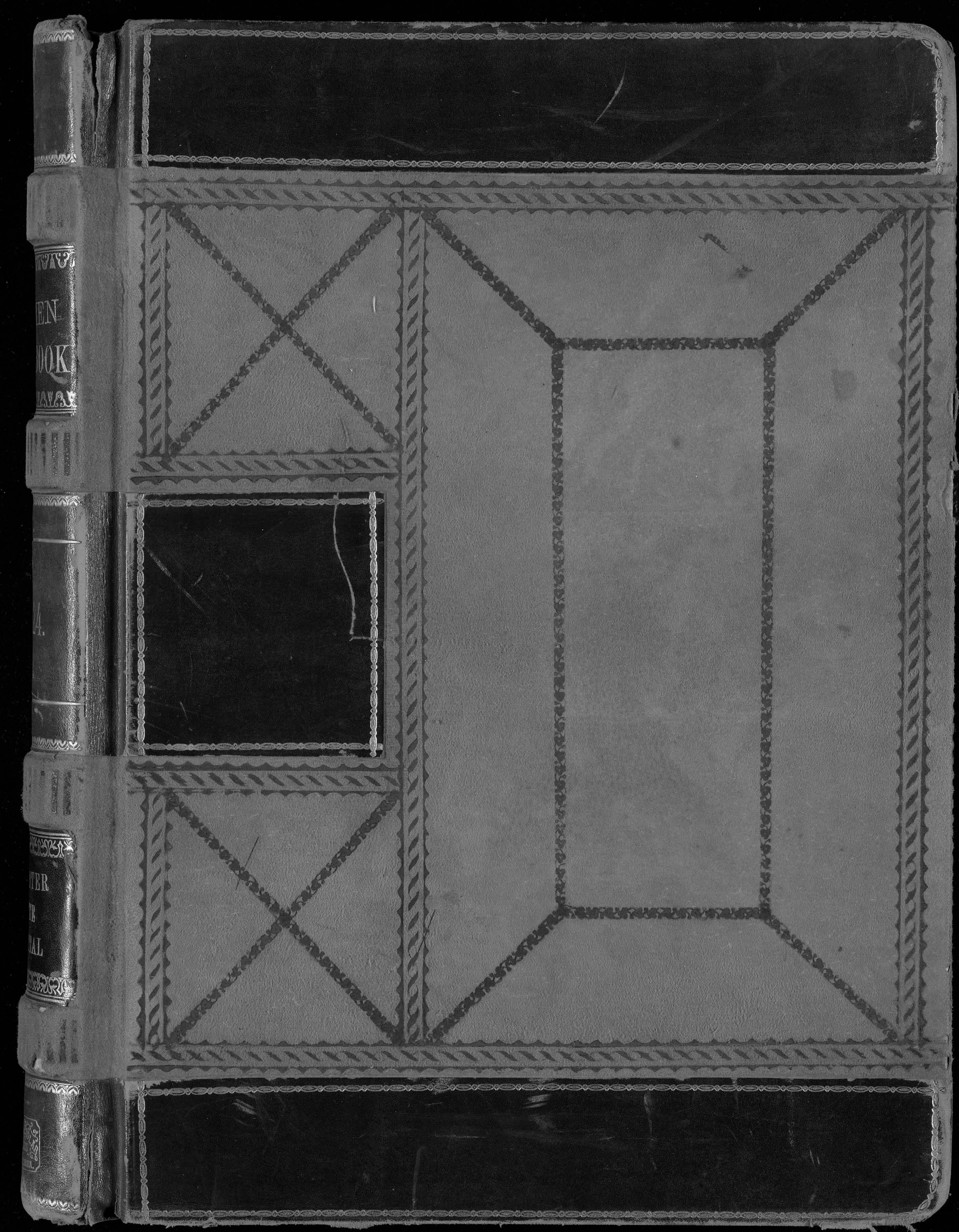


Rochester State Hospital (Minn.). Patient Case Books.

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Personal and Medical History of

Personal and Medical History of Anna Widmann

HERBERT, PUCKEY & CHAMBERS, DAVENPORT, IOWA

Whole No. 3348
Residence, Pickerel Lake Fuchon Co/
Date Admission, May 22 - 1893
Admitted by, Dr Kilbourne Hour, 7 P.M.
How Sent, of Prof Herman Blackmer
Sex, Female
Age,
Civil Condition, Married
Children, 10
Age Youngest Child, 6 mos.
Occupation, Housewife
Degree Education, Common School
Profession Religion, Methodist (German)
Habits, Good
Nativity, Wife - Father + Mother born Switzerland
Physicians Committing, H. H. Wilcox + J. P. Berg -
Correspondents, Dr Van Berg Albert Lea Minn
George Widmann Jr (Husb) Albert Lea Minn

No. for Year, 260
Insane Relatives, First cousin on Mothers side
Cause Exciting, General Weakness from Anaethesia
Cause Predisposing, Heredity
Form, Acute Mania
Accompanying Bodily Disorder, Anaemia
Suicidal or Not, Threatened
Date of this Attack, May 8 - 1893
Duration, Two weeks
No. of Attack, 2
No. of Admissions, 1
Age First Attack, Unk.
Time of Leaving, July 25th '93
Time in Hospital, 2 mos, 3 ds.
Result, Recovered

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined June 9 - S. L. Phelps

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Quick
MEMORY:
Past Events, Partly correct
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Comprehends at times
Correct or Illusive, Illusive at times
REASONING POWER:
Ordinary Subjects, At times fair
Own Mental State, At times realizes condition
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, On admission very excitable
Depressed, and noisy
DELUSIONS: Controlled by voices
Systematized or Not, delusional
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: When first admitted
Coherent or Incoherent, was very incoherent
Voluble or Reticent, but now at times talks quite well - and realizes that she has not been right in her mind

Personal and Medical History of Anna Widmann

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2 1/2 in WEIGHT, 105 1/2 lbs NUTRITION, Pale and anaemic
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, None Coatings, None Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Good Accommodation, Good
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, None Tongue, None
Facial Muscles, None General,
REFLEXES, Patellar, Equal & Some ankle cl
Other Reflexes,
ARTICULATION, Hesitating, Prompt Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Normal sounds
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., ~~Can~~ May 26 - Had a miscarriage during night
MENSTRUATION, May 26 - Curetted and irrigated uterus with 1/4000 Bi Chl. Put to bed for the week.
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Clean	Careless,
BOWELS, Normal,	Constipated, Constipated	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good, Good	Poor,	Irregular,
PULSE, 76	RESP., 22	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,

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893 This woman was brought here by Deputy Sheriff Torgerson and lady attendant. Symptoms of insanity were first manifested twenty years ago by melancholy behaviour after child birth, lasting about 2 mo. Symptoms of this attack were manifested May 8 by her becoming reticent refusing to eat and drink from the 8th to 11th claiming that she had a conviction that she should not eat. Claims that she is a certain female character of the Bible and that she is ordained to do a certain work. Claims to be aided by certain young men in her neighborhood. Has shown a disposition to injure others. Several times called for a butcher knife to cut her head off. Her religious impressions were strong. Neither the patient or her parents were ever addicted to intemperance or use of narcotics. Has been under restraint since May 14. Has been under treatment in way of tonics, hypnotics and applications. Seemed to be benefited thought. It has been very difficult to get her to take medicine. Has been anaemic. Was nursing a baby up to this attack. Said she was willing to go to the Hospital for Insane if we thought it was right. Looks anaemic and exhausted and inverted nipples, lying on the floor. Tried to escape by knocking out a window. Does not sleep well. Has manifested a disposition to run away, to injure others.

