatened but never attempted. No offilthy & destructive habits. Fell 7 feet, hurt his head w hard substance, about 16 years ago. Has not been restrained or confined. Was treated by Dr. Staples 4 years ago; no particular effect.

Jan 24 Jan 24/93. Has quiet & slept 8 hours last night. 830 Am P 88. T 100. Wt today 142 pds.
" 25 Jan 25/93. Again passed a restful night; slept 8 hours, last night. 830 am. Pulse 70. T 99.4.
" 26 Jan 26/93. Slept well all last night. 9 Am. Pulse 80. Jan 27/93. Has quiet & restful, sleeping
" 27 8 hours last night. 9 Am. Pulse 70. Jan 28/93. Quiet all last night, sleeping 8 hours.
" 29/30/31 7.30 Am. Pulse 78. Jan 29/93. 830 Am. Pulse 102. Jan 30/93. 830 Am. Pulse 88. Jan 31/93. 830 Am. P 76.
Feb 1 Feb 1/93. 830 Am. Pulse 78. Is somewhat pale & anaemic. Put on Codliver ob. Wt today 140 pounds.
" 2/3 (a loss of 2 pds). Feb 2/93. 830 Am. Pulse 104. Feb 3/93. 830 am. Pulse 104. T 100.4. —
" 4/6 Feb 4/93. 830 Am. Pulse 76. T 99.8. Feb 6/93. Wt 142 pds (a gain of 2 pds)
" 7/25 Feb 7/93. Wt today 141½ pds. (loss ½ pound). Feb 25/93. Has ever since admission, been uniformly quiet and restful at night, apparently sleeping well (almost invariably 8 hours) each night, only on 1 or 2 nights being slightly restless, yet then sleeping 6 or 7 hours each night. Sup daily, out on the ward, dressed, quiet and very dull. Sits apart from the others, silent & depressed, looking down upon the floor. Appetite has been fair. Still has a pale & anaemic appearance. Is on medicine. No definite delusions have yet been detected. —
Mar 1/4 March 1/93. Wt 141½ pds. Pulse 84. March 28/93. Has lately been more or less restless at night. Always quiet & has slept from 5 to 7 hours. Somewhat restlessly active, aimlessly so; doing no work. Talks more and scarcely answers greetings or avoids looking his addresser in the face.
Apr 1/12 April 4/93. Wt 142 pds. Pulse 73. April 12/93. Ate no breakfast this morning, assigning no definite reason.
Apr 24 April 24/93. Continues as described above.
May 3/7 May 3/93. Wt 139½ pds. Pulse 74. May 7/93. Refused sample of urine, for testing.
" 22 May 22/93. Seems now, to sleep quite well at night. By day, is quiet & well-behaved. Talks more promptly than formerly. Works more; goes out walking; appetite fair. Still depressed. Am. Is in bed, with clothes on; says "he is not feeling well". Pulse 60. PM. Has been in bed all day. Pulse 72. T 99 100. —
" 26/31 May 26/93. Has remained in bed the past few days. Gets up to day. Feels better. May 31/93. Apparently sleeps well at night. Appetite changeable. Is constipated, at times. Also has some cough. Sits quietly on a bench, most of the time, when on hall, but for past few days has been somewhat restless, walking the floor. Fairly clean & tidy. Is very stubborn.
June 5/30 June 5/93. Weight 141 pounds. June 30/93. Appetite medium. No cough now noticed: bowels more normal. Sits on a seat, most of the time, inward, with head down, gazing vacantly at the floor. Goes out walking with the rest. Very reticent, talking but little. Seems depressed.
July 1/31 July 1/93. Wt 137½ pounds. No special change in either conduct or behavior, during the past month.

CLINICAL NOTS IN THE CASE OF Laurence McLaughlin

MO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
Feb	1	830 Am	76			Appetite fair	Takes medicine
	2	830 Am	104			Sits on a seat	
		830 PM	~~104~~ 114			most of time	
	3	830 Am	104	100 4			
	4	830 Am	72	99.8		Quiet: dull?	
	5	8 Am	76	99			Quiet, but very dull. Sits silent & depressed, looking at floor
	6	8 Am	70	100.6		Appetite fair: medicine	
	7	8 Am	72				
	8	8 Am	80			Appetite & medicine	When spoken to he mumbles a few words that can't be understood.
	9	8 Am	68				
	10	8 Am	78			quiet: takes medicine pretty	
	11	8 Am	76				
	12	8 Am	94				
	13	8 Am	96			Appetite fair	No change: sits quietly on a bench most of the time.
	14	8 Am	80			Bowels moved	
	15	8 Am	84			Stuff low: quiet	
	16	8 Am	80			Wt. 142	
	17	8 Am	88				
	18	8 Am	68				
	19	8 Am	72				
	20	8 Am	80			Eats fairly well	
	21	8 Am	78				Physical condition about the same as when he entered.
	22	8 Am	78				
	23	8 "	80				
	24	8 "	68				
	25	8 "	72				
	26	8 Am	84				
	27	8 Am	96	98.4			
	28	8 PM	96				
Mch	1	8	88			Appetite variable as ever	
	2						
	3						
	4						
	5						
	6						
	7						
	8						
	9						
	10						
	11						
	12						
	13						
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	31						

McLaughlin L.

Jan 6/93 Trans. to Infirmary. Has been failing some during past few days. Jan 28/93 Visited by relatives. Temp. up to 102° during afternoon. Lies quietly in a dull, stupid way. Coughs & expectorates some. Feb. 1 Wt. 114th Some rise of temp. Mch. 1 Wt. 132d. Temp. more nearly normal Mch. 18 Now up on ward. Coughs some but has gained in might. April 1 Wt. 131st Has gained considerably.

See Folio 368 Transfer Book A.

1893

Jan 25 Jan
" 26 Jan
" 28 8 h
" 29/30/31 7.30.
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June 5/30 June

fits on a seat. Most of the time, onward, with head down, gazing vacantly at the floor. Goes out walking with the rest. Very reticent, talking but little. Seems depressed.

July 1/31 July 1st/93. Wt 137½ pounds. No special change in either conduct or behavior, during the past month.

1893 Aug 3/93. Wt 136½ lbs. Aug 31/93. Appetite good; bowels free. Talks but very little. Does no work. Stupid, and stubborn at times.

Sept/93 Sept 4/93. Pulse 84. T 99.6. Sept 8/93. Wt 137 lbs. Was to-day moved from Dr. to B.[3]

" 30 Feb 30/93. Does not change much, if any. Hardly ever speaks to any one. Walks the hall aimlessly. Habits clean. Disinclined to work.

Oct 31/93 Oct 1/93. Wt 143 lbs (a gain of 6 lbs). Pulse 92. Oct 31/93. Appetite good; bowels regular. Quiet & well-behaved. Very reticent; stupid & dull. Habits are clean.

Dec 31/93 Dec 31/93. Was transferred to Annex on 4th inst. Condition has not changed any, in past 2 months.

Jan 31 Jan 31/94. Patient seems about the same from month to month. Appearance quite contented here.

Feb 28/94 Feb 28/94. Quiet & inoffensive; sits in one place nearly all the time, while on ward; seldom speaks; laughs occasionally in a silly manner. Does no work. Health is apparently good. Habits cleanly.

Mar 31 March 31/94. No change to report. Dull, stupid; disinclined to help any with the work.

Apr 30 April 30/94. Patient remains in about the same condition from month to month. Seems contented here.

May 31 / June 30 / July 31 During these 3 months, behavior & conduct has changed some; he is stubborn & at times, is inclined to fight; sits in one place most of the time & seldom speaks. Does no work. Habits are clean. Is neat & tidy in appearance. Health apparently good. — Makes no improvement.

Aug 3 / Sept 30 / Oct 31 During this period, patient has been, generally, quiet & well-behaved. Sits in one place, most of the time & seldom speaks. He laughs heartily at times. Is rather demented. Shelling work, but does not know how. Habits clean but dress is rather untidy. Health apparently good. Seems quite contented.

Nov 30 / Dec 30 1894 / Jan 31 During these 3 months, no special change observable. He is very stubborn, at times, inclined to be troublesome & abusive. Speech is incoherent. Habits clean. Untidy in appearance. Is very reticent. Health seems good. Feb. March & April 30/95. No special change noticeable, during this quarter. Is quiet. Does no work. Stupid & dull. Speech is incoherent. Habits clean. Health apparently good. At times, stubborn & troublesome.

Feb / May 1 / June 30 During these 3 months, patient has been about the same in every way. Quiet & dull. Stupid & melancholy. Seldom speaking. Health seems to be good.

July 1 / Aug 31 / Sept 30 / Oct 31 During the period (Aug. Sept & to Oct 31/95) no change has taken place in patient's condition either mentally or physically. He has been quite stupid and stubborn: seldom speaking: indolent: has done no work: Habits clean: Health good.

Nov / Dec 31 / Jan 31/96 Nov 4/95. Wt 145 pds. Pulse 80. Nov, Dec & to Jany 31/96. No change noticeable during the period. Is quiet & demented: usually sitting, with his head down: indolent: has done no work: Habit clean, but dress untidy: health apparently good.

May 1/96 to Aug 31/97 Summary Nurses Notes by Dr Phelps. Patient chronic, quiet, rather stupid & stubborn & at times irritable. No bodily illness noted: Wt 143 to 147 lbs. Aug 31/97 Wt. 139[#] Oct 31/97 Health good. Will talk some. Neat in habits but stupid & inactive.

Jan 6/98 Trans. to Infirmary. Has been failing some during past few days. Jan 28/98 Visited by relatives. Temp. up to 102° during afternoon. Lies quietly in a dull, stupid way. Coughs & expectorates some. Feb. 1 Wt. 114[#] Some rise of temp. Mch 1 Wt. 122[#] Temp. more nearly normal Mch. 18 Now up on ward. Coughs some but has gained in might April 1 Wt. 131[#] Has gained considerably

See folio 368 Transfer Book A.

Whole No. 3242.
Residence, Wheeling, Minn.
Date Admission, 23rd January 1893.
Admitted by, Dr Kilbourne Hour, 2 PM.
How Sent, M. B. Chadwick, Jr P., Steele County
Sex, Male
Age, 28
Civil Condition, Single
Children, ——
Age Youngest Child,
Occupation, Farm Laborer
Degree Education,
Profession Religion, Not a Church member
Habits, Unknown
Nativity, Germany
Physicians Committing, A. B. Stewart and J. A. Adair
Correspondents, Mrs C. H. Hildebrant
Nerstrand, Goodhue Co, Minn
Carl Retta (father) Bluementhal Kr. of Pfalz (Germany)
W. C. Kindschy Cresko Wis

No. for Year, 154.
Insane Relatives, —— as to heredity, unknown.
Cause Exciting, Unknown
Cause Predisposing, not stated.
Form, Mania - acute
Accompanying Bodily Disorder, No
Suicidal or Not, unknown
Date of this Attack, 2 days ago - Suddenly violent
Duration, about 2 days.
No. of Attack, 2nd - Mania Wisconsin Asylum 7 yrs ago.
No. of Admissions, 1st (here)
Age First Attack, 21 years
Time of Leaving, Mch 27th 93
Time in Hospital, 2 mos. 4 ds.
Result, Recovered

EXAMINATION ON ADMISSION.

Ed by Dr. Baker Jany 28/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Fairly active

MEMORY:
Past Events, Seems good
Recent Events, Seems good
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Fairly Correct

REASONING POWER:
Ordinary Subjects, Somewhat Confused.
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Tells the story of his going from the Milk-Station on R. R. to Dodge Centre; there, asked Ticket-agent what time train left Dodge Centre, as he wanted to go to Arcadia, Wis. At Owatonna Station heard people talking of shooting him - got frightened - As they had nothing to shoot with, he thought they might hang him -

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Somewhat
Depressed,

DELUSIONS:
Systematized or Not, That he was in danger of being
Special Subjects, shot or hung - over hearing people
Transitory or Not, talking about him

HALLUCINATIONS:
ILLUSIONS: That people are talking about him.

CONVERSATION:
Coherent or Incoherent, Incoherent - fairly coherent at times -
Voluble or Reticent, Somewhat reticent on the whole - fairly free when conversation is begun -

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5 3/4 WEIGHT, 153½ lbs. has weighed 165 to 168 lbs. NUTRITION, below normal.
WOUNDS OR ABNORMALITIES, none
TONGUE, Tremors, Coarse Coatings, slight Promptness Movement, rather deliberate
PUPILS, Equality, Equal Size, about normal
Response Light, promptly Accommodation, Yes.
SIGHT, Good
HEARING, Fairly good.
COORDINATION, Arms, fingers, nose, eyes shut, very good -
Legs, Standing on foot, fairly good. Standing, eyes shut, slight swaying -
TREMORS, Hands, none Tongue, Coarse
Facial Muscles, none General,
REFLEXES, Patellar, Equal; slightly exaggerated -
Other Reflexes,
ARTICULATION, Hesitating, slightly ~~Slurred~~, fairly clear
FACIAL EXPRESSION, slightly blank -
SENSIBILITY,
HEART, Sounds clear -
LUNGS, probably good - Girth 35½ in Expansion 3½ in -
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, Yes Constipated, Irregular,
APPETITE, Good, Yes Medium, Poor,
SLEEP, ~~Good~~, Has not been sleeping very well. Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Sudden.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living - 63 - in Germany - was healthy when he last heard
Father or Pat. Relations, Father living - 63 - claims in good health -
Brothers or Sisters, 3 brothers living - good health - 1 brother dead; young - one sister died at 20 - became blind about 18 - commenced getting fits - Sisters living are healthy -

Personal and Medical History of Carl Retta

1893

MATTER FOR HISTORY.