May 22 Upon admission patient was noisy. Incoherent in talk. Bodily condition dirty.

" 23 Was quiet in the morning but extremely noisy during the day. Appetite not very good. Bowels constipated. Slept fairly well during the night. Temp 98. P 86. R 22.

" 24 Slept only three hours during the night. Was excited during the day. Gave hypodermic to quiet her. Talk incoherent. Temp 99. P 84. R 24.

" 25 Refused to eat. Extremely noisy during the night and day. At 10 P.M. while up on chamber she had a miscarriage and mutilated herself. A hot vaginal douche was given of Bi Chloride sol 1:4.000. Hot water had just to put. Temp 99.4. P 80.

" 26 Curetted and irrigated the uterus with Bi Chloride Sol. 1:4.000. Put on dressings and put to bed. Temp 100.6 P 80.

" 27 Found a rubber night cut of bed at one time. Sedatives given. Hypodermic given this morning. Rested sleeping.

" 28 Very violent, restless and noisy all night. Put her in restraint. Very noisy this morning. Hypodermic given with no effect.

" 29 Tried to quiet. Required constant watching. Kept in restraint.

1893 9.30 A.M. June 1 Has been in restraint or constantly held by two attendants. Very wild and violent. Bit her thumb and it is swollen and red.

June 4 Has been in restraint every day. Very violent when out. Noisy and incoherent. Appetite very poor. June 6 Ate a good dinner but refused her supper. Much ignorance. June 7 Refused her dinner. Noisy.

" 8 Ate her three meals. Noisy about two hours during the night.

" 9 Rec. from C V

" 30 Appetite good & very much improved in every respect.

July 10 Visited by husband who said she was not quite right, though pleasant & bright. Is a little weak minded.

" 14 Visited by former minister & friends.

" 15 Gone to the shows.

" 23 Bowels seem very much bloated.

" 25 Visited by husband returned home with same.

HARRITT, FOLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3350
Residence, Utica Winona Co
Date Admission, May 24-1893
Admitted by, Dr Phelps Hour, 12 noon
How Sent, Jos Post & L. Peck
Sex, Female
Age, 70
Civil Condition, Married
Children, 4
Age Youngest Child, 25 yrs
Occupation, Housewife
Degree Education, Common
Profession Religion, Lutheran
Habits, Good
Nativity, Germany
Physicians Committing, J B McLaughry & D S Mahan
Correspondents, Richard Beyer Son Winona Minn / Miss Augusta Beyer Fairbanks

No. for Year, 262
Insane Relatives, None
Cause Exciting, Unknown
Cause Predisposing, Unknown
Form, Senile Dementia
Accompanying Bodily Disorder, None
Suicidal or Not, Not
Date of this Attack, May 1893
Duration, 2 months
No. of Attack, 2-
No. of Admissions, 1
Age First Attack, 67
Time of Leaving, Dec 6. 1894
Time in Hospital, 6 months 12 days
Result, Died.

EXAMINATION ON ADMISSION.
MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Seems much impaired
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,
REASONING POWER: Impaired much
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Very dull and demented.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Indefferent
Exalted,
Depressed,
DELUSIONS: Can not determine
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Talks to himself
Voluble or Reticent, almost cannot audibly

EXAMINATION ON ADMISSION.—(Continued.)
PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1 inch WEIGHT, 102 lbs NUTRITION, Poor
WOUNDS OR ABNORMALITIES, Bruised quite badly on limbs and arms
TONGUE, Tremors, Can not tell Coatings, Promptness Movement,
PUPILS, Equality, Size,
Response Light, Accommodation,
SIGHT, Much impaired Seems almost blind
HEARING, Seems good

Case No. 3350. Henrietta Beyer. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

…le Talks a good deal

REFLEXES, Patellar, Can not test
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Very dull & demented
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION, Ceased
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Constipated Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 80 RESP., 19 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 Henrietta Beyer

HERBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3350

Residence, Utica Winona Co

Date Admission, May 24-1893

Admitted by, Dr Phelps Hour, 12 noon

How Sent, In Prof. H. L. Rick

Sex, Female

Age, 70

Civil Condition, Married

Children, 4

Age Youngest Child, 25 yrs

Occupation, Housework

Degree Education, Common

Profession Religion, Lutheran

Habits, Good

Nativity, Germany

Physicians Committing, J. B. McLaughry & D. S. Mahan

Correspondents, Richard Beyer Son Miss Augusta Beyer Daughter Winona Minn

No. for Year, 262

Insane Relatives, None

Cause Exciting, Unknown

Cause Predisposing, Unknown

Form, Senile Dementia

Accompanying Bodily Disorder, None

Suicidal or Not, Not

Date of this Attack, May 1893

Duration, 2 months

Time in Hospital, 6 months 12 days

Result, Died.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Seems much impaired

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive,

REASONING POWER: Impaired much

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Very dull and demented.

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Indefferent

Exalted,

Depressed,

DELUSIONS: Can not determine

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Talks to herself

Voluble or Reticent, almost constantly

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1½ in WEIGHT, 102 lbs NUTRITION, Poor

WOUNDS OR ABNORMALITIES, Bruised quite badly on limbs and arms

TONGUE, Tremors, Can not test Coatings, Promptness Movement,

PUPILS, Equality, Size,

Response Light, Accommodation,

SIGHT, Much impaired Seems almost blind

HEARING, Seems good

COORDINATION, Arms, Impaired

Legs, Impaired Seems feeble Totters a good deal

TREMORS, Hands, Not marked Tongue,

Facial Muscles, General,

REFLEXES, Patellar, Can not test

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Very dull & demented

SENSIBILITY,

HEART, Sounds and normal

LUNGS, Seem in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION, Ceased

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Dirty Clean, Careless,

BOWELS, Normal, Constipated, Constipated Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 80 RESP., 19 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,

BARRETT, FICKAN & CHAMBERS, DAVENPORT, IOWA

1893 This woman was brought here by Dep. Shf. Husband and daughter-in-law. The first symptoms were manifested about two and one half years ago and has had spells at various times since. First symptoms of this attack were manifested two weeks ago by scalding, tearing clothing and antly walking about, incoherent in speech, taking off clothing. Disease is uncertain but has had no rational intervals. Eats well and says she is going away. Owns nobody not even her own children. Violent on getting. No disposition to injure others. Has been necessary to keep her locked up in the house to prevent her running away during the past two years. She is restless and independent.

May 24 Patient has been quite uneasy and at times became angry. Would not sit down. Can not understand or talk English. Bowels constipated.

" 26 Eats very little and is restless and scolds a good deal. Is violent at times, slapping and hitting.

" 26 A great deal more quiet today. Drinks weak and puts her to bed. Temperature was below normal. Eats but little.

" 27 Ate very little. Pulse 60 and very weak. Her shoulders and back seem lame and sore. Complains of abdomen.

" 28 Is in bed all day. Very quiet. Pulse 60. Temp. below normal. Appetite good. Bowels constipated. Put upon enemas Jij every 2 hrs.

" 29 In bed all day. Seems very cold. P 64. Temp. 98.4. R 18.

" 30 Appetite fair. P 68. Temp. 98. R 18.

" 31 Upon the hall today. Is very restless. Scolds a great deal.

June 1 Very restless. Walks up and down the hall.

" 3 Almost impossible to have her sit still. Takes off her clothes.

" 4 Rejects supper, being put to bed. Wanders up and down the hall.

" 5 Very troublesome in wandering around in an aimless demented manner. Very untidy in habits and appearance.

" 30. Appetite good. Habits dirty. Sick in bed 10 days, when out of bed walks around a great deal. Incoherent.

July 4. Visited by husband. She lies in bed, changes little. Is hardly strong enough to be up.

" 17 Some of the folks visited her. July 18. 93. Appetite good. Habits dirty, almost blind, very noisy and walks all

Aug 30 time when out of bed. In bed 17 days. Talk incoherent. Aug 30. 93. About the same. Sick in bed 2 days.

Husband & daughter visited her. Sept. 15. 93. She had a fit & strangled, not hurt, was sick in bed all day.

Sept 29. 93. Appetite good. Dirty in habits. Very noisy most of the time & walks the floor most of the time. Was sick in bed 2 days.

Oct. 31. " Appetite good. Dirty in habits. Behavior untidy, very hard to take care of. Has been in bed 18 days.

Seems to be better to be kept in bed. Has bed sores, after lying in bed 2 days. Fell out of bed today, cutting

Nov 21 her head - getting a black eye. Nov. 7. 93. Was visited by a minister. Nov. 21 93. Was visited by daughter &

" 24 husband. Nov 29. 93. Appetite good. Dirty in habits. Stays in bed every day, seems weak. Can

1893 Continued

Nov 29 hardly walk alone. Bowels regular.

Dec 10/31 Dec 10/93. No material change in patient's condition. Dec 31/93. Appetite fair. Stays in bed all the time. Is very hard to take care of. Untidy; dirty in her habits. Talks and scolds a good deal.

1894

Jany 19 Jany 19/94. Has today visited by her husband. Jaw 31/94. Still remains in bed. Does not change any.

Febry 10/28 Febr 10/94. Keeps about as above described. Febr 28/94. No change. Still remains in bed.

Mar 10 Mar 10/94. Appetite not very good. Is very dirty in her habits. Still sick, in bed. - Seems weak.

" 12 March 12/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. She was, today, Taken out and Returned under "new Warrant" from Chariton County.

May 30. 94 Appetite poor. Sick in bed. Patient thin in flesh. Dirty in habits. Behavior quite noisy at times. Still incoherent. Visited by husband.

June 27. 94 Appetite fair. Very untidy in habits. Lies in bed all the time. Has bed sores. Gen. health poor. July 4. 94 Visited by husband.

July 20. 94 Visited by minister from her church. July 27. 94 Appetite good. Gen. health about the same. Still in bed. Untidy in habits.

Aug 20. Continues about the same, still in bed. Eats quite well. Untidy in habits. Sleeps most the time. Aug 23. 94 Transf. to Infirmary.

Aug 31. In bed 9 days on this ward this month. During her stay on Infirmary Ward she enjoyed a pretty good appetite and also good night rests. On Sept. 11. 94. she had a fit. Bed sores were dressed with boracic acid on Oct 22. Had a fit on Oct 27. 94 at 4:30 am these convulsions are probably central perhaps secondary to the heart trouble & atheroma. Was sometimes restless during the day. Bed sores were dressed again on Nov. 4. 94 also Nov 10. 11. 12. 13. 14. Set up one hour on Nov 15. Bed sores dressed every day. Bowels very constipated Dec 3. also bed sores very bad, did not take food very well on Dec 5, seemed much weaker and

Died Dec. 6. 1894. 2 P.M.

For particulars see Nurse's record.

Personal and Medical History of Annie Schneider

Whole No. 3351
Residence, 2225 University Ave St Paul
Date Admission, May 24 - 1893
Admitted by, Dr Phelps Hour, 7
How Sent, Jos Supt. J. B. Olivier
Sex, Female
Age, 26
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Domestic
Degree Education, Common Schl
Profession Religion, R. C.
Habits, Good
Nativity, Minn Father Bohemia
Physicians Committing, Geo. J. Hanley
Correspondents, Mrs J. Fricht 2225 University Ave St Paul (Sister)

No. for Year, 263
Insane Relatives, None
Cause "Amenorrhoea"
Cause supposing, Unknown
Form, Acute Mania
Accompanying Bodily Disorder, Some menstrual trouble
Suicidal or Not, Not
Date of this Attack, May - 1893
Duration, About two weeks
No. of Attack, 3
No. of Admissions, 1
Age First Att. 23
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Very stubborn
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Will not answer
Correct or Illusive, questions
REASONING POWER:
Ordinary Subjects, Impaired
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Very stubborn at first would talk a little then refused to answer any questions or do anything

EMOTIONAL STATE:
Normal, Calm, Disagreeable in manner
Indifferent, Indifferent
Exalted,
Depressed,
DELUSIONS: Seems to have many
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Will not talk
Coherent or Incoherent,
Voluble or Reticent,

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2 in WEIGHT, 97½ lbs NUTRITION, Rather poor
WOUNDS OR ABNORMALITIES, Says has had fleck of late, that used to be floaty
TONGUE, Tremors, Can't hold still Coatings, Red edges Promptness Movement, and very rapid in action
PUPILS, Equality, Equal Size, Normal
Response Light, Will not attend Accommodation, tested
SIGHT, Seems good
HEARING, Dull,
COORDINATION, Arms, Has stubborn to test

Case No. 3351 Annie Schneider. File No. 9
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

ARTICULATION, Hesitating, Seems normal Slurred, when she will talk
FACIAL EXPRESSION, Indifferent
SENSIBILITY,
HEART, Sounds are normal but very quick
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless, Careless
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, Quick	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,

ROBERT, PIGLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3357

Residence, 2225 Univ Ave St Paul

Date Admission, May 24 - 1893

Admitted by, Dr Phelps Hour, 7

How Sent, Jos Prof J. B. Oliver

Sex, Female

Age, 26

Civil Condition, Single

Children,

Age Youngest Child,

Occupation, Domestic

Degree Education, Common Sch[illegible]

Profession Religion, R. C.