JAN. 20TH '93.

Left Hildebrandt Station 8 o'clock A.M. with train #24, C.St.P.& K.C. R.R.. Arrived at Nerstrand 8-1o A.M., Left Nerstrand at 9-2o with milk-train #44 C.St.P.& K.C.R.R. Bought a ticket at Nerstrand to Dodge Centre, for which I paid 75¢, and checked a trunk to the same place. Arrived at Dodge Centre A.M., hour unknown. Was told by the ticket agent passenger train to Winona leaves 12-4o P.M. But it was not so. Toward night a train backed up and took me a ways in a very fast speed; arrived in a large city; name unknown. Was to buy a ticket to Winona at the depot but was refused and was told to go to a hotel over night, and he will wake me the next morning in time to take the train at 6 A.M.,

Saturday Morning, January 21st 1893.

That man seemed to be a suspicious character, and did not obey him, but went strait through the city into a grove where I changed clothes, and left the clothes I wore in the grove, and travelled to foot in my working clothes as fast as possible, and struck a river, which I followed until to a barbed wire fence, through which I crawled and broke into the water; then returned back again through the fence and climbed up on the bank; then a light in a house was visible, for which I aimed, and reached it too where I called and rapped, but no answer. Then went into the barn and slept but a very little.

Sunday, January 22nd 1893

Had some breakfast in the house and went to the next City about 3 or 4 miles, called Owatonna, in State of Minnesota, where I staid all day and went to a Masquerade Ball in the evening, and got into some fights after the dance, and was put in jail until the next morning.

Monday January 23rd 1893

Had some breakfast in jail, and was taken out and accompanied by two men and brought to the Hospital at Rochester, Minnesota.

One man was dressed like a Police, and the other like a common man.

C.R.Retta,
Rochester,
Minnesota.

Feb'y 3rd 1893.

(The above notes taken from his memoranda, in Dr.P's possession.)

...quiet, rest and sleeping well as usual. ...quiet, clean, tidy & well-behaved today. Has talked coherently, calmly & rationally for some time. Has been interested in his surroundings & has worked some. Has indeed seemed quite well-

Was today permitted to go away alone.

Discharged May 3° 93.

Personal and Medical History of Harry Jamison

NAME Harry Jamison

DATE, 1893	Weight.	Pulse.	Gain.	Loss.
May 15th	129	—	3½	
" 17th	131½		2½	
June 1st	130½		1½	
" 19th	128½			2
July 5th	125½			3
Aug 3d.	129½	—	4	
Sept 8th	138	—	8½	
Oct 3d.	141½	84	3½	

E CASE OF H. Jamieson

			NOTES BY NURSE.	NOTES BY PHYSICIAN.
	5.00	84		Complains of pain in Stomach.
12	7.00	90		Bowels Moved.
	5.00	78		
13	7.00	94	8.30 a.m. Had two Convulsions in succession.	
	5.00	90		
14	7.00	100	Complains of feeling pretty Stomach at times.	
	5.00	100		
15	7.00	104		
	5.00	84		
16	7.00			
	5.00	88		
17	7.00			
	6.00			
18	7.00		7 a.m. Convulsions.	
	5.00			
20			Complains of pain in Stomach.	
24	8.00		Had Convulsions	
27	6.30		Convulsions	
29	7.00			
May 6			Appetite good - Energetic - restless	
8	4.30 A.M.		Convulsions	
9	3.30 P.M.		" "	
			Has complained slightly	Bowels Moved, regular.
			Has not had any accounts	Seems brighter.
15			Weight 129 lbs.	
19	3.30		Bath.	
22	1.40	P.M.	Very hard Convulsion	Weight 131½ — Has worked
			Has not had any accounts	Has complained some
23	1.05	P.M.	Convulsion - not very bad.	

Mar 1/93 Convulsion during the night. Appetite good. Walks about Hall; talks to self considerably. Otherwise about as usual.
" 2 March 1/94. One Convulsion last night. March 2/94. Wt 142 lbs (some loss); pulse 96. March 6/94. 1 convulsion today.
" 3 March 2/94. The following Nocturnal Convulsions are reported. 8th - one; 7th three - 8th one; 13th Two; 14th Two - 15th one;
" 4 20th - one - March 3/94. Is cross & ugly, at times. Works some; goes out walking. Otherwise, as usual.

(Carried to back of 1.)

History of Carl Retta

Personal and Medical History of [illegible]

This man was brought here by J.G. Barnard, Sheriff, and Charles Green, Marshall, with the following history, which is somewhat meagre. As to habits, heredity, insane relatives, supposed cause of this attack, all is unknown. Form is acute. There is no accompanying bodily disorder. Became suddenly violent, 2 days ago, on arrival at Owatonna. This is the 2nd attack. States he was confined in an Asylum in Wisconsin, 7 years ago, for short time only. Insanity is now manifested in that he believes that he is afflicted with some rotten disease, and has delusions of persecution. Think is not disposed to injure others. Acts to suicide, unknown; dont know if filthy or destructive, or if there is any bodily disease. Confined only since the beginning of this attack in County Jail, in Owatonna, and when confined in Asylum previously, as above. Received hypodermic of hyoscin during present attack.

Jan 23 Jan 23/93. On admission says he was two months in Mendota Hospital.

" 24 Jan 24/93. Has quite noisy for 4 hours, Extremely so for 4 hours, restless 2 hours, Sleeping none at all last night. Fighting with his room-mate. Tore his mattress & pieces. 5 Pm. Pulse 70. Tr 99.6.

" 25 Jan 25/93. Quite noisy for 7 hours, sleeping but 5 hours, last night. 7 am. Pulse 82. Tr 98.8 — Had his finger bitten in some way this morning; wound not serious.

" 26 Jan 26/93. Was noisy the greater part of last night & slept only 2 hours.

" 27 Jan 27/93. Quite noisy two hours, but sleeping 6 hours, last night.

" 28 Jan 28/93. Last night, was quite noisy for 2 hours, extremely so 2 hours, sleeping but 4 hours. Patient was so noisy that night nurse had to take bed out of room.

" 31 Jan 31/93. Is now more quiet & restful at night, sleeping fairly well.

Feb 3 Feb 3/93. See attached slip, which purports to give an account of his wanderings & actions for a few days previous to coming to this Hospital. Wt today 168½ pd. Pulse 80. (Has gained 15 pounds since admission). Feb 25/93. With the exception of the few night, above noted, has been invariably quiet at night & uniformly sleeping well — 7 to 8 hours, each night; by day, has been out on the hall, dressed. Is quite clean tidy & well behaved.

Mar 5 March 2/93. Wt 179 pds. Pulse 88. March 18/93. Was today transferred from B4 to A3.

" 27 March 27/93. Has been uniformly quiet, resting and sleeping well at night. Has been quiet, clean, tidy & well-behaved by day. Has talked coherently, calmly & rationally for some time. Has been interested in his surroundings & has worked some. Has indeed seemed quite well — Was today permitted to go away alone.

Discharged May 3rd 93.

NAME Harry Jamison

DATE. 1893	Weight.	Pulse.	Gain.	Loss.
May 15th	129	—	3½	
" 31st	131½		2½	
June 1st	130½		1½	
" 19th	128½			2
July 5th	125½			3
Aug 3d	129½	—	4	
Sept 8th	138	—	8½	
Oct 3d	141½	84	3¾	

CASE OF H. Jamieson

	NOTES BY NURSE	NOTES BY PHYSICIAN.
	Complains of pain in Stomach.	
	Bowels Moved.	
	Bowels Moved.	
	Bowels Moved.	
	Bowels Moved.	
	Bowels Moved, regular.	
	Bath.	
	Ward during night.	
5 20	84	
12 7 00	90	
5 00	78	
13 7 00	94	8.30 a.m. Had two Convulsions in succession.
5 00	90	
14 7 00	100	Complains of feeling sick at his stomach at times.
5 00	100	
15 7 00	104	
5 00	84	
16 7 00		
5 00	88	
17 7 00		
6 00		
18 2 00		7 a.m. Convulsions.
5 00		
20		Complains of pain in Stomach.
24 8 00		Had Convulsions
27 6 30		Convulsions.
29 7 00		"
May 6		Appetite good — Energetic — restless
" 8 8 PM		Convulsions.
" 9 3.30 PM		" "
		Past convulsions in the night and early morning.
		Has had very decent nights sleep.
15		Weight 129 lbs.
19 3.30		Bath.
22 1.40 P.M.		Very hard Convulsion — Weight 131½ —
		Symptoms same
23 1.05 P.M.		Convulsion — not very bad.

Convulsion during the night. Appetite good. Walks about hall; Talks to self considerably. Otherwise about as usual.

Mar 1/94 March 1/94. One convulsion last night. March 2/94. Wt 142 pds (some loss); pulse 96. March 6/94. 1 convulsion today.

" 11 March 21/94. The following nocturnal Convulsions are reported. 6th one; 7th three — 8th one; 13th Two; 14th Two — 15th one; 20th — one — March 31/94. Is cross & ugly, at times. Works some; goes out walking. Otherwise as usual.

" 31

(Carried to back of 1.)

Personal and Medical History of [illegible]

MEDICAL NOTES IN THE CASE OF N. Jamieson

	MO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
1893	Mar	26	7.30	80	100	17	7.30 Complains of pain in Stomach.	
			5	80	100.4	16	2 PM Bowels Moved.	
		27	7.30	78	100	16		
			5	84	100.4	18		
		28	7.30	90	100	18		
			5	84			(2) Bowels Moved.	
		29	7.30	70	99.4	16		
			5	60	99.6	16		
		30	7.30	72	99	16		
			5	1.51	99.2	17		
		31	7.30	74	99.4	16		
			5	55	98.8		1 PM Bowels Moved.	
	April	1	7.30	64	99			
			6.00	56	98.8			
		2	7.00	58				
			6.00	78				
		3	7.30	90				
			6.30	68				
		4	7.30	92			5.30 am. Up on Ward.	
			5.00	78				
		5	7.30	98				
			5.00				Appetite good Bowels Moved, regular.	
		6	7.00	96				
			5.00	76				
		7	7.00	92				
			5.00				9 AM Bath.	
		8	7.00	90				
			5.00	86				
		9	7.00					
			5.00	84				
		10	7.00	86				
			5.00	68			On Ward doing nicely	
		11	7.00	82				
			5.00	84				
		12	7.00	90				
			5.00	78				
		13	7.00	94			2.30 a.m. Had two Convulsions in Succession.	
			5.00	90				
		14	7.00	100			Complains of pain in Stomach at times.	
			5.00	100				
		15	7.00	104				
			5.00	84				
		16	7.00					
			5.00	88				
		17	7.00					
			6.00					
		18	7.00				7 a.m. Convulsions.	
			5.00					
		20					Complains of pain in Stomach.	
		24	5.00				Had Convulsions	
		27	6.30				Convulsions	
		29	7.00					
	May	6					Appetite good - Energetic - restless	
		8	5.45 a.m.				Convulsions	
		9	3.30 P.M.				"	
							Had Convulsions the night and early morning	
							Now up to meals - Down Nights -	
		15					Weight 129 lbs.	
		19	3.30				Bath.	
		22	1.40	P.M.			Very hard Convulsion - Weight 131½ -	
		23	1.05	P.M.			Convulsion - not very bad.	

This man was brought here by J.G. Ba
with the following history, which is com
supposed cause of this attack, all is unkne
bodily disorder. Became suddenly violent, 2
2nd attack. States he was confined in an A
ago, for about that time only.
Insanity is now manifested in that he believes tha
concerned with some rotten disease, and has
delusions of persecution. Think is not disposed to injure others. No to suicide, unknown; dont
know if filthy or destructive, or if there is any bodily disease. Confined only since the beginning of
this attack in County Jail, in Owatonna, and when confined in Asylums previously, as above.
Received hypodermics of hyoscin during present attack.

Jan 23 Jan 23/93. On admission says he was two months in Mendota Hospital.

" 24 Jan 24/93. Has quite noisy for 4 hours, Extremely so for 4 hours, restless 2 hours, Sleeping none at all last night. Fighting with his room-mate, Inc his mattress & pieces. 5 PM. Pulse 70. Temp 99.6.