Habits, Good

Nativity, Minn Father Bohemia

Physicians Committing, Geo. J. Hanley

Correspondents, Mrs J. Frucht 2225 University ave St Paul (Sister)

No. for Year, 263

Insane Relatives, None

Cause [illegible] "Ammonhoea"

Cause [illegible]posing, Unknown

Form, Acute Mania

Accompanying Bodily Disorder, Some menstrual trouble

Suicidal or Not, Not

Date of this Attack, May - 1893

Duration, About two weeks

No. of Attack, 3

No. of Admissions, 1

Age First At[illegible]

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Very stubborn

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Will not answer

Correct or Illusive, questions

REASONING POWER:

Ordinary Subjects, Impaired

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Very stubborn At first would talk a little then refused to answer any questions or do any thing

EMOTIONAL STATE:

Normal, Calm, Disagreeable in manner

Indifferent, Indifferent

Exalted,

Depressed,

DELUSIONS: Seems to have many

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Will not talk

Coherent or Incoherent,

Voluble or Reticent,

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2 in WEIGHT, 97½ lbs NUTRITION, Rather poor

WOUNDS OR ABNORMALITIES, Says has had fleck of late, that used to be floaty

TONGUE, Tremors, Can't hold still Coatings, Quite yes Promptness Movement, and very raw in centre

PUPILS, Equality, Equal Size, Normal

Response Light, Will not allow Accommodation, tested

SIGHT, Seems good

HEARING, Good,

COORDINATION, Arms, Too stubborn to test

Legs,

TREMORS, Hands, Tongue,

Facial Muscles, General,

REFLEXES, Patellar, ? Both equal

Other Reflexes,

ARTICULATION, Hesitating, Seems normal Slurred, when she will talk

FACIAL EXPRESSION, Indifferent

SENSIBILITY,

HEART, Sounds are normal, but very quick

LUNGS, Seem in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless, Careless

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, Quick 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 Annie Schneider

EGBERT, PUCKAN & CHAMBERS, DAVENPORT, IOWA

1893 This woman was brought here by Deputy Sheriff Cusick and her sister. This attack began about three weeks ago. Was taken in St Lukes Hospital and left without any results. This is the third attack. Had one three years and one two years ago. During this attack she has been melancholy and has manifested a fear of men. Symptoms are increasing. At times she is rational. She is irritable and unable to take care of herself. Has shown no disposition to injure others. No destructive or filthy habits. No restraint or confinement have been employed. Father is an incompetent person. Patient refuses to answer questions. Apparently intelligent. Has been very cautious, cries at times.

May 24 No injuries of body noted. Bodily condition as seen at both
" 26 Clara. Has been very quiet all day. Remains in her room. Talked in a silly way. Appetite not very good. Slept about four hours during the night. Temp 98.4 Pulse 70. R. R-19. Bowels are constipated.

May 26 Eats and sleeps well. Mischievous during the day. Was violent in the evening. Talked some about going home.
" 27 Has eaten very little. Says she is hungry. Attendant reports but will not eat at meal time.
" 28 Very restless in behavior. Bowels constipated.
" 29 Complains of being tired and asks to go to bed. Ate very little.
" 30 Mischievous and troublesome in behavior. Will not take medicine.
" 31 Appetite good. Bowels constipated. Talks very little and what she says is incoherent. Tries to run away when out walking.

June 1 Remains restless, incoherent, and mischievous.
" 2 Began menstruating this morning. Quiet in behavior.
" 3 Stopped planning and began again this A.M. Quiet in behavior.
" 6 Still planning. Quiet restless and noisy at times. Appetite good.
" 29 Appetite good: most of the time, violent at times, it takes 2 persons to hold her when out walking.
July 30 Appetite not very good, will not eat any breakfast, thinks it is a sin to eat anyway, hard to keep her on chair or bench, prefers to lying on floor under bed, violent at times, violent at times, often striking or kicking other patients or attendants. Aug 31. 93 No change. Sept 8 93 Visited by her mother.
Sept 24. 93 Very much disturbed. Using very profane language had to be kept in lower hall most of the day. Sept 27. 93 Very much disturbed using very profane language. Sept 28 93 Very noisy most of the day gave sleeping dose 9 P.M. Sept 30 93 Appetite good. Very noisy for the past week. Quiet in habits. Oct 12 93 Very erratic noisy & changeable.
Oct 18 93. Restless & awake 12 to 2 P.M. Talking & laughing 2 hrs
" 19 Visited by mother. Oct 20 93 Menstruating. Oct 31 93 Appetite good. Tidy about herself. Nov 2 93 Menstruating. Nov 16 93 Awake & restless from 1 to 3, laughing & talking

Personal and Medical History of Annie Schneider.

Nov 27 93 Menstruating Nov 29 93. Appetite good. Seen health good. Very noisy at times, using very profane language for the past 2 days, has helped in the dining Room. Rests about through. Rests well at nights.
Sept 29 93. Patients appetite good. Noisy some of the time. Habits dirty usually. Violent at times. Oct 30 93 About the same. Nov 29 93 Appetite good. Noisy at times. Habits dirty.
Dec 30 93. Patient sleeps quite well, at night. Appetite good. Bowels regular. Habits usually dirty. —
Jan 31 94. Continues to rest & sleep well, at night. Appetite is very good. Habits still dirty; requires constant watching: Wants to stay under the bed, all the time. —
Feb 22 Feb 22 94. About as above described. Is also somewhat destructive. Still requires to be constantly watched. Lies under bed or on floor of wash-room. Frequently takes off her clothes & washes them. Habits dirty.
" 23 Feb 23 94. This patient had been committed under the "Law of 1893" recently declared unconstitutional. She was today Taken out and Returned under "new Commitment Papers", from Olmsted County. March 30 94 Appetite good. Sleeps well. Is destructive violent at times. Habits dirty usually. Menstruating from the 24 to 28th. Bowels constipated. April 24 94 Appetite good. Sleeps well. Is destructive at times. Habits dirty occasionally. May 2 94 Menstruating. Quiet during period. May 4 94 Fought today. Had to be held about ½ hr. Very destructive with her clothing. May 24 94 Very careless in appearance. Manifests no interest in anything. Very destructive with clothing. Behavior quiet. June 4 94 Appetite good. Does no work. Sleeps well. Very careless about her appearance. Menstruating, very disturbed during period. Talks quite sensibly at times. Has silly delusions. She is rather destructive with her clothing. Bowels regular. June 24 94 Very violent during morning. July 6 94 Menstruating. July 16 94 Fought: Had to be held for about ½ hr. July 29 94 Menstruating. Quiet during period. Aug 2 94 Out riding. Fought Mrs Ricks & Miss Norris using profane & obscene language. Aug 28 94 Menstruating. Very careless in her personal appearance. Somewhat destructive with her clothing. Has very silly delusions. Sept 7 94 Appetite good. Sleeps well. Does no work. Behavior quite at times. Sept 14 94. Has been noisy and quarrelsome with other patients this P.M. Very careless in habits and especially in her personal appearance. Sept 26 94. Menstruating. Sept 28 94. Ran away while out walking. Was caught before
Nov 6 94. Extremely violent and noisy all day. Nov 12 94. Menstruating, quiet during period. Nov 29 Destroyed her dress today. Nov 30 94 No change apparent. Dec 4 94 Appetite good. Does no work. Behavior violent and noisy at times. Destroys her clothing and is very untidy in habits. Her talk is very delusive. Bowels constipated. Jan 1 95 Menstruation commenced disturbed during period. Jan 2 95 Menstruating. Jan 14 95 Very destructive all morning. Jan 22 95 Menstr. Feb 17 95 Violent. Noisy & violent all day. Feb 19 95 Visited by a gentleman friend. She behaved very nicely. She inquired about her mother. Home
Feb 24 Fought with Kate Gallagher. Received black eye. Mch 13 95 Appetite fairly good. Does no work. Untidy in her personal appearance. Bowels constipated. Behavior quite although at times she is extremely violent. Her talk is silly & incoherent. She has delusions. Mch 27 95 Menstruating. No change apparent. Apr 16 95 Becoming more demonstrative. Apr 25 95 Menstruating. May 2 95 Menstruating. She has been quiet and well behaved of late. May 31 95 Somewhat neater in her personal appearance. June 5 Appetite good. Does no work. Quiet generally. Sleeps well. Very untidy in dress. Unclean. Incoherent. June 9 Irritable. Pale & sallow most of time. Menstr.
July 4 Visited by brother & sister. July 5 Taken out for dinner by Brother. Behaved nicely. July 13 Menstr. Irritable at times. Quarrelsome with patients during period. Aug 23 Menstr. Sept 4 Very crazy during period. Bowels regular. Appetite good. Oct 10 Menstr. Complains of headache. Nov 18 Menstr. Nov 27 Quiet in behavior but careless & destructive in dress at times. Talks very incoherently & sometimes struggles. Does riding & walking. Gen. health good. Nov 30 Menstr.

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Personal and Medical History of Maggie Berry

SHERIDAN, PUGLEY & CHAMBERS, DAVENPORT, IOWA

Whole No. 3359
Residence, Kellogg Wabasha Co
Date Admission, June 2 1893
Admitted by, D. Phelps Hour, 2 P.M.
How Sent, In charge M. Kennedy
Sex, Female
Age, 26
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Housekeeping
Degree Education, Common School
Profession Religion, R.C.
Habits, Sob. Good Not good
Nativity, Minn Father + Mother Ireland
Physicians Committing, C. A. Lee + P. M. Kelly
Correspondents, Thos Berry Father Kellogg

No. for Year, 271
Insane Relatives, None
Cause Exciting, Neglect and Masturbation
Cause Predisposing, Unk
Form, Acute Melancholia
Accompanying Bodily Disorder,
Suicidal or Not, Not
Date of this Attack, May 28-1893
Duration, Few days
No. of Attack, 2
No. of Admissions, 1
Age First Attack, 25
Time of Leaving, Sept. 28 '93
Time in Hospital, 3 mo. 26 ds.
Result, Improved.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined June 2 J. S. Phelps

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

MEMORY:
Past Events, Partially correct
Recent Events, Confused
Special Subjects,

PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,

REASONING POWER: Impaired
Ordinary Subjects,
Own Mental State Thinks she was not right
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
When first admitted she knelt and prayed most of the time in a kneeling position. Now is just most of the time Cries easily

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Much depressed Cries a good deal

DELUSIONS: Has had many.
Systematized or Not,
Special Subjects,
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Partially coherent
Voluble or Reticent,
Talks a good deal at times Often sits quietly on the ward

Personal and Medical History of Maggie Berry

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in WEIGHT, 111½ NUTRITION, Good
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, None Coatings, None Promptness Movement, Normal
PUPILS, Equality, Equal Size, Dilated
Response Light, Sluggish Accommodation, Sluggish
SIGHT, Sometimes dazzling before eyes
HEARING, Good
COORDINATION, Arms, Fair Some deviation in testing finger to nose
Legs, Some dizziness in standing with eyes closed
TREMORS, Hands, Says sometimes Tongue, Slight
Facial Muscles, None General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Normal Slurred,
FACIAL EXPRESSION, Rather anxious
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal Position
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Constipated, Constipated Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 70 RESP., 20 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,

GIBBART, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893 This woman was brought here by Dicky Shaftmeir husband her wife. This attack first beg and in May 28-1893. Had an attack in Aug-1892 & about two weeks duration. Symptoms manifested by Excitement, praying, groaning destruction & clothing. Sat quietly and behaved well during examination. Face red, Eyes suffused. Face intelligent & correct history of the present life. Remembers facts quite well. Thinks she has a disease. Says she was misled under promise of marriage. No intemperance in the family. Disease seems increasing. Mind variable. Has rational hallucinations.

June 2. On admission, Pulse 105. Resp. 24. Temp. 99. Bodily condition: Dirty. No injuries noted.

June 3. Behavior: Was excited & noisy. Wandered about the ward. Was on the floor part of the time. Wanted to go home. Is afraid something is going to hurt her. Praying all day. Appetite poor. Sleep: was noisy, did not sleep very much. Cough: none. Bowels constipated. Pulse 110. Resp: 26. Temp 103.

June 4. Tries to get at the doors, is nervous & excited, praying most of the time. Appetite poor, was noisy and violent during the night. P. 101. R. 20. T. 100

June 5. Patient the same in behavior and talk. Appetite good. Slept well. T. 97. P. 80. R. 20.

June 6. The same in behavior & talk. Was noisy during the night. appetite good.

June 7. Was more quiet to day, still very nervous. Slept well.

" 8 Appetite good. Slept well.

" 9 " " " " Behavior and talk the same. Bowels constipated.

" 10 Patient noisy in morning, quiet in afternoon. Appetite good. Slept well.

" 11. Was quiet all day. Still nervous. Slept quite good. Appetite good. Working in dining room.

" 12 Cried most of forenoon, stayed in her room. Ceased to go home. Slept well. Appetite not very good

" 13. Was more quiet, stayed in her room most of the time, refused to eat her dinner. Appetite poor. Complains of being sick. Slept well

" 14. Cried a good deal, was in bed part of the day. Appetite poor.

" 15 Cried most of forenoon. Refused to eat her breakfast. Stayed in her room part of day. Slept well

General Notes Admitted June 2 93. Appetite poor, have to take her to dining room, hysterical at times thinks her brother is here. June 24. 93 Slept part of 2 a.m. in bed, otherwise sleeping in the floor most of the time. July 10 93. Has very exited spells, resembling melancholic frenzy. July 18. 93. Barricaded the door of her room with the bedstead, called servers to for assistance to open door. July 19 93 Seems better, appetite fair. July 21. 93. Complains of headache in bed during the forenoon Pulse 64 at 11. A.M. July 31. 93. Appetite fair, at times very noisy, crying, very seldom goes out walking. July 30. 93. Visited by cousin. Aug 2 93 Appetite poor put on tonic Aug 4. 93 Resisted in going to bed, took 3 persons to undress her. Aug 8. 93 Visited by father. " 9. Complains of headache & sore throat. Aug 14. 93 Complains of Constipation & a cough, put on medicine. Aug 16 93. Very bad hysterical spell, crying for 3 hrs Aug 18. 93. Tried to get out of house while out riding. Aug 22 93. Tried to elope while out walking, brought back in van under difficulties

Sept 6. 93. Moved to B1. Sept 8. Removed to A' East. Sept 28. 93 Appetite good. Clean in habits. Behavior quiet. Had one hard crying spell Sept 9th. Pallid: natural. No complaints. Went home Sept 28th 93. Appeared quite well at time of leaving.

from Page 12.

Jamie Schneider

Jan 25 Minute. Feb. 20 Minute. Feb 27 Usually quiet but strikes other patients when annoyed by them. Has delusions & talks very incoherently. Is quite tidy in habits but very careless in dress. Goes riding & working. Appetite good. Bowels regular. Sleeps well. General health good. Mar. 7 Patient fought nurses. Apr. 24 Menstuates regularly. May 30 Quiet in behavior: Tidy in habits but very careless in dress. Has many delusions & is incoherent in speech: Memory poor: Goes riding & walking: Appetite good: Bowels regular: Sleeps well: General health good.