" 25 Jan 25/93. Quite noisy for 7 hours, sleeping but 5 hours, last night. 7 am. Pulse 82. Temp 98.8 —
Had his finger bitten in some way this morning; wound not serious.

" 26 Jan 26/93. Was noisy the greater part of last night & slept only 2 hours.

" 27 Jan 27/93. Quite noisy two hours, but sleeping 6 hours, last night.

" 28 Jan 28/93. Last night, was quite noisy for 2 hours, extremely so 2 hours, sleeping but 4 hours. Patient was so noisy that night nurse had to take bed out of room.

" 31 Jan 31/93. Is now more quiet & restful at night, sleeping fairly well.

Feb 3 Feb 3/93. See attached slip, which purposes to give an account of his wandering & actions for a few days previous to coming to this Hospital. Wt today 160½ lbs. Pulse 88. (Has gained 15 pounds since admission). Feb 25/93. With the exception of the few nights, above noted, has been uniformly quiet at night & uniformly sleeping well — 7 to 8 hours, each night; by day, has been out on the hall, dressed. Is quite clean tidy & well behaved.

Mar 5 March 5/93. Wt 179 lbs. Pulse 88. March 18/93. Was today transferred from B4 to A3

" 21 March 21/93. Has been uniformly quiet, resting and sleeping well at night. Has been quiet, clean, tidy & well-behaved by day. Has talked coherently, calmly & rationally for some time. Has been interested in his surroundings & has worked some. Has indeed seemed quite well.

Was today permitted to go away alone.

Discharged May 3rd 93.

Mar 1/94 March 1/94. One convulsion last night. March 2/94. Wt 142 lbs (some loss); pulse 96. March 6/94. 1 convulsion today.

" 11 March 31/94. The following nocturnal convulsions are reported. 6th - one; 7th - three - 8th - one; 13th - Two; 14th - Two - 16th - one;

" 31 20th - one - March 31/94. Is cross & ugly, at times. Works some; goes out walking. Otherwise, as usual.

(Carried to back of 1.)

Personal and Medical History of Harry Jamison.

(see page 352)

…for short time only.
…some rotten disease, and has
…from others. As to suicide, unknown; dont
…any bodily disease. Confined only since the beginning of
…last, in Owatonna, and when confined in Asylum previously, as above
…supposed use of hyoscin during present attack.

Jan 23 Jan 23/93. On admission says he was two months in Mendota Hospital.
" 24 Jan 24/93. Has quite noisy for 4 hours, Extremely so for 4 hours, restless 2 hours, Sleeping none at all last night. Fighting with his room-mate. Inc his mattress & pillows. 5 Pm. Pulse 70. Tc 99.5.
" 25 Jan 25/93. Quite noisy for 7 hours, sleeping but 1 hour, last night. 7 am. Pulse 82. Tc 98.8 — Had his finger bitten in some way this morning; wound not serious.
" 26 Jan 26/93. Was noisy the greater part of last night & slept only 2 hours.
" 27 Jan 27/93. Quite noisy two hours, but sleeping 6 hours, last night.
" 28 Jan 28/93. Last night, was quite noisy for 2 hours, extremely so 2 hours, sleeping but 4 hours. Patient was so noisy that night nurse had to take bed out of room.
" 31 Jan 31/93. Is now more quiet & restful at night, sleeping fairly well.
Feb 3 Feb 3/93. See attached slip, which purposes to give an account of his wanderings & actions for a few days previous to coming to this Hospital. Wt today 160½ lbs. Pulse 80. (Has gained 15 pounds since admission). Feb 25/93 With the exception of the few nights, above noted, has been invariably quiet at night & uniformly sleeping well — 7 to 8 hours, each night; by day, has been out on the hall, dressed. Is quite clean tidy & well behaved.
Mar 15 March 2/93. Wt 179 lbs. Pulse 88. March 18/93 Was today transferred from B4 to A3
" 27 March 27/93. Has been uniformly quiet, resting and sleeping well at night. Has been quiet, clean, tidy & well-behaved by day. Has talked coherently, calmly & rationally for some time. Has been interested in his surroundings & has worked some. Has indeed seemed quite well — Was today permitted to go away alone.

Discharged May 3rd 93.

May 23 Has convulsions in the night and early morning. Still up & about daily. Seems brighter. —
May 23/93. No marked change in appearance; no new symptoms. Continues to have convulsions, some in a mild form, others, again, very hard. As a rule, after each convulsion, he is very cross & ugly. Appetite, at present, fairly good & bowels regular. Sleeps well, at night. Coughs a little, at times; also complains of headache & feeling sick to his stomach. From
" 31. May 21st to June 1st, 8 convulsions have been reported.
June 10/13 June 10/93. Has been cross & ugly, all day. June 13/93 Appetite not so good as usual.
" 30 Is looking somewhat haggard, of late. June 30/93. Has a swollen ankle, which seems worse today than usual. Is very cross & stubborn; talking to himself, all day. From June 1st to June 30th had 26 convulsions (during the night & day).
July 6/12 July 6/93. Since 1st inst, 6 convulsions have been reported. July 12/93. Is unmanageable today.
" 14 Was put in Collossin 8 hours. July 14/93. 2 convulsions noted today. 7:30 Pm. Was
" 25 ugly & secluded from view. July 25/93. 14 convulsions reported since 14th inst, up
" 31 to date. Becoming quite ugly & troublesome. Was moved to B3. — July 31/93 Has had 13 convulsions since 25th inst. Patient does not change very much from month to month. (see attached clinical record). —
Aug 3/30 Aug 3/93. Is now gaining in flesh. Aug 30/93. Fits have continued quite frequent and have averaged nearly 1 fit a day during the month. Has had as high as five, of them. Appetite good. Bowels as a rule free. Works some at times. Not so troublesome as previously.
Sept 1/7 Sept 1/93. Was violent today; was secluded for 2 hours. Sept 4/93 Pulse 86 Tc 99.8 —
" 16/20 Sept 16/93. Visited by sister. Seemed to enjoy her company. Sept 30/93. Convulsions continue; averaging about 1 a day. In other respects, keeps about as usual. Works some. —
Oct 3 Oct 3/93. Has been increasing in weight the past 3 months; having gained 16 pounds in flesh
" 31 Oct 31/93. Fits have not been as high an average the past month. They seem to be more numerous during nights, however. Patient is up & about daily. Not much change to note. —
Nov 1 93. Wt 143 lbs. P. 80. Nov 6. 93 1 Conv during night. Nov 6 93 2 Convs during night. Nov 26 93 2 fits during night. Nov
" 17/27 27 fits during night 18th 1 fit during night Nov 26 93 Trouble with Mr Bogle 27th 1 fit during night, fell
" 30 on seat & bruised ear. Nov 30 93 Appetite generally good Violent at times. Walks about hall. Talks some.
Dec 1 No complaints. Nov 30 93 4 fits during night Dec. 1 93 4 fits during night. Dec 2. 2 fits during night
Dec 3/4 Dec 3/93. 1 fit during night. Dec 4 93 Wt 145 P. 86. Dec 6 93 1 fit during night. Dec 12 93 one. Dec 13 one,
Dec 23 Dec 23. one, Dec 24 five, Dec 25. two, Dec 26 One. Rec'd Christmas present from home. Dec 29 93
" 30 one conv. Dec 30. Two, all during night. Dec 31 93 Appetite med: No complaint. Bowels free. Behaves
1894 Jan 3/8 good Jany 3/1 4/2 5/1 6/1 all during night, 1 one during day — Jany 20/13 21/6 22nd 3. 24th 21 25th 28 2 all nightly.
Feb 1/5/6 Feb 1/94. Wt 148 lbs. Pulse 80. Feb 15/94. One Convulsion during day. Feb 16/94. Had 3 convulsions, during the night
" 16/18/27 Feb 16/94. 4 Convulsions during night. Feb 18/94 one, during the day. Feb 27/94. Two convulsions during the day. —
" 28 — Feb 28/94. Had 1 convulsion during the night. Appetite good. Walks about hall; talks to self considerably. Otherwise about as usual.
Mar 1/2/6 March 1/94. One convulsion last night. March 2/94. Wt 148 lbs (some loss); pulse 96. March 6/94. 1 convulsion today.
" 11 — March 21/94. The following nocturnal convulsions are reported. 6th one; 7th three — 8th one; 13th Two; 14th Two — 16th one;
" 31 20th — one — March 31/94. Is cross & ugly, at times. Works some; goes out walking. Otherwise as usual.

(Carried to back of 1.)

Personal and Medical History of Vasil Jancsin

Whole No. 3244.

Residence, 32 N. E. 7th Ave

Date Admission, 27th January 1893.

Admitted by, Dr Phelps Hour, 7 P.M.

How Sent, John H. Steele Jr. Asst. Sheriff

Sex, Male

Age, 34 years

Civil Condition, married

Children, Two

Age Youngest Child,

Occupation, Saw-mill laborer

Degree Education,

Profession Religion, Russian Church

Habits, Good

Nativity, Russia

Physicians Committing, E. S. Kelly & E. T. Gibson

Correspondents, Marie Jancsin
No 32. 7th Ave N. E.

No. for Year, 156.

Insane Relatives, Insanity said not hereditary —

Cause Exciting, not stated

Cause Predisposing,

Sept. 15th 1893

Served with Guardianship papers of
Vasil Jancsin
Mary J. Treuchen (or Jancsin) petitions
to be appointed Guardian.
Sp A. F. K

EXAMINATION ON ADMISSION.

Exd by Dr Phelps Feby 1/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, depressed

Quick or Sluggish, seems sluggish

MEMORY:

Past Events,

Recent Events, (?)

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Can't test

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State, (?)

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Does not seem to be able to speak English and does not understand to make one of the tests correctly.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, + dull

DELUSIONS:

Systematized or Not, Can't tell.

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Is perfectly silent.

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Vasil Jancsin

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 3 3/4 in WEIGHT, 134½ lbs. NUTRITION, has a feverish cough, down look, somewhat impaired

WOUNDS OR ABNORMALITIES, both hands burned, while in a fit.

TONGUE, Tremors, can't test Coatings, — — Promptness Movement, — —

PUPILS, Equality, yes Size, about normal

Response Light, yes Accommodation,

SIGHT, supposed to be good

HEARING, possibly good (can't test).

COORDINATION, Arms,

Legs, standing on foot, good: standing, eyes shut, quite steady.

TREMORS, Hands, none noted. Tongue,

Facial Muscles, none noted General,

REFLEXES, Patellar, equal — about 8 —

Other Reflexes,

ARTICULATION, Hesitating, nothing noted Slurred, can't talk.

FACIAL EXPRESSION, Has of melancholia, with indifference —

SENSIBILITY,

HEART, Sounds distant & rather weak.

LUNGS, Sound good.

EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 110.	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") Cannot obtain any information as he does not talk.

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Vasil Jancsin

Whole No. 3244.
Residence, 32. N. E. 7th Ave.
Date Admission, 27th January 1893.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John H. Steele Jr. Hennepin Coy.
Sex, Male
Age, 34 years
Civil Condition, married
Children, Two
Age Youngest Child,
Occupation, Saw-mill laborer
Degree Education,
Profession Religion, Russian Church
Habits, Good
Nativity, Russia
Physicians Committing, E. S. Kelley & E. T. Gibson
Correspondents, Marie Jancsin
No 32. 7th Ave N. E.

No. for Year, 156.
Insane Relatives, Insanity said not hereditary —
Cause Exciting, not stated
Cause Predisposing, not stated
Form, Melancholia — Acute
Accompanying Bodily Disorder, No
Suicidal or Not, not
Date of this Attack, 2 days ago
Duration, about 3 days —
No. of Attack, 1st
No. of Admissions,
Age First Attack, 34 years
Time of Leaving, Jan. 4th '94
Time in Hospital, 11 mos. 7 ds.
Result, Recovered

EXAMINATION ON ADMISSION.

Exd by Dr Phelps Feby 1/93 —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Depressed
Quick or Sluggish, Seems sluggish

MEMORY:
Past Events,
Recent Events, (?)
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Can't test
Correct or Illusive,

REASONING POWER:
Ordinary Subjects,
Own Mental State, (?)
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Does not seem to be able to speak English and does not understand to make some of the tests Correctly.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, & dull

DELUSIONS:
Systematized or Not, Can't tell.
Special Subjects,
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Do pafectly silent.
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Vasil Jancsin

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 3 3/4 in. WEIGHT, 124½ lbs. NUTRITION, Low except lungs } has a fever sigh - sleepy look
WOUNDS OR ABNORMALITIES, both hands burned, while in a fit.
Coatings, Promptness Movement, }
Size, about normal
Accommodation,
(can't test).
good. Staring, eyes shut, quite steady.
Tongue,
General,
ARTICULATION, Hesitating, Slurred, can't talk.
FACIAL EXPRESSION, Hat of melancholia, with indifference —
SENSIBILITY,
HEART, Sounds distant - rather weak.
LUNGS, Sound good.
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 110.	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") } Cannot obtain any information as he does not talk.
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

1893

This man was brought here with the following history. Habits have been good. Insanity said not to be hereditary. Cause of this attack not given; form is acute. No accompanying bodily disorder or disease. First symptoms were manifested 2 days ago by irrational behavior & excitable talks. This is 1st attack. Insanity is now manifested in Nonsense in particular. Is not disposed to injure others, nor suicidal, nor filthy nor destructive. Has not been restrained or confined, nor under medical treatment. This a case of acute insanity, believed to be promptly amenable to treatment.