Aug Summary Nurse's Notes by Dr. D.S. Phelps: Appetite fair: bowels regular: sleeps well violent at times: untidy in personal appearance: Nov 9 no change: Jan 97 Genl health good: Has been noticed vomiting at times: Very incoherent usually, but at times has short intervals of talking sensibly: May 98 no change: Aug 98 Has fought nurses at times: Violent & very untidy in personal appearance: Has a good appetite & usually sleeps well (Recorded by Dr. R.M. Phelps) Usually quiet of late: careless in habits & appearance: health fairly good. Feb 24 98 Visited by brother in law: Feb 27 98 weight 142: July 4 98 Visited by friends: Feb 24 99 General health fairly good: Is quietly the same in every way (Recorded by Dr. R.A. Bate) Mens. 6 Sept. 99 Genl health very good. appetite good: bowels regular. menstr regular: untidy in habits: rather careless in appearance: takes out door exercise: has delusions, talks incoherently: Mar 5 Struck by Emma Stern Bruised lower lip: July 15 99 Bitten by Kate Dennison on right hand. Hot boracic acid compressed applied

Sept 1- Feb 28 1900 Nov. 12 untidy in habits: Talks incoherently: Sleeps quite well: Eats well Menstruates regularly. Takes out door exercise. Jan 15 Wt. 138 lbs.

March- Aug 31 1900 Very untidy: At times will not keep clothes on: Has many delusions: Talks incoherently but will answer questions addressed to her: July 16 Vaccinated

Sept 1 - Feb 28 1901. Oct 13 Sick - put to bed. Complains of pain in back. Temp 101 Pulse 90. Oct 14 Temp. 103 Pulse 94. Oct 15. Throat sore: smear made & culture sent to State Board. Diphtheria suspected - Sent to Brickhouse. & given antitoxin treatment. State Board reported non diphtheritic. Nov 2 Rtd. to ward. Appetite fair Sleeps well: Bowels constipated: requires Cathartics. Seems as well as usual. tho somewhat anaemic. Nov 17 Wt. 112 lbs. Dec 1 - Feb 28 General health poor. Bowels usually regular. Sleeps well. Tidy & cleanly: does not attend amusements: Talks incoherently: Has many delusions: Answers questions but not always intelligently. Is sometimes violent Jan 2. Taken sick pain in stomach. Temp. 100°. Pulse to by. Jan 8. Menstruating. Kept on liquid diet & given medicine. Jan 19 Pulse to 60. Rtd. to ward Wt. 115 lbs. Nurses. Over to Pg. 75

Personal and Medical History of Annie Marpert

HERBERT, FIGLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3361
Residence, St Paul
Date Admission, June 2. 1893
Admitted by, D. Phelps Hour,
How Sent, Jail Prob. J. P.
Sex, Female
Age, 42
Civil Condition, Married
Children, 4
Age Youngest Child, 7yrs
Occupation, Housewife
Degree Education, Very poor
Profession Religion, R. C.
Habits, Prob. bad
Nativity, Germany
Physicians Committing, Guido Mantel & D. Hanley
Correspondents, H. Hunter St St Paul (Myrick)

No. for Year, 273
Insane Relatives, None
Cause Exciting, Unknown
Cause Predisposing, Unknown
Form, Dementia
Accompanying Bodily Disorder,
Suicidal or Not, Not
Date of this Attack, 1890
Duration, 3 yrs
No. of Attack, 1
No. of Admissions, 1
Age First Attack, 39
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined June 13 — D. L. Phelps.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Some impaired
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Illusive
REASONING POWER: Impaired
Ordinary Subjects, "
Own Mental State, "
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Dull and indifferent in manner

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Indifferent
Exalted,
Depressed,
DELUSIONS: None determined
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent, Reticent.
Says she feels tired that was her 1st City Hospital because she was sent to

ADMISSION.—(Continued.)

TERISTICS. Very filthy and covered with vermin
NUTRITION Anaemic

Promptness Movement,
Size, Normal
nmodation, Sluggish

3361
24/17

M^r Annie Marpert

Copy of Order for Hearing Petition of John Marpert for appointment of as guardian for said Annie Marpert insane; served and service admitted — Petition to be heard Feb 1/1901.

(Papers filed with commitment papers.)

Legs, Good
TREMORS, Hands, None noted Tongue,
Facial Muscles, General,

Case No. 3361 Annie Marpert. File No.9

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

HEART, Sounds are normal
LUNGS, Some in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Dirty Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor, Poor
SLEEP, Good, Poor, Irregular,
PULSE, 84 RESP., 19 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 Annie Marfort

EBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3361
Residence, St Paul
Date Admission, June 2. 1893
Admitted by, S. Phelps Hour,
How Sent, Ind Pub
Sex, Female
Age, 42
Civil Condition, Married
Children, 4
Age Youngest Child, 7yrs
Occupation, Housewife
Degree Education, Very poor
Profession Religion, R. C.
Habits, Prob bad
Nativity, Germany
Physicians Committing, Guide Martel & G. Hanley
Correspondents, Pt Winter St St Paul (Friend)

No. for Y
Insane R
Cause Ex
Cause Pr
Form,
Accompa
Suicidal
Date of t
Duration
No. of At
No. of Admissions, 1
Age First Attack, 39
Time of Leaving,
Time in
Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined June 13 1893 S. Phelps

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Seems impaired
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Illusive
REASONING POWER: Impaired
Ordinary Subjects, "
Own Mental State, "
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Dull and indifferent in manner

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Indifferent
Exalted,
Depressed,
DELUSIONS: None determined
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent, Reticent
Says she fell and that was in City Hospital because she was not warm at

Personal and Medical History of Annie Marfort

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS. Very filthy and covered with vermin

HEIGHT, 5 ft 3 in WEIGHT, 121 ½ NUTRITION, Anaemic
WOUNDS OR ABNORMALITIES, None noted
TONGUE, Tremors, Coatings, Slight Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Sluggish Accommodation, Sluggish
SIGHT, Says not good
HEARING, Seems good
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, None noted Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Equal
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Dirty Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor, Poor
SLEEP, Good, Poor, Irregular,
PULSE, 84 RESP., 19 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,

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 This woman was brought here by Dr Sly & Haines and Miss Akers She was barefooted, very filthy and ragged and covered with vermin crawling out of her body and clothing. Was picked up in St Paul - Symptoms of insanity were first manifested three years ago. First she refused to cook the meals. Symptoms have increased until she is unable to care for herself. Is filthy in habits violent in temper and contrary in everything. At examination was stupid, filthy, hair disheveled, standing up ready to go. Said she had to walk backward most of the time. Refused to sit at any time during examination. Very dirty and mild

June 2 - On admission her body was in a very filthy condition Barefooted clothes ragged & dirty and full of vermin Head also covered

" 3 Sits quietly looking downward Does not move from any place she is placed. Speaks only when addressed. Appetite fair Bowels have not moved. Pulse 78 irregular Temp 99.6 - R 12.

" 4 Slept most of the night Appetite fair Pulse 70 Temp 99.4 R 18

" 6 Was awake most of the night last night though quiet Pulse 63 - R 12 - Temp 99.4

" 6 Began menstruating today Complained of same pain

" 8 Sticks well at night Does not walking. Appetite poor

" 12 Put in bed this time. Very quiet Does not speak unless addressed Does not like to work.

" 15 Does not like to stay here Wants to go home. Dull and quiet Appears in a state of chronic Dementia.

" 28. Appetite poor, clean in habits, good behavior, never talks unless spoken to, talks quite sensibly. July 16.93. Moved to ward 2 July 29.93. Appetite poor. Clean in habits, behavior very quiet. Talks scarcely any, works in laundry. Removed to ward 4 Aug 5 93.

Oct 19.93. Appetite good. Works in laundry. Is very quiet. Seldom speaks. Rather stupid. Clean in habits. Gen health good. Dec 31/93.

Dec 31 1894 Patient is still at the Annex. There has been no noticeable change in her condition during the past 2 months. Works in the Laundry. Habits are clean.

Jan 31 Jan 31/94. No change to note. Lives along quietly & seemingly contentedly here. Works in laundry.

Feb 14 Feb 14 94. Appetite poor: is rather thin in flesh. Is very quiet. Never speaks. Does eating & walking. Habits clean.

" 23 Feb 23/94. This patient had been committed under the "law of 1893", recently declared unconstitutional; she was, today, Taken out and returned under "new commitment papers" from Olmsted County.

April 4. 94. Appetite poor. Habits clean. Is quiet. Gen health good. July 16 74 Appetite poor. Is clean in habits. Is very quiet Seldom speaks Stands up most of the time. Goes riding and walking Gen health good

July 29 94. Transf to C 2 Aug 1 94 Abdomen swollen. Does not seem to have any pain. Sits up on the hall. Does not talk much or not at all

1894 Aug 7 Has taken baths several times. Bowels moved freely. Has no swelling in abdomen now. Is taking tonic. Appetite better, than it was. Transf to Ward 4 Sept. 1894. Suddenly became very much disturbed, laughing and talking all the time. Talks incoherently Sept. 17. 94 Still very noisy Wants to lie on the floor most the

Sept 20 94. Cried for 2 hrs. after which she talked a good deal. Sept 22 94. So much more quiet. Talks some but in a much lower tone of voice. Sept 24 94 Broke a window light during the night. Transf to 3

Sept 28 94. More quiet. Appetite poor. Talks incoherently. Oct 2 94 Appetite good Occasionally dirty in habits in behavior more quiet, talks incoherently sleeps well, goes walking and riding Oct 22 94 Transf to Ward 4

Ward 7 95. Appetite good Dirty & untidy in habits. Is very noisy talks & laughs most of the time and the talk is incoherent Is growing very fleshy and her general health is good Does riding & walking. March 95. Has sores on her feet just about the heels and feet and limbs are some swollen and inflamed. March 25 95 Appetite good Clean in habits but untidy in personal appearance Is very noisy, talks constantly & incoherently Is growing quite fleshy Her feet are better Gen health good April 2 95 Menstr. May 1 95 Menstr.

May 6 95. Her feet are well No other change. May 27. 95 Menstruated.

July 3 Visited by sister. July 5 Appetite good. Dirty & untidy. Noisy. Talks loudly & incoherently. Growing fleshy Gen. health good. Aug 2 Menstr. Aug 9 No change Sept 1 Menstr. Sept 22 Menstr.

Sept 25 Clean in habits but untidy in appearance. Rather noisy, talks a good deal & incoherent Manual Acts silly. Is growing quite fleshy. Gen health good. Goes riding & walking

Oct 18 Menstr. Nov 28 Appetite good. Dirty & untidy in habits & appearance. Is very noisy at times At present very quiet Gen. health good. Dec 30 Jan 29 Menstr. Feb 3 Appetite good. Dirty. Noisy - Talks incoherently & Acts very silly - General health good - Takes out door exercise. Feb 11 - Menstr. Mar 29 Appetite good. Dirty & untidy in habits; Noisy Talks a good deal & incoherently: Acts silly - General

1896 health good. Takes out door exercise - Menstruates regularly.

Aug. Summary Nurses Notes by Dr. D. L. Phelps:- Appetite good: untidy: noisy and talks a great deal incoherently to herself: Always pleasant: gen! health good:

Oct. 1897 no change Jan 98 Gen! health seems good: no mental change: May no change.

July Appetite good: gen! health good: takes out door exercise: habits untidy, menstr. regular. (Cared by Dr R. M. Phelps) Nov. 10 98 Inclined to be quite violent & untidy at times: Incoherent & full of delusions: demented: Feb. 9 99 Weight 132 lbs.: Feb. 8 99 Health

1899 fairly good: has been comparatively quiet, altho' is easily irritated.

Mar. to Sept. (Cared by Dr. R. A. Babb) General health good: appetite good: menstr. regular: sleeps well: neat in habits but careless in appearance: Usually quiet but at times very noisy: goes riding: Has delusions: does not converse, but talks incoherently: very silly in conversation & actions:

Aug 18 Weight 129½ lbs. Sept 1 - Feb 28 1900 Nov 10. Neat but careless in appearance. Takes out door exercise: Expresses delusions: Is silly & incoherent: Eats & sleeps well.

Jan 1 1901 133¾ lbs. March 1 - Aug 31 1900 General health good: appetite good: Behavior unchanged. July 25 Vaccinated Sept 1 - Nov 30 Habits & appearance untidy: At times very noisy Menstr. ates regularly Takes out door exercise: Does not speak English Nov 29 Wt. 135 lbs

Dec 1 - Feb 28. 1901. Appetite & General health good. Does not attend Amusements. March 4 Wt 131½ lbs

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Personal and Medical History of Maggie Helmcke

KRUEGER, FISCHER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3368
Residence, Goodline Davdline Co
Date Admission, June 8 1893
Admitted by, Dr Phelps Hour, 2 P.M.
How Sent, Jof Prof. O.D. Anderson
Sex, Female
Age,
Civil Condition, Maried
Children, 3
Age Youngest Child, 6 mos
Occupation, Housewife
Degree Education, Common School
Profession Religion, Lutheran
Habits,
Nativity, Minn
Physicians Committing, Dr Jaeling + Howard McKinstry
Correspondents, A Albert Helmcke Goodline Davdline Co Minn

No. for Year, 280
Insane Relatives, Sister twice
Cause Exciting, Unmarried + Uterine trouble
Cause Predisposing, Heredity Prob.
Form, Acute Melancholia
Accompanying Bodily Disorder, Uterine disease
Suicidal or Not, Suic.
Date of this Attack, April 1st 1893
Duration, 2 mos
No. of Attack, 3
No. of Admissions, 1
Age First Attack, Unk
Time of Leaving, Oct 4th '93,
Time in Hospital, 3 mo 26 ds.
Result, Rec.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined June 9 Dr R M Phelps

MENTAL ACTIVITY:
Clear or Confused, Walks around in
Quick or Sluggish, a dazed manner
MEMORY: Refuses to answer
Past Events, questions
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, Indifferent
Exalted,
Depressed, Slightly depressed Sems
DELUSIONS: as if controlled by
Systematized or Not, delusion
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Will not talk
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Maggie Helmcke