Jan 28 Jan 28/93. Slightly, sometimes quite, noisy for 2 hours or so; restless out of bed for 2 hours; sleeping but 4 hours, last night. Is quite violent today; restless & excited also, at times; had 4 or 5 fits, and burned his hands badly in one of them. Talks continually about his family; thinks they are here; talk rather rambling; appetite is good. Has no cough. Jan 29/93. Quite noisy for 2 hours, restless for an hour or so, out of bed 4 hours & sleeping very little last night. Am. Burns on hands are quite severe - same were dressed - Jan 30/93. Restless & noisy for 2 hours, out of bed 1 hour, sleeping but 4 hours, last night. Am P 150. Was put on bromides. 6 PM. Pulse 88. T(R) 101.2. Has slept some this afternoon; and could not be awakened for his supper. Seems in a kind of stupor. Was put to bed. Jan 31/93. Last night, was quite noisy for 1 hour, intermittently for 1 hour, out of bed 2 hours & does not appear to have slept much. — Am. Came out of his stuporous condition last night in a violent way; was screaming, hallooing & and pacing the floor of his room. Is very quiet this morning. Does not talk any. Ate a good breakfast. 830 Am. Pulse 96. T(R) 99.6. 6 PM. Pulse 94. T(R) 103.6.

Feb 1 Feb 1/93. 9 Am. Pulse 94. T(R) 100. Is very quiet & silent today. Has not taken anything since yesterday morning. PM. Ate a good dinner & supper. Bowels moved. 530 PM. Pulse 92. T(R) 99.4 —

Feb 2 Feb 2/93. 9 Am Pulse 90. T(R) 99. Refused his breakfast. Wont talk - Says does not want to talk English - Sits in one place all the time; PM. Ate a good supper. 730 PM. Pulse 94. T(R) 99.8.

" 3 Feb 3/93. 9 Am. Pulse 82. T(R) 99. Coughs some. Appetite is fairly good. 530 PM. Pulse 86. T(R) 100.4

" 4 Feb 4/93. 9 Am. Pulse 88 T(R) 99.8; 7 PM Pulse 78 T(R) 99.; Wt 120 pounds pulse 90. —

" 5 Feb 5/93. 9 Am " 80 " 99.; 5 PM " 82 " 99.2 Feb 7/93. 430 PM. Pulse 80 T(R) 99.4

" 8 Feb 8/93. 9 Am " 74 " 98.6; 7 PM " 78 " 90. . Burns on hands are healing nicely.

" 9 Feb 9/93. 9 Am " 74 " 98.6; 730 PM " 74 " 99.6.

" 10 Feb 10/93. 9 Am " 74 " 98.6; 530 PM " 72 " 98.6 Feb 11/93 9 Am Pulse 68 T(R) 98.2

" 15 Feb 15/93. Am. Is constipated. Bowels have not moved for 2 days. Refuses his medicine.

" 24 Feb 24/93. For the past week, bowels have been somewhat more regular.

" 27 Feb 27/93. Since last note on this sheet, patient has been uniformly quiet; apparently resting and sleeping well - 7 to 8 hours, generally the latter, each night; only on one or two occasions being slightly restless for an hour or so. No nocturnal fits have been reported since those noted on the night of his admission. Has taken food fairly well, though sometimes refusing it altogether for 3 or 4 meals. At times, has also refused his medicine. He now seems to have regained his usual state of mind. He has much dullness and the appearance of an epileptic. By his friends, he is said to have had "shaking spells" several times before coming here. Wounds from burns on hand are almost entirely healed. On Feby 14th, was taken down with an attack of erysipelas, was put to bed

MEDICAL NOTS IN THE CASE OF Mr. Vasil Tancsin

MO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
Feb	14	5 PM	80	100.4		Bowels not moved for a couple of days refuses medicine	was taken down with erysipelas & put in a room —
	15	9 AM	78	99.2			
	"	7 PM	76	100			
	16	9 AM	66	98.4		Bowels evacuated	
	"	5 PM	78	100.8			
	17	8 30 AM	78	99.4			
	"	5 PM	66	100		Bowels moved	
	18	9 AM	62	99.6			
	"	8 30 PM	66	100.6			
	19	8 30 AM	74	99.4			
	"	8 30 PM	76	100			
	20	8 30 AM	64	98.4		Bowels regular	In Room
	"	5 PM	64	100			
	21	8 a.m.	66	98.4			
	"	5 PM	74	100.4			
	22	8 30 AM	70	98.4		Bowels regular	
	"	5 30 PM	66	99.2			
	23	8 30 AM	74	98.2			
	"	5 30 PM	62	98		Urine not regular	
	24	8 30 AM	56	98			
	"	5 PM	58	98.4			
	25	8 a.m.	64	98			
	"	5 PM	64	97.8			
	26	8 AM	60	97.6			
	"	5 PM	84	98.4			
	27	8 AM	66	97.6			
Mch	25	Was	let	out	on	Patient seemed to have regained his usual state of mind. He is discontented. He shows an appearance of an Epileptic. By his friends he is said to have had shaking spells several times before coming here. Wounds from burns on hand are almost entirely healed. On Feby 14th was taken down with an attack of erysipelas, was put to bed in a room —	
			Trial				

Was improving. Was also visited by a friend who took him out on trial. At time of leaving, was also in good physical health.

Discharged —

1893

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" 29

" 15

" 24 Feb 24/93. ov.

" 27 Feb 27/93. Since last row
Sleeping well - 7 to 8 hours, generally.
slightly restless for an hour or so. No nocturnal
the night of his admission. Has taken food fairly well; thoug
3 or 4 meals. At times, has also refused his medicine. He now seems to have regained his usual
state of mind. He has much dullness and the appearance of an epileptic. By his friends, he is
said to have had "shaking spells" several times before coming here. Wounds from burns on hands
are almost entirely healed. On Feby 14th, was taken down with an attack of erysipelas; was put to bed

in seclusion, remaining there 2 weeks. During this attack, he refused medicine but took food
quite well. Since his recovery & being out on the Hall, he has been quiet & well behaved.
Seems to be gaining some in strength.

Mar 24/29 March 24/93. Wt 116½ pds. Pulse 80. March 29/93. Seemingly quiet at night & appears to
rest and sleep well. Appetite is poor. Seems in a half-stuporous condition. Is with difficulty that any
answer is got from him. Cries a good deal.

Apl 4/9 April 4/93. Wt 119 pds. Pulse 86. April 19/93. Appetite is reported as poor.

" 26 April 26/93. Has seemed a little more active; responds but feebly, however, to questions.

" 27 April 27/93. Was struck with a knife, at supper table this evening, by a fellow patient & head cut.

May 3/31 May 3/93. Wt 126 pds. (Has made quite a gain in flesh). Pulse 76. May 22/93. Seems to be quiet
" 31 & eat & sleep well. No fits have been reported, since that are above noted. May 31/93. Appetite
poor; bowels normal. Always seems in a kind of stuporous condition, Never speaks to any
one. Occasionally, takes a "spell" when he will jump & run about the hall. Habits clean.

June 3/19 June 3/93. Wt 131 pds. (Still gaining in flesh). Pulse 76. June 19/93. Was today visited by his
" 30 wife & children. June 30/93. Continues in about the same condition from month to month -

July 1/31 July 1/93. Wt 132½ pounds. Pulse 60. July 31/93. Appetite not very good. Bowels regular.
Is generally found standing up; has to be made to sit down. Never speaks to any one; Will
not even answer his addressor. Is untidy about his clothing, though of clean personal habits -

Aug 1/17 Aug 1/93. Wt 135 pds. (still gains some in flesh). Aug 17/93. Appetite rather poor. Bowels are
apparently regular. Quietly behaved; never speaks to any one. Sits in one place, most of time, while
on the hall. Sometimes will jump up from his seat & run up & down the hall. Habits are clean.

Sep 7/27 Sep 7/93. Wt 137 pds (Pulse 76.). Still keeps gaining in weight. Sep 6/93. Seems to improve some,
" 27 of late. Will answer questions & seems more active than previously. Sep 27/93. Appetite is rare,
& for some time past has been good. Bowels regular. Talks more than he has for some time.
Is incoherent in speech & has hallucinations. Talks in a silly manner.

Oct 5/31 Oct 5/93. Wt 138½ pds. Pulse 68. Oct 31/93. Appetite good; bowels normal. Quiet & well-behaved.
Hardly ever speaks to any one. Sometimes he appears quite "story" & again, at other times,
will be in a dull & stupid state. Will sit in one place, nearly all day. Habits are clean.

Nov 1/30 Nov 1/93. Wt 138 pds. Pulse 72. Nov 30/93. Apparently rests & sleeps well, at night. Appetite is
good; bowels regular. Is quiet & well-behaved. Talks very freely, of late, but is hard to under-
stand as he does not speak English plainly. Appears quite well. Habits are clean.

Dec 14/31 Dec 14/93. Wt 142 pds. Pulse 84. Dec 21/93. Has seemed to go home quite frequently of late;
" 31 seems quite improved from his condition of 3 months ago. Dec 31/93. Appetite good & patient
is in good physical condition. Talks freely about anything; apparently nothing wrong in his
Conversation, though he acts rather foolish, at times. Talks about home a good deal.

1894
Jan 7 Jan 7/94. Wt 140 pounds.

" 14 Jan 14/93. Has kept on improving. Was today visited by a friend who took him
out on trial. At time of leaving, was also in good physical health.

Discharged —

Personal and Medical History of John Casey

Whole No. 3245.
Residence, Town of Oakland, Freeborn Co. Minn
Date Admission, 27th January 1893. —
Admitted by, D. Phelps Hour, 7 PM
How Sent, Herman Blactmer Jff. Freeborn County
Sex, Male
Age, 21
Civil Condition, single
Children, None
Age Youngest Child,
Occupation, Farmer
Degree Education,
Profession Religion, Catholic
Habits, Good
Nativity, Minnesota
Physicians Committing, F A Blackmer & A S Wedge
Correspondents, John Casey (Father)
John C. Murrin, Oakland. Oakland, Freeborn Co. Minn

No. for Year, 157.
Insane Relatives, none ; Insanity not hereditary.
Cause Exciting, Epilepsy
Cause Predisposing, not stated
Form, Epileptic Dementia (Primary Dementia Epileptica)
Accompanying Bodily Disorder, Epilepsy
Suicidal or Not, not
Date of this Attack, first symptoms, 8 years ago.
Duration, for about 8 years.
No. of Attack, not 1st
No. of Admissions,
Age First Attack, about 13.
Time of Leaving, April May 29th '93
Time in Hospital, 3 Mos 2 Ds.
Result, Imp'd.

EXAMINATION ON ADMISSION.

Eddy D. Phelps Feb 2/93 —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Slightly Confused
Quick or Sluggish, Sluggish

MEMORY:
Past Events, probably better
Recent Events, poor.
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Uncertain

REASONING POWER:
Ordinary Subjects, } Impaired
Own Mental State, }
Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:
Says heart beats fast, at times, that he cannot sleep. Says had fits for 8 years, gradually growing worse.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, & dull

DELUSIONS:
Systematized or Not, No definite ones noted.
Special Subjects,
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Sluggish.

Personal and Medical History of John Casey

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7½ in WEIGHT, 153 lbs. NUTRITION, Fairly good
WOUNDS OR ABNORMALITIES, a foot burned while on a fit. — Abnormalities, none noted.
TONGUE, Tremors, Yes Coatings, none Promptness Movement, prompt
PUPILS, Equality, Equal Size, moderately dilated
Response Light, Yes Accommodation, Yes
SIGHT, Normal
HEARING, Normal
COORDINATION, Arms, fingers move, eyes shut, not very well done —
Legs, standing upon floor, not well done. Standing, eyes shut, fair.
TREMORS, Hands, Yes Tongue, Yes.
Facial Muscles, General,
REFLEXES, Patellar, Equal — — —
Other Reflexes,
ARTICULATION, Hesitating, somewhat Slurred,
FACIAL EXPRESSION, rather dulled.
SENSIBILITY,
HEART, Has some palpitation of heart. Sound normal.
LUNGS, Sound normal.
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, Yes Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, but sometimes sleeps, ~~Irregular~~, alright —
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 8 years ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living — healthy,
Father or Pat. Relations, Father living — claims healthy.
Brothers or Sisters, 3 sisters " " " Says none of them ever had fits or denies any hereditary disease —

1893

The following history accompanied this patient here. By occupation, a farmer; of good habits. No insane relatives. Cause of this attack Epilepsy, (the accompanying bodily disorder or disease). First symptoms were manifested 8 years ago. This is not 1st attack; mind has been going(?) for several years. Insanity is now manifested as no particular subject; wilful; will run away, and appear to ryn(?) of his actions. Not disposed to injure others. Not suicidal, nor filthy nor destructive. Has to be watched and often held to prevent him injuring himself and clothing; only a short time; he has had medical treatment, at times, for the past 8 years, with no permanent effects.

Jan 28 Jan 28/93. Has restless for 3 hours, sleeping 5 hours last night. 7.30 Am. Pulse 88. 9.30 Am. Says he slept poorly last night; ate very little this morning; had a fit at breakfast. Pm. Had 3 or 4 fits during the day - behavior good - walks some about ward; talks freely; is eating now very well. Has no cough. Has been at bath, was very dirty. No bruises or injuries noticeable. Bowels moved.
" 29 Is already anxious to go out home. Jan 29/93. Slept 8 hours last night & was quiet. Had 1 convulsion during the night. 8.30 Am. Pulse 80. Pm. Had several fits today. General behavior continues good - appetite also good, & says bowels are regular. Jan 30/93. Restless for 2 hours, sleeping 6 hours, last night. Had 3 convulsions during the night. 8.30 Am. Pulse 84. Was put on bromides. Pm. Has had several fits today. Is fairly active, and works well, when requested.
" 31 Jan 31/93. Was restless for 1 hour, sleeping 7 hours, last night. Had one fit during the night. 8.30 Am. P 90. Pm. Still continues to have fits daily - Works well; plays cards & games. Appetite continues Good.
Feb 1/93 Feb 1/93. Had 2 fits last night, but seems to have rested & slept fairly well. 8.30 Am. Pulse 82. Has 3 to 6 fits
" 2 daily. In other respects continues about the same. Feb 2/93. No nocturnal fit reported last night. Seems to have slept well. 8.30 Am. Pulse 90. Pm. Had no fits today; bowels are regular. Was, today, examined in office. Says, amongst other things, his heart beats so at night, at times, that he cannot
" 3 sleep. Has had fits for 8 years, gradually growing worse. Feb 3/93. 8.30 Am. Pulse 102. Pm. Had quite a
" 4 number of fits today. Wt 149 pds. (has lost some) Pulse 106. Feb 4/93. 8.30 Am. Pulse 108. -
" 6 Feb 6/93. Am. Put on borax today. —
" 28 Feb 28/93. Since last note on this subject, has been uniformly quiet at night, apparently resting and sleeping well, 7 to 8 hours, generally the latter, each night. No fits have, during that period, been reported at night, with the exception of one on the night of the 24th inst. By day, has been up & around on the hall, dressed, fairly clean & tidy & quite well-behaved. Talks fairly fully & coherently. Has had no fits by day for some time. Is an active & very willing worker. Appetite has, as a rule, been good. Bowels normal.
March 1/93 March 1/93. Wt 149½ pds. Pulse 110. March 13/93. Is dull, sluggish & quiet;
" 30 March 30/93. Fits have not been reported lately. Is in good physical health.
April 4/93 April 4/93. Wt 153½ pds. Pulse 76. April 9/93. Recently had a convulsion at night: slightly restless
" 29 for a couple of hours last night. April 29/93. Has been uniformly quiet, restful & slept well at night. Has been quiet & well-behaved, uniformly so, by day. Has worked well, both on the hall & out-doors. Fits are very infrequent. Has yet today visited by his father & today taken home by him.

— Discharged —

from page 394

1893
May 29 (Cont'd) May 29/93. (Cont'd). Has, today, visited by mother, and taken home by her, as she wished to care for him, herself. ——
June 6 June 6/93. Was found impossible to take of patient at home, so he was sent for & brought back
" 30 here, this evening. Was put on his old ward, C4. June 30/93. Appetite good. Bowels regular. No Cough noticed. Is slow in his movements. Inclined to be very obstinate. Has to be dressed and undressed, and fed, nearly all the time. Says "he don't want to be here". Talks some when spoken to, but hesitates a good deal before replying. Habits, dirty at times. Recently (26th) was visited by a friend. Very depressed; cries at times. —
July 3/31 July 3/93. Has made a slight gain in flesh, since his return. July 31/93. Is still very stubborn. At times, seems to realize his condition, saying he feels "awfully bad". Habits still dirty. Is always dull & quiet; sluggish & paretic in all his doings.
Aug 7/30 Aug 7/93. Has gained 9½ pounds in past month. Aug 30/93. Appetite good; bowels regular. Is very stubborn, at times. He chokes frequently while eating. Is very paretic. Habits Dirty.
Sept 4/30 Sept 4/93. Weight fluctuates. Has lost some in past 4 weeks Sept 30/93. No material Change. Still very stubborn. Dirty in Habits. Paretic; Depressed; Cries at times.
Oct 3/18 Oct 3/93. Has lost slightly in flesh, (at this weighing). Oct 18/93. Was visited yesterday & today
" 20 by his mother and his daughter. Oct 20/93. No very material change in condition.
" 25 Talks but little. Claims he ought not to be here. Habits very dirty. Oct 27/93. Seems a trifle
" 31 more cheerful today. Mother respects, about the same. Oct 31/93. Appetite poor, has to be coaxed to eat. Bowels are regular. Is very dull in manner, blank in face & stupid in mental state.
Nov 14 Nov 14/93. Appetite poor: needs some help, in the way of feeding him, at table. Is well behaved, as a rule, though, at times, it requires force to put him to bed. Makes no complaints except that he claims he ought not to be here: "thinks he should be in Minneapolis". Bowels regular. Habits dirty.
" 30 Nov 30/93. Patient seems to be growing weaker. Habits are still very dirty.
Dec 2/4 Dec 2/93. Has made a slight gain in flesh, in past month. Dec 4/93. Not feeling well &
" 10 seeming quite weak, he was put to bed at 9 Am. Dec 10/93. Patient still keeps his bed.
" 19 Is very restless, during the day. Dec 19/93. Patient has kept his bed up to today, when he was got up & dressed. Had his picture taken in the Chapel, today. Worried a good
" 31 deal & was ordered back to bed. Seems to be failing much. Dec 31/93. He eats fairly well. In other respects continues about the same. —
1894
Jan 1/5 Jan 1/94. He has lost considerably in flesh, during past 4 weeks. Jan 5/94. Patient was again got up today & dressed. Remained up, all day. Appetite good. Seems failing some.
" 6 Jan 6/94. Eats well. Was quite noisy this afternoon. Very weak; could not walk alone to
" 7/13 his supper. Jan 7/94. Seems worse today. Was put to bed at 4 Pm. Jan 13/94. Patient has continued to be confined to his bed. Seems failing a good deal. Eats fairly well. Quite noisy
" 16 at times. Jan 16/94. Can't eat anything today; drinks a little milk. Is getting worse.
" 17 Jan 17/94. Patient continued to fail quite rapidly and died at 12.25 Pm.

Relatives had been, from time to time, kept advised of his condition, & were telegraphed his death. Remains were removed by mother.

— Died —

Whole No. 3247.
Residence, 3102 Clinton Avenue, Mpls
Date Admission, January 28th 1893.
Admitted by, Dr Kilbourne Hour, 7 P.M.
How Sent, John H. Steele, Sopt Hennepin Co.
Sex, Male
Age, 56 years
Civil Condition, Single
Children, —
Age Youngest Child,
Occupation, Minister of the Gospel
Degree Education,
Profession Religion, Yes
Habits, Good
Nativity, Asheville, Mass.
Physicians Committing, Drs R. J. Hill & E. J. Gehan
Correspondents, Mrs J. F. Fuller, 3417 Longfellow Ave
Guardian & Sister 4/10/93 Minneapolis, Minn

No. for Year, 159.
Insane Relatives, None ; Insanity not hereditary
Cause Exciting, Business troubles (In Asylum 2½ yrs - 10 years ago)
Cause Predisposing,
Form, Melancholia - Acute
Accompanying Bodily Disorder, No, but general shattered condition of nervous system —
Suicidal or Not, Not.
Date of this Attack, 48 hours ago; became violently insane
Duration, 48 hours.
No. of Attack, 2nd (probably)
No. of Admissions,
Age First Attack, 46 years
Time of Leaving, June 14 '93
Time in Hospital, 5 mo. 16 ds.
Result, Impvd.

EXAMINATION ON ADMISSION.

Ex'd by Dr Phelps Feby 2/93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish

MEMORY:
Past Events, } Apparently fair
Recent Events, }
Special Subjects, }

PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,

REASONING POWER:
Ordinary Subjects, } Considerably impaired
Own Mental State, } Has improved since
Special Subjects, } coming here.

GENERAL DESCRIPTIVE REMARKS:
Says he was in Oshkosh (Wis) Asylum - for over 2 years - Throat, tongue & edges of mouth now show general inflammation

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Quite

DELUSIONS:
Systematized or Not, Susceptible of - not so
Special Subjects, Prominent at present.
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Shows depression.
Coherent or Incoherent, coherent
Voluble or Reticent, Talks considerably of his throat & thinks that is all the matter with him.

EXAMINATION ON ADMISSION—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6¼ in. WEIGHT, 139 pds. (has weighed 144 pds) NUTRITION, Quite poor.
WOUNDS OR ABNORMALITIES, Says has had rupture; claims it has been cured. —
TONGUE, Tremors, None especially Coatings, Reddish & inflamed Promptness Movement, Prompt
PUPILS, Equality, Equal Size, Rather small
Response Light, Yes Accommodation, Yes
SIGHT, Fairly good
HEARING, Fairly good
COORDINATION, Arms, Inquiet to-day. Eyes shut, fairly well done.
Legs, Standing on foot (fairly good. Standing Eyes shut, fairly good.
TREMORS, Hands, Slight Tongue, None special
Facial Muscles, General,
REFLEXES, Patellar, Equal - about normal.
Other Reflexes,
ARTICULATION, Hesitating, Slurred, Fairly good
FACIAL EXPRESSION, Fairly good
SENSIBILITY,
HEART, No murmurs. Irritable & quick.
LUNGS, Sounds seem good
EXAM. URINE,

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, Constipated, Yes. for several days. Irregular,
APPETITE, Good, Medium, Poor, Very
SLEEP, Good, Poor, Very Irregular,
PULSE, Scarcely RESP., " — . TEMP., " "
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother dead.
Father or Pat. Relations, Father died at 95. } Denies any insanity in family history
Brothers or Sisters,

1893

This patient was brought here by James Haynes, deputy, with following history. Is a minister of the Gospel. Habits good. Cause of this attack is business troubles; though he was in an Asylum 2½ years, 10 years ago. Form is acute, as far as this immediate attack is concerned. No accompanying bodily disorder or disease, but a general shattered condition of nervous system. First symptoms were manifested 10 years ago. This is probably 2nd attack; that, 10 years ago, lasted 2½ year. Was then apparently restored, until 48 hours ago, when he became violently insane. He is now constantly brooding over unfounded business troubles; Confusion of ideas; inability to collect thoughts. Is not disposed to injure others, nor suicidal, nor filthy nor destructive.

Jan 29 Jan 29/93. Was restless for 7 hours, sleeping but 1 hour, last night. Got up during night, wanting to dress. 8.30 Am. Pulse 100. Pm. Has been restless today; wanders about ward in an aimless way; does no mischief; offers no violence; talk is full of delusions, about "world burning up &c". Eats very poorly; bodily condition (seen at bath) was very dirty. Jan 30/93. Passed last night similar to the preceding one. 8.30 Am. Pulse 98. 5.30 Pm. Pulse 96. Tº 99.6. Had a very restless & violent spell during the day; ran about the ward; "thought everything was on fire". Has various delusions; thinks he is rotten; also has hallucinations; sees fire & snakes; Does not eat anything. Jan 31/93. Restless for 8 hours, sleeping none at all, last night. 8.30 Am. Pulse 94. Tº 100.2. Ate no meal last night or this morning. Says he was told not to "& that his time has come". Says he hears voices but can't see the person speaking. Has not slept well since he came here. Is confused & cannot collect his thoughts. Pm. Walks about ward most of the time, by day; is constipated.

Feb 1 Feb 1/93. Restless for a couple of hours last night and up out of bed, but slept some. 8.30 Am. Pulse 104. Rt today 128½ pds. (Standard 10½ pds, since admission). Walks restlessly about ward; seems very weak; only takes a few mouthfuls of food, at a time; Pm. Pulse 102. Tº 100.2. Feb 2/93. Was very restless, the greater part of last night; up again & wanting to dress; slept little or none. 7 Am. Pulse 102. Tº 100.2. 8.30 Am. Keeps up a constant walking about the hall. Drinks small quantities of milk but takes no solid food: Says his bowels have not moved since he came here. 7 Pm. Pulse 96. Tº 99.8 —

" 3 Feb 3/93. Has restless for 8 hours, out of bed often, sleeping but 2 hours last night. Am. Is eating somewhat better and takes 2 glasses of milk at each meal. Conduct & behavior by day somewhat better. Wt today 127 pds (a still further loss). Pm. Pulse 95. Tº 100.2. Feb 4/93. Slept 5 hours last night being restless for 3 hours out of bed 1 hour. 8.30 Am Pulse 100. Tº 99.2. Still obstinately constipated. Given salts. —

" 5 Feb 5/93. Passed a very good night last night, sleeping 8 hours, being only slightly restless for a short time.

" 6 Feb 6/93. Restless 2 hours, but sleeping 6 hours, last night. Am. Is looking better; says he does not hear voices now. Talk is more sensible & coherent. Is obstinately constipated still. Was given Enema — bowels moved

" 7 Feb 7/93. Last night was restless for 4 hours, sleeping 4 hours: was given an injection during night,

" 10 & bowels shortly afterward moved. Feb 10/93. Wt today 131 pounds (Some gain). Feb 17/93. For the past few days has been eating sparingly; sometimes refusing food altogether; at other times, requiring to be fed with a spoon. At times, appears very dull & stupid. Feb 21/93. During the past 2 or 3 days, his appetite has greatly improved; and he has also seemed more cheerful & contented; talking quite freely;

" 28 was today, transferred to A'. Feb 28/93. Since the above note on this subject, patient has been uniformly quiet and restful at night. Sleeping, as a rule, 8 hours each night. By day, has been up &

Copy on here all notes of the day.
Bring at each morning for Dr to make note on

DETAILED HISTORY OF SICKNESS OF MR. H. Chamberlain
DIAGNOSIS.

DATE	HOUR A.M.	HOUR P.M.	PULSE A.M.	PULSE P.M.	RESP A.M.	RESP P.M.	TEMP A.M.	TEMP P.M.	OTHER DATA.
Feb 13	1	5.30		85		1		99⅞	Eats fairly well. Light movement of bowels.
" 14	8.30	5	88	95	1	1	98½	99	Bowels moved 3 m. Restless & noisy.
" 15	8.30	5	100	96	1	1	99⅞		Sleeps well during the day. Eats sparingly
" 16	8.30	6	100	96	1	1	98	99⅞	Bowels moved 4 m. Has to be fed with spoon
" 17	8.30	7	100	96	1	1	98	99⅞	Very Stupid. Eats well. Bowels moved.
" 18	8.30	7	102	97	1	1	99⅞	100⅞	Eats well but has to be fed with spoon.
" 19	8.30	1	84	84	1	1	99	98	Nosey. Bowels moved freely. Does not remain in bed
" 20									Ow Wall. Feeds Self. Improving.
" 21									
" 22									Moved to A'. Seems doing fairly well
									Mch. 8. Patient seems to have come to a standstill. Does not gain much each day to be assuming that he is doing just right. Is a necessity — to anxious to do right — Complains only of throat Seemingly a catarrhal condition.

Personal and Medical History of M S Chamberlain

MEDICAL NOTS IN THE CASE OF Chamberlain M S

MO:	DA:	HR:	PULS:	TEMP:	RESP:	NOTES BY NURSE	NOTES BY PHYSICIAN.
Jan	4	12 Am	110	99?		gave Salts	
		8 PM				Eats no sol'd food.	
	5	8 Am	92	99.6		Drinks 8 to 10 glasses	gave Calomel + had
						of milk per day	true effect
	6	8 Am	92	98.8		takes Quinine sensible	
						seems to have got over	gave salts + enema - acted.
						delusions.	
	7	8 Am	110			Bowels moved	Talks more sensibly this
	8	8 Am	90			Eats Sugar	when he comes in to
						drinks Q quart food	see me. Usually talks with
	9	8 Am	90			Looked better	patients ✓
	10	8 Am	90			Eats Gruels	
						gets 8 cups of milk	
	11	8 Am	84			Very talkative,	
						quarrelsome,	
	12	8 Am	92			Appetite poor,	
						he is getting down	eats fairly well of
	13	8 Am	90			Appetite poor ✓	solid food ✓
	14	8 Am	98				
	15	8 Am	104	99.6		Appetite fair	
						Bowels moved	
	16	8 Am	102			Wt 131	
	17	8 Am	88				
	18	8 Am	86			Appetite quite	
						good	
	19	8 Am	86			Seems more cheerful	
	20	8 Am	94				
	21	8 Am	102			Was moved to A. he smiles as the Dr. went.	
						when he makes his rounds + talks freely - reads	
						~~occasionally~~ some + seems quite contented	
						his appetite is fair.	

Chamberlain M S.

Jan 31/93. Restless for
last night or this morning.
but Can't see the person
to get his thoughts Dr. Walks

slept some. 830 Am. Pulse 104.
ly about ward; seems very weak;
90.2. Feb 2/93. Was very restless, the
a or more. 7 Am. Pulse 102. Tº 100.2.
ks small quantities of milk but takes
came here. 7 Pm. Pulse 96. Tº 99.6 -
2 hours last night. Am. Is eating somewhat bette
having by day somewhat better. Wt to day 127 pds.
93. Slept 2 hours last night being restless for 3 hours
tinel obstinately constipated. Given Salts. ——
8 hours, being only slightly restless for a short time.
, last night. Am. Is looking better, says he does not hear
voices now. Talk is more sensible & coherent. Is obstinately constipated still. Was given Enema: bowels moved
Feb 7/93. Last night was restless for 4 hours, sleeping 4 hours. Was given an injection during night,
bowels shortly afterwards moved. Feb 16/93. Wt today 131 pounds (Some gain). Feb 17/93. For the past few
days has been eating sparingly; sometimes refusing food altogether; at other times, beginning to feed
with a spoon. At times, appears very dull & stupid. Feb 21/93. During the past 2 or 3 days, his
appetite has greatly improved; and he has also seemed more cheerful & contented; talking quite freely;
was to-day, transferred to A. Feb 28/93. Since the above note on this subject, patient has been unif-
formly quiet and restful at night, sleeping, as a rule, 8 hours, each night. By day, has been up &

3 Feb 3/93. Was
and take 2 glasses
(a still further loss) - Do
out of bed 1 hour. 830 Am
5 Feb 5/93. Passed a very good night &
6 Feb 6/93. Restless 2 hours, but sleeping
voices now. Talk is more sensible & coherent. Is obstinately constipated still. Was given Enema: bowels moved
7 Feb 7/93. Last night was restless for 4 hours, sleeping 4 hours. Was given an injection during night,
10 bowels shortly afterwards moved. Feb 16/93. Wt today 131 pounds (Some gain). Feb 17/93. For the past few
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with a spoon. At times, appears very dull & stupid. Feb 21/93. During the past 2 or 3 days, his
28 appetite has greatly improved; and he has also seemed more cheerful & contented; talking quite freely;
was to-day, transferred to A. Feb 28/93. Since the above note on this subject, patient has been uni-
formly quiet and restful at night, sleeping, as a rule, 8 hours, each night. By day, has been up &

around; clean & tidy & caring for his own person; since the above "spell" (which appears to have lasted until about the 6th inst) he has become much more calm & sensible in behaviour and conversation, not now expressing delusions or hallucinations. At first, ate very little, occasionally refusing all food; then took only milk, afterwards began eating solid food and now appetite is quite good. Bowels, for a long time, obstinately constipated, are still somewhat irregular. He now converses more freely & sensibly with the officers & his fellow-patients; read a book and is now apparently quite cheerful & contented here.

Mar 7/93 March 2/93. Wt 129½ lbs. Pulse 84. March 8/93. Patient seems to have come to a stand still, not gaining. Wants, each day, to be assured that he is doing just right for a recovery & to be able to get out of here. Is very anxious to do right. Complains only of his throat, seemingly a catarrhal condition.

" 13 March 13/93. Not gaining lately. Is clean and neat. Shows feebleness of mind; difficulty in

" 27 comprehending; hard to do anything. (R.M.P.) — March 29/93. Transferred from A. to A. today.

" 31 March 31/93. Quiet, day & night; clean, tidy & well-behaved. Still very anxious that he shall be perfectly right again & be permitted to go home. Repeatedly asks if he is doing so. Troubled somewhat with constipation. Has a fair appetite.

April 4/93 April 4/93. Wt 124 lbs. Pulse 84. April 29/93. Still eats rather poorly & is bothered with his questionings and doubts.

May 3/93 May 3/93. Wt 120½ lbs. Pulse 80. May 13/93. Has been losing steadily in weight the past 3 months. Refuses to eat & thus gives him, saying "that he will be kept here up to pamper to his

" 24 stomach" — Is still on medicine. May 24/93. Appetite continues quite poor, patient, at times, eating almost nothing — sometimes, appears a trifle brighter. Keeps by himself a great portion of the time. There is no perceptible change. Is still troubled with his questionings & doubts.

" 31 Is very annoying in manner; always asking to go home. May 31/93. Is very stubborn; wants to do contrary of what is asked him to do. Eats very little; sleeps fairly well. Bowels are costive. —

June 5 June 5/93. Weight 118½ lbs. (Still gradually losing in flesh). Pulse 80.

" 14 June 14/93. Sister came and took him home today. She declared him as well as he was at home. Was told, however, that he went out only as "Improved". His mental state is one of weak-mindedness. Hardly comprehends his own case. Wanders about, always asking what he can do, or if he is doing right —

— Discharged —

Personal and Medical History of

Whole No.		No. for Year,	
Residence,		Insane Relatives,	
Date Admission,		Cause Exciting,	
Admitted by,	Hour,	Cause Predisposing,	
How Sent,		Form,	
Sex,		Accompanying Bodily Disorder,	
Age,		Suicidal or Not,	
Civil Condition,		Date of this Attack,	
Children,		Duration,	
Age Youngest Child,		No. of Attack,	
Occupation,		No. of Admissions,	
Degree Education,		Age First Attack,	
Profession Religion,		Time of Leaving,	
Habits,		Time in Hospital,	
Nativity,		Result,	
Physicians Committing,			
Correspondents,			

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:	EMOTIONAL STATE:
Clear or Confused,	Normal, Calm,
Quick or Sluggish,	Indifferent,
MEMORY:	Exalted,
Past Events,	Depressed,
Recent Events,	DELUSIONS:
Special Subjects,	Systematized or Not,
PERCEPTIVITY:	Special Subjects,
Alert or Dull,	Transitory or Not,
Correct or Illusive,	HALLUCINATIONS:
REASONING POWER:	ILLUSIONS:
Ordinary Subjects,	CONVERSATION:
Own Mental State,	Coherent or Incoherent,
Special Subjects,	Voluble or Reticent,
GENERAL DESCRIPTIVE REMARKS:	

cl.
54486 for Mrs

From page 172

David A. Carney.

1894 Jan 30 (Cayuga) Capt 6 ward — Got into trouble with patients. Inclined to be alone. Does not take any part in games, does not help self. Has spells of laughing to himself. Appetite fair. Bowels reg. Feby 1/94 Wt 163. Q big —

Feb 2/28 — Feb 28/94. Quiet & well-behaved. Always keeps by himself, walking the hall, a good deal of the time. Has strange ideas. Is very suspicious. Says that people distort his clothes at night". In good health. —

Mar 3/31 — March 3/94. Wt 159 lbs. Pulse 100. March 31/94. Has "spells", at times, of talking loudly to himself. In other respects, there is no change to note in patient's condition. Habits are cleanly.

Apl 2/30 — Apl 2/94. Wt 161 lbs. Pulse 92. April 30/94. No change to note, for several months past.

May 31 / June 30 / July 31 — During these 3 months, patient has continued in about the same condition, mentally & physically. He keeps in good bodily health. (Wt. May 3-151 lbs; June 1-161 lbs; July 4th - 164 lbs) He does not seem to improve any. Still shows delusions; is very suspicious of every one; very changeable in manner. Of a mean & contrary disposition, at times. Has "spells" of talking to himself & much inclined to be alone. Does no work. Appetite is poor; bowels regular. Was visited by his sister on June 20th last. —

Aug 31 / Sep 30 / Oct 31 — During this period, there does not seem to be any change whatever in patient's condition. Mentally or otherwise, & note for previous 3 months (above) still holds good. Inclined much to be alone. Has many delusions. Is suspicious & faultfinding. Habits clean. Health good. (Wt. 8/1 - 159 lbs. Pulse 80: Sept 9/3 162 lbs. Pulse 84 and Wt. 10/2 - 160½ lbs. Pulse 91. —

Nov 2 / Dec 3 1895 / Jan 3/31 — Nov 2/94. Wt 160½ " " 76. Dec 3/94. Wt 174 lbs. Pulse 122 - Jany 3/95. Wt 180 pounds (he has been gaining considerably in flesh, of late) Pulse 96. Jany 31/95. Still much inclined to be alone - is very suspicious has many delusions. Does no work. Health is good -

Feb 2 / Mar 2 / Apl 1/30 — Feb 2/95. Wt 185 lbs. P 99. March 2/95. Wt 184½ lbs. P 80. Apl 1/95 Wt 185 lbs. P 96. Apl 30/95. No change; keeps about the same, all the time. Still holds delusions and talks nonsensically - Very suspicious. Sometimes abuses attendants & patients - Does no work.

May 1/30 — May 1/95. Wt 190 lbs. Pulse 74. May 30/95. Is very nervous, restless patient. Annoys, at times abuses, the other patients. Has many & various delusions. Walks up & down hall a great deal, talking to himself. Health is good.

June 1/30 — June 1/95. Wt 192 lbs. P 80. June 30/95. Still walks up & down hall, talking to himself. No change to note in his condition, either mentally or physically.

July 1/31 — July 1/95. Wt 190 lbs. P 78. July 31/95 Still restless, talkative & full of delusions. Always wanting to get out. "Thinks there is something wrong at home". Appearance is neat & clean. Walks out with the rest, but does no work. Seldom converses with anyone: does not talk sensibly when he does converse. On the whole, no improvement noticed. Aug 1/95. Wt 192 lbs. P 76.

Aug 1 / Sept 1 / Oct 1/31 — Sept 1/95. Wt 190 lbs. P 96: Oct 1/95. Wt 195 lbs. P 80. Oct 31/95: Very lazy indolent patient: does not even care to shave himself or wash them. Physical condition very good: has numerous delusions & is very cranky & mean at times. Does not want to do anything: is very sullen & obstinate. Never does any work. Makes no complaints. Of late, appeared to be growing worse. Nov 1/95. Wt 191½ lbs. P 84. Dec 1/95. Wt 186 lbs. Pulse 92

Nov 2 / Dec 1 1896 / Jan 2/31 — Jany 1/96. Wt 189 lbs. P 98. Jany 21/96. Transferred to B 2/4 (on account of general changes in the wards) Jany 31/96. No change noticeable in any way. Still holds numerous delusions: also has hallucinations - Very annoying at times: Physical condition good —

to Patient's Ledger Page 282

From 140.

Edward McCarthy

Mar 31/94 Cont'd — and appears very weak. 12-30. Bowels moved. Patient is steadily confined to his bed. —

April 1/94. Rest and sleep at night have become much poorer and of late, he has been sleeping only from 1 to 2 hours, nightly. Drank considerable milk during last night. 11. Am. Had a severe "coughing spell" and raised considerable phlegm, streaked with blood. Also had nose-bleed. 2 Pm. Groaning and in pain. 4 Pm. Complains of a severe pain in Stomach: was given 1/3 whiskey & his mouth

April 2/94. Was quiet, for all night; perspiring a great deal, part of the time cold & having some very hard coughing "spells". Eats no solid food but drinks considerable quantities of milk. Wt 89 lbs.

April 3/94. "Groaned all night; also coughed some: had four slight passages during the night. 8 Am. Is groaning; "says he is in pain" - 10. Am. Is now resting quietly. 330 Pm. Bowels moved freely.

April 4/94. Drank 3 cups of milk last night. Takes but little nourishment of late; still, at times, will appear fairly strong, considering his condition. Is not coughing as much as usual

April 5/94. but raises considerable phlegm. April 5/94. Drank 2 cups of milk last night - had some severe "coughing spells". Coughed a good deal today & raised considerable phlegm.

April 6/94. Seemed quite weak & have several spells of coughing during the night. Coughed a great deal today, but has been fairly bright. April 7/94. Had 2 passages, last

April 7/94 night; also some severe "coughing spells"; complained of severe pains in Stomach and Ear. Has been resting quietly all day. Took but little nourishment, today. —

April 8/94. Has several passages, also "coughing spells" during the night. Is perspiring a great deal today; also has had "coughing spells" - Bowels have moved freely, today. —

April 9/94. Has coughed and moaned all night, and talked a great deal. Has been quite stupid, almost all day: coughed but little - Bowels have moved twice, today.

April 10/94. Tossed and tossed about a good deal, during the night. Has a slight sore on back. Has been fairly quiet all day. Is on diet of eggnog. Takes reasonable amount.

April 11/94. Patient has been very quiet all day; coughed but little. Bed sore dressed daily.

April 12/94. Bowels move daily. April 13/94. Has been quite restless last night: appears much

April 13/94. weaker today, than usual. April 13/94. Continues to grow weaker, daily.

April 14/94. 7 Pm. Complains of severe pain in Stomach. Has given whiskey & brandy 1/3.

April 15/94. Very restless all night - Appears weaker than usual, this morning —

April 16/94. 7 Am. Is very weak; respiration labored; appears to be rapidly failing.

11. Am. Feet & hands growing cold. Sleep rest at night have continued very poor.

Patient continued to sink Rapidly and died at 1.25 P.M.

Att

Edward McCarthy

April 16/94 Cont'd — His mother had, for some weeks, been [illegible] Hospital, [illegible] patient,

Vol 20 3/12

DETAILED HISTORY OF SICKNESS OF MR. C. K. Haupt

DIAGNOSIS.

1894 Q 2 E

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
June 28	7	5	100	112					Abdomen Swollen appears much weaker. 5 slight passages
	7.30								
	4	5							Bed sores very bad.
29	7	10	106	120					
30	7		120		36				Night. Has Bowels moved. Has been slightly noisy all night. Seems in great pain.
	10	10							Very restless morning
	12 M								Unable to pass urine or fæces
		4.10							Expired.

					Has been Quite noisy during night and day.
25,	7 A. M.		108	" "	
	5 P. M.		116		Bowels moved.
	5 A. M.				" "
	7 P. M.				Noisy most all day.
					Night. 11 Passages noisy all a M.
26,	7 A. M.		100	" "	
	5 P. M.		112		
27,	7 A. M.		104	" "	Unconscious all day.
	5 P. M.		116		Bowels moved
	9 A. M.				

Recorded by T. R. Spillane Nurse.

Recorded by T. R. Spillane Nurse.

From 340.

Mar 31/94 Cont'd. and appears very wea

April 1/94. Rest and sleep at night ... to 2 hours, nightly. Dra... spell" and raised consider... rest in pain. 4 Pm. Co...

April 2/94. Was quiet, for all night; pers... Coughing spells". Eats no sol...

April 3/94. Groand all night; also coughed ... groaning; "says he is in pain"

April 4/94. Drank 3 cups of milk last n... will appear fairly strong, consider... but raises considerable phlegm.

April 5/94. had some severe "Coughing spells". Coughed a good deal today & raised considerable phlegm.

April 6/94. Seems quite weak & have several spells of coughing during the night. Coughed a great deal today, but has been fairly bright. April 7/94. Had 2 passages, last

April 7/94 night; also some severe "Coughing spells"; complained of severe pains in Stomach and Ear. Has been resting quietly all day. Took but little nourishment, today. —

April 8/94 Had several passages, also "coughing spells" during the night. Is perspiring a great deal today; also has had had "coughing spells". Bowels have moved freely, today. —

April 9/94 Has coughed and moaned, all night, and talked a great deal. Has been quite stupid, almost all day: coughed but little - Bowels have moved twice, today.

April 10/94 Tacked and tossed about a good deal, during the night. Has a slight sore on back. Has been fairly quiet all day. Is on diet of eggnog. Takes reasonable amount.

April 11/94 Patient has been very quiet all day; coughed but little. Bed has been dressed daily.

April 12/94. Bowels move daily. April 12/94. Was quite restless last night: appears much

April 13/94. weaker today, than usual. April 13/94. Continues to grow weaker, daily.

April 14/94. 7 Pm. Complains of severe pain in stomach. Has given whiskey & bismuth 13.

April 15/94. Very restless all night - Appears weaker than usual, this morning -

April 16/94. 7 AM. Is very weak; respiration labored; appears to be rapidly failing.

11. AM. Feet & hands growing cold. Sleeps most of night have continued very low.

Patient continued to sink Rapidly and died at 1.30 P.M.

Att

...wood freely.

...of late; still at times,

...not coughing as much as usual

...7/94. Drank 2 cups of milk last night -

...arm & right leg.

...no nourishment

...twitching and

...en very noisy

...ing during, today.

...during night.

...ore at back -

...t few days.

...ing in exp.

...times, less

...noisy all P.M.

...move freely.

...ly day. -

...y profusely.

...y night; &

...omen is

...ery bad.

...Seems in

...ables food.

...& twice.

...ven.

Edward McCarthy

Apl 16/94 Cont'd

His mother had, for some weeks, been boarding near the Hospital, and has been a constant, and almost daily visitor [illegible] Patient,

CASE RECORD.

Patient's Name C. H. Haupt Name Disease ..... Name Physician .....

Date 1894	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
June 21. 7 A.M.		108			Takes 3 quarts of milk daily.	Bed sores are growing much worse.
5 P. "	100.8	116	24			Bowels moved.
5 " "					" "	"
22. 7 A. "	100.4	104	26	Bath		" "
5 P. "	100.4	116	28			Has been quite noisy all night. Only sleep an hour.
11 A "						Slight passage
7.50 " "						
23. 7 " "	99.5	100			" "	
5 P. "	99	104	20			" "
8.30 A. "						" " Noisy all A.M.
5 P. "						
24. 7 A. "		90			" "	
5 P. "		104				Bowels moved
1 A. "						" "
5 P. "						Has been quite noisy during night and day.
25. 7 A. "		108			" "	
5 P. "		116				Bowels moved.
5 A. "						" "
7 P. "						Noisy most all day. Night. 11 Passages
26. 7 A. "		100			" "	noisy all A.M.
5 P. "		112			" "	
27. 7 A. "		104			" "	Very noisy all day.
5 P. "		116			" "	Bowels moved
9 A. "						

Recorded by T. A. Spillane Nurse.

Recorded by T. A. Spillane Nurse.

Edward McCarthy

Apr 6/94

His mother had, for some weeks, been boarding near the Hospital, and has been a constant, and almost daily, visitor, upon the patient, He [illegible] was not with him at time of his death.

April

April 5/9

April 6/94 [illegible] quite weak & have severe spells of coughing during the night. Coughed

April 7/94 a great deal today, but has been fairly bright. April 7/94. Had 2 passages, last night; also some severe "Coughing spells"; complained of severe pains in Stomach and Ear. Has been resting quietly all day. Took but little nourishment, today. —

April 8/94 Had several passages, also "coughing spells" during the night. Is perspiring a great deal today; also has had had "coughing spells" — Bowels have moved freely, today. —

April 9/94 Has coughed and moaned, all night, and talked a great deal. Has been quite stupid, almost all day: coughed but little — Bowels have moved twice, today.

April 10/94 Talked and tossed about a good deal, during the night. Has a slight sore on back. Has been fairly quiet all day. Low diet of eggnog. Takes reasonable amount.

April 11/94 Patient has been very quiet all day; coughed but little. Bed sore dressed daily.

Apl 12/94. Bowels move daily. April 12/94. Was quite restless last night: appears much

Apl 13/94. weaker today, than usual. April 13/94. Continues to grow weaker, daily.

Apl 14/94 7 PM. Complains of severe pain in stomach. Has given whiskey & brandy 13.

Apl 15/94 Very restless all night — Appears weaker than usual, this morning —

Apl 16/94 7 AM. Is very weak; respiration labored; appears to be rapidly failing.

11. AM. Feet & hands growing cold. Sleep & rest at night have continued very poor.

Patient continued to sink Rapidly and died at 1.25 P.M.

Att

6/94

CASE RECORD.

Patient's Name C. H. Haupt Name Disease ..... Name Physician .....

Date. June 1894	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
12. 7 A.M.		100			Takes nothing but	Quite noisy during
5 P. "		112			milk	day.
11.30 " "				R		Bowels moved.
13. 7 A. "		108				
14. 5 P. "		104				
7.30 A. "						" " slightly
15. 7 " "		96				
5 P. "		116		Bath		
2 " "						" "
16. 7 A. "		92				Has been very noisy
5 P. "		100				all night
17. 7 A. "		92				
2.30 " "						Bowels moved.
18. 7 " "		92				
5 P. "		104				
8 A. "						Has been slightly
						noisy at times.
7 " "						Bowels moved freely.
19. 7 " "		92				
5 P. "		108				
8 A. "						" " "
						Has been noisy all
						P.M.
20 7 A. "		80			Takes 3 quarts	Has been very noisy
5 P. "	103	114	32		of milk daily	all night.
						Has been in a sort
						of a stupor all this
						P.M. Eyes closed and
						perspiring profusely.

Recorded by T. R. Spillane Nurse.

Recorded by T. R. Spillane Nurse.

...ght leg.
...o nourishment
...twitching and
...een very noisy
...ay & night, today
...ng during night.
...ore a back —
...st few days.
...sing in legs.
...times, less
...
...noisy all P.M.
...els moved freely
..., by day. —
...ing profusely.
...by night; &
...stomach is
...very bad.
... seems in
...wallows food.
...time & twice
...hour.

Edward McCarthy

His mother had, for some weeks, been boarding near the Hospital, and has been a constant, and almost daily, visitor, upon the patient, though she was not with him at time of his death.

Body removed by his mother, this afternoon —

CASE RECORD.

Patient's Name Chas. H. Haupt. Name Disease ..... Name Physician .....

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
June 1894						
1. 7 A.M.		76			One Extra diet	Has been very noisy
5 A.M.		96				during night very
						slept 2 hours.
12.30 M.						Bowels moved.
2. 7. —		104				Cried not weigh.
5. —		100				
3. 7. —		84				
5. —		112				Night 1100 Passages
4. 7. —		104				
5. —		104				
8 A.M.						
8 "				Bath.		Bowels moved.
5. 7. —		88				
5. —		94				
6 7. —		88				
5. —		92				
7. 7. —		100				
5. —		104				
8. 7. —		100				
5. —		108				
9. 7. —		116				Noisy all A.M.
5. —		116				
1.30 A.M.						Bowels moved
						Very noisy all night
						only slept 1 hours.
10. 7. A.		94			"	Noisy all A.M.
5. P. "		104			"	
11. 7 A. "		120				
5. P. "		116				3 A.M. Bowels moved
8 A. "						Slight passage

Recorded by J. A. Spellane Nurse.

Recorded by J. A. Spellane Nurse.

April 6/94 — quite weak & have severe spells of coughing during the night. Coughed a great deal today, but has been fairly bright. April 7/94. Had 2 passages, last night; also some severe "Coughing Spells"; complained of severe pains in Stomach and Ear. Has been resting quietly all day. Took but little nourishment, today. —

April 8/94 — Had several passages, also "coughing spells" during the night. Is perspiring a great deal today; also has had had "coughing spells" — Bowels have moved freely, today. —

April 9/94 — Has coughed and moaned, all night, and talked a great deal. Has been quite stupid, almost all day: coughed but little — Bowels have moved twice, today.

April 10/94 — Talked and tossed about a good deal, during the night. Has a slight sore on back. Has been fairly quiet all day. Low diet of eggnog. Takes reasonable amount.

April 11/94 — Patient has been very quiet all day; coughed but little. Bed sore dressed daily.

April 12/94 — Bowels move daily. April 12/94. Has quite restless last night: appears much weaker today, than usual. April 13/94. Continues to grow weaker, daily.

April 13/94 — 7 P.M. Complains of severe pain in Stomach. Has given Whiskey & bismuth 13.

April 14/94 — Very restless all night — Appears weaker than usual, this morning —

April 15/94 — 7 A.M. Is very weak; respiration labored; appears to be rapidly failing.

April 16/94 — 11 A.M. Feet & hands growing cold. Sleep most of night have continued symptoms.

Patient continued to sink Rapidly and died at 1.35 P.M.

H.

From 240.

Edward McCarthy

Mar 31/94 cont'd

and appears very weak. 12-30. Bowels moved. Patient is steadily confined to his bed. —

April 1/94

Feet and limbs at night have become much bloated, and of late, he has been sleeping only from

April 3

April

April

April

April

April 9/

April 10

April 11

April 12/94

April 13/94

April 14/94

April 15/94

April 16/94

7 A.M. Is very weak; respiration labored; appears to be rapidly [illegible]

11. A.M. Feet & hands growing cold. Sleeps most of night had continued very bad.

Patient continued to sink Rapidly and died at 1.25 P.M.

Attd

Edward McCarthy

April 16/94 cont'd

His mother had, for some weeks, been boarding near the Hospital, and has been a constant, and almost daily, visitor, upon the patient, though she was not with him at time of his death.

Remains removed by his mother, this afternoon —

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CASE RECORD.

Patient's Name Chas. H. Haupt Name Disease ..... Name Physician .....

Date	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
May 29. 7. A.M.		84				
5. P.M.		92				
7.30 A.M.						Slight Passage.
						Bed pan quite an —
						flannel and an —
						creasing in size.
30. 7. —		100		Bath		
5. —		88				
2.30 P.M.						Bowels moved.
31. 7. —		96				
5. —		104				
7.30 A.M.						" "
1.30 P.M.						" "
						Death occurred P.M.

Recorded by T. A. Spillane Nurse.

arm & right leg.
no nourishment
twitching and
een very noisy
any urine, today.
ir during night.
sore at back —
st few days.
asing in size.
times, less
e. —
noisy all P.M.
els move freely.
e, by day. —
ning profusely.
by night; &
Abdomen is
very bad.
e. Seems in
walked feed.
time & time.
Nurse.

Mar 31/94 Cont'd

April

From Dr

and

Apr

Apr

Apr

Edward McCarthy

Apl 16/94 Cont'd

His mother had, for some weeks, been boarding near the Hospital, and has been a constant, and almost daily, visitor, upon the patient, though she was not with him at time of his death.

Remains removed by his mother, this afternoon —

CASE RECORD.

Patient's Name Chas H Haupt Name Disease ..... Name Physician .....

Day	Date. 1894	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
16.	12.30 M.					Refused meals	
	6 P.M.					" "	
17.	7 —	99	76	20			
	5 —	98	82	22			
	1 A.M.						Bowels moved.
	1.30 "						
	5. "						
	7. "					" "	
	12.30 M.					Drank 1½ glasses of milk.	
	7 P.M.					Refused food and meals.	
18.	7 —	98.6	84	21			
	5 —	98.6	84	21			
	2.30 A.M						Bowels moved
	1 P.M						" "
	6.30 — "						" "
	6.30 A.M.					Drank 1 glass of milk	
	6.30 P.M.					" ½ " "	
	12.30 M.						Did not take any dinner.
	6.30 P.M.				Sponge bath		
19.	7 A.M	97.4	90	20			
	5 P.M	96.6	90	26			
	1.30 A.M.						Bowels moved.
	6.30 — "					" 1 " " "	
	12.30 M.						Refused food.
	2. P.M						Quite noisy.
	6.30 "					" 2 " " "	
20.	7 A.M	97.4	84	20			
	5 P.M.	98.4	100	25			
	1 A.M.						Bowels moved

Recorded by T. P. Spellane Nurse.

April 15/94 Very restless, and [illegible]

April 16/94 7 A.M. Is very weak; respiration labored; appears to be rapidly [illegible]

11. A.M. Feet & hands growing cold. Sleep & rest at night had continued very poor.

Patient continued to sink Rapidly and died at 1.35 P.M.

Edward McCarthy

Apl 16/94 cont

His mother had, for some weeks, been boarding near the Hospital, and has been a constant, and almost daily, visitor, upon the patient, though she was not with him at time of his death.

Remains removed by his mother, this afternoon —

CASE RECORD.

Patient's Name Chas. H. Haupt. Name Disease ..... Name Physician .....

May	Date	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
11.	7 A.M		120			On extra diet.	Refused breakfast.
	5 P.M.	101.2	116	22			
	4 "						Apparently has spasmodic twitchings in left arm and right leg.
12.	7 –	99.8	104	22			
	5 –	101.4	112	23			
	1.30 A.M						Had a Convulsion lasting 15 minutes. Refused milk. Has taken no nourishment to day. At times has spasmodic twitchings.
13.	7. A.M	99.6	100	22		Drank 1 glass of milk.	
	5. P.M.	100.2	112	23			
14.	7 –	98	92	23			13th 11 A.M. Spell of twitching and throwing his hands.
	5 –	99	80	20			Night. Has been very restless.
	7.30 A.M					Drank 1 glass of milk.	
	1 P.M					" 2 " "	
	7 "					" ½ " "	
15.	7 –	98.2	80	20	Bath		During night, restless.
	5 –	101.2	92	20			
	7.30 A.M					" 1½ " "	
	12.30 P.M.					" 1 " "	
16.	7. –	100.2	72	19			Has been very restless and noisy during night.
	5 –	99.2	90	23			
	7 –					" 2 " "	

Recorded by J. R. Spellane Nurse.

Apl 15/94 Very restless all night.

Apl 16/94 7 A.M. Is very weak; respiration labored; appears to be rapidly failing.

11. A.M. Feet & hands growing cold. Sleep rest at night had continued very poor.

Patient continued to sink Rapidly and died at 1.35 P.M.

Edward McCarthy

Apl 16/94 cont

His mother had, for some weeks, been boarding near the Hospital, and has been a constant, and almost daily, visitor, upon the patient, though she was not with him at time of his death.

Remains removed by his mother, this afternoon —

CASE RECORD.

Patient's Name Chas N. Haupt Name Disease Name Physician

	Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
1st	May 1894 7 A.M.		84		Bath	On extra diet	Weight 102½ lbs.
	5 P.M.		96				
2.	7 A.M.		72				
	5 P.M.		72				
3.	7 A.M		84				
	5 P.M.		84				6 P.M. Bowels moved.
4	7 A.M		84				
	5 P.M.		84				
5.	7 A.M		80				
	5 P.M		92				
6.	7 A.M		92				9.30 P.M. Bowels moved.
	5 P.M		86				Bowels moved at 2. 4. 5.30 and 7.30 P.M.
7.	7 —		84		Gave bath 8 A.M.		
	5 —		74		" " 1.30 P.M.		84 5 P.M. Bowels moved.
							Fell out of bed and cut his head (dapping dog).
							7.30 and 8 A.M. Bowels moved
							3. 4 5 P.M. " "
8.	7. —		84		Gave bath 7 A.M.		8 A.M. Bowels moved.
	5 —		84				7 " " "
9.	7 —		72				Night — " " at 12.2.4.
	5 —		80				9 A.M. Put a bandage on eye.
10.	7 —		78				night — Bowels moved two times,
	5 —		74				10 A.M. Bowels moved quit freely. 6.15 P.M. Fell out of bed while I was running was feeding him and bruised his nose slightly.

Recorded by T. R. Gillane Nurse.

arm right leg.
no nourishment
twitching and
very noisy
any time, today.
during night.
sore on back —
last few days.
asing in legs.
times, less
noisy all P.M.
bels move freely.
s, by day. —
ning profusely
by night;
abdomen is
very bad.
Seems in
walks feed.
time & time.
Sore.

Apl 15/94 Very restless all night

Apl 16/94 7 A.M. Is very weak; respiration labored; appears to be rapidly failing.

11. A.M. Feet & hands growing cold. Sleep most at night have continued very poor.

Patient continued to sink Rapidly and died at 1.35 P.M.

H.

From 340.

Ed

Mar 31/94 Cont'd and appears very weak.

Apr

Apr 15/94 very restless, all night

Apr 16/94 7 A.M. Is very weak; respiration labored; appears to be rapidly failing.
11. A.M. Feet & hands growing cold. Sleeps most of night had continued very poor.
Patient continued to sink Rapidly and died at 1.25 P.M.

Att

Edward McCarthy

Apl 15/94 Cont'd

His mother had, for some weeks, been boarding near the Hospital, and has been a constant, and almost daily, visitor, upon the patient, though she was not with him at time of his death.

Remains removed by his mother, this afternoon —

Died —

From 140.

Charles N. Haupt

1894

May 11 May 11/94. Refused breakfast. 4 P.M. Apparently has spasmodic twitching in left arm & right leg.

" 12 May 12/94. At 1.30 A.M., had a convulsion lasting 15 minutes - Refused milk. Has taken no nourishment today; at times, has had spasmodic twitchings. May 13/94. 11. A.M. Has spell of twitching and throwing his hands. May 14/94. Was very restless, last night. May 17/94. Has been very noisy and restless, the past 3 nights. May 18/94. Bowels move very freely. Did not take any dinner, today.

" 13

" 14

" 17/18

" 19/20 May 19/94. Refused food today: is quite noisy this afternoon. May 20/94. Very noisy during night.

" 21 Slept only 2 hours. Took some solid food, today. May 21/94. Has quite a large bed-sore on back - same dressed with vaseline & a bandage. May 27/94. Bowels quite loose, the past few days. Does not look as bright, today, as usual. May 29/94. Bed-sore quite inflamed & increasing in size.

" 27

" 29

" 31 May 31/94. Patient is steadily confined to his bed. Lies there fairly quietly, though, at times, he is quite noisy - Sleeps poorly. Habits very dirty. He is failing quite rapidly. —

June 1/8 June 1/94. Very noisy during night; slept only 2 hours. Bowels moved. June 8/94. Noisy all P.M.

9/11 June 9/94. Very noisy all night; only slept 1 hour: Noisy all. A.M. June 11/94. Bowels move freely.

18 June 18/94. Frequently noisy by night, sleeping very poorly. Noisy also, at times, by day. -

20 June 20/94. Has been in a sort of stupor all this P.M.; eyes closed and perspiring profusely.

21/22 June 21/94. Bed sores growing much worse. June 27/94. Continues noisy by night; at times, extremely so, by day: bowels move quite freely. June 28/94. Abdomen is

" 28 swollen, today; patient appears much weaker. June 29/94. Bed sores very bad.

" 29

" 30 June 30/94. Has been slightly noisy, all night; bowels moved. 10. A.M. Seems in great pain. 12 M. Has been very noisy all morning. Is unable to swallow food. Relatives have been kept advised of his critical condition, from time to time. 4 10 P.M. Patient continued to sink rapidly & died at this hour.

Remains removed by relatives

Died