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 1/2 in WEIGHT, 125 lbs NUTRITION, Good - Good color
WOUNDS OR ABNORMALITIES, None noted
TONGUE, Tremors, Extreme Coatings, Slight Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Good Accommodation, Good
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Fair
Legs, Fair No tumor
TREMORS, Hands, Quite steady Tongue, Extreme
Facial Muscles, Steady General,
REFLEXES, Patellar, Equal & Slight Ankle cl.
Other Reflexes,
ARTICULATION, Hesitating, Talks almost Slurred, none
FACIAL EXPRESSION, Fair
SENSIBILITY,
HEART, Normal condition
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Normal Constipated, Irregular,
APPETITE, Good, Medium, Poor, Poor
SLEEP, Good, Sleeps well Poor, Irregular,
PULSE, 74 RESP., 19 TEMP., Normal
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, Sister insane twice

Personal and Medical History of Maggie Helmcke

SEIBERT, PICLER & CHAMBERS, DAVENPORT, IOWA

1893 This woman was brought here by her husband A. Helmcke and Mr P Heytman first Symptoms noted first manifested in 1879 Was insane about 4 mos, again had an attack in 1886 This attack began about April 1st when she wanted to give her children away Said to kill herself and asked her husband to kill her Symptoms have been increasing At times has rational intervals Wants to leave home Shows no disposition to injure others No filthy habits Said to hang herself recently - Dressed Appearance neat & tidy No intemperance of any kind in the family Patient had Typhoid Fever in 1879 Has medical holding at times Has been treated for Amenorrhoea by Dr Wittenstein of K and Dr A. Brown of Red Wing Has had hot douches and internal medication to produce Menses Physical condition otherwise good During examination patient talked very little could get very few answers and then often incoherent Memory seems defective She presented a healthy bodily appearance Sat pulling buttons off of her dress She has perpetrated acts dangerous to herself and often Wanders away from home & Forces herself to want of food and shelter Her disease is of such a nature as to require care and treatment While under legal restraint

June 8. On admission: Pulse 82. Resp. 20. Temp. 98. Bodily clean. Does limb. Behavior was quiet. Wandered about the ward. Appetite: Refused food. Slept about 6 hours, No cough. Bowels constipated No injuries. Resp. 20. Pulse 82. Temp 98.

June 9. Patient about the same. Wandered around ward. Refuses food. Slept well. Out of bed at night 2 hours. Was quiet.

June 10. Quiet all day. Refused food. Fed by tube. Quiet last night. Want to get out. Had to handle Keep in bed. Bowels moved

June 11. Was quiet all day. refused to eat

" 12. Behavior same as before. Very quiet, refused ~~to eat~~ anything. Slept very little, walking most of the time.

" 13 Walking up & down the hall. Ate breakfast, refused to eat again; did not sleep much, out of bed part of the night

" 14. Patient same in behavior. Drank some milk.

" 15. Patient very quiet. Refused to eat but drank some milk, sat on floor all night. Very quiet. Did not sleep much.

" 16. Very quiet Drank some milk. Quiet during the night. Out of bed 1 hour. Slept well rest of night.

" 17 Behavior the same. Ate some dinner and drank milk at supper. Very quiet in night. Slept well.

" 18. Patient about the same. Wandering about ward. Is very quiet. Appetite better. Slept well

" 19. Behavior the same. Ate her meals. Quiet during the night Slept well

" 20. The same.

General Notes: June 8. 93 Admitted. June 30. 93 Appetite very good. D

Personal and Medical History of Maggie Helmcke.

very much improved. Quiet at times. Rests well at nights. July 10 93 Eating poorly again. Dull & absent minded in appearance. July 14 93 Visited by friend. July 24 93 Appetite fair. July 26 93 Visited by friend. July 31. 93. Appetite poor. Does not talk any, tidy in habits. Aug 1 93 Visited by husband but would not talk to him Aug 17. 93. Moved to Annex Aug 20 93 Visited by husband, Aug 28 Visited by friend. Sept 11. 93. Works a little Is very quiet. Habits clean. Refuses to eat. Has not taken for 3 days. Transf to ~~Ex~~ Sept 17. 93. Has quite a good appetite. Assists with dining room work. Does to chapel and out walking. Oct 4 1893. Went home. Had been improving with remarkable rapidity during past 2-4 weeks. There had been no special agency, except perhaps the more better ward. June 17 94 Appetite good Keeps well Very tidy in ~~R~~ Room Looks well July 24 94 Looks well Appetite good Conversation great deal of nervousness headaches frequently. Has spells of crying without any apparent reason. Keeps well Appetite good

Aug 24 94 Appetite good Very active when spoken to Looks well Shows little interest

Personal and Medical History of Liana Jordan

BARRETT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3369

Residence, Fairbault

Date Admission, June 8 - 1893

Admitted by, Dr Phelps Hour,

How Sent, In Prob R.A

Sex, Female

Age, 28

Civil Condition, Married - Sep

Children, None

Age Youngest Child,

Occupation, Housework

Degree Education,

Profession Religion,

Habits, Unstimable

Nativity, Iowa

Physicians Committing, H. N. Dale & W. A. Lang.

Correspondents,



No. for Year, 281

Insane Relatives, None

Cause Exciting, Sexual Abuse

Cause Predisposing, Unknown

Form, - Dementia

Accompanying Bodily Disorder, -

Suicidal or Not, Not

Date of this Attack, 1890

Duration, 3 yrs

No. of Attack, 1

No. of Admissions, 1

Age First Attack, 26

Time of Leaving, July 16 '96.

Time in Hospital, 3 yrs. 1 mo. 8 da.

Result, Died. General paresis

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined June 9 by Dr Phelps

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Good

Recent Events, Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, Fair

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Denies all her symptoms
seems to want to get well
Says has not been right
for three yrs - Headache for
many last 3 yrs - Back & hips
for part of head

EMOTIONAL STATE:

Normal, Calm Normal

Indifferent,

Exalted,

Depressed,

DELUSIONS: None

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent -

Voluble or Reticent, Talks willingly
and very well

Says had nervous prostration 3 yrs
ago. Complains of indigestion

Personal and Medical History of Liana Jordan

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 1/2 in WEIGHT, 162 NUTRITION, Very good

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Slight Coatings, Promptness Movement,

PUPILS, Equality, Unequal Size, Left dilated

Response Light, R responds best Accommodation, left pupil does not

SIGHT, Very poor in left eye R very good Uses glasses

HEARING, Impaired somewhat and complains of ringing in ears

3rd October 1894. Further examination by Dr. Phelps.

Incoordination, Extreme
Tremors, Coarse
Headaches, less of late.
Increase of sense of well-being
Speech extremely impaired
Face quite Spastic
Emotional Displays
Dementia of Feeble minded Form
Walk & all motions Spastic
Knee-Jerk Extremely Exaggerated

Diagnosis: General Paresis.

BOWELS, Normal, Constipated, Irregular, irregular

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, Usually Poor, Irregular,

PULSE, 76 RESP., 20 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,

Brothers or Sisters,

Personal and Medical History of Lena Jordan

EMBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3369

Residence, Fairbault

Date Admission, June 8 - 1893

Admitted by, Dr Phelps Hour,

How Sent, In Prob R.A

Sex, Female

Age, 28

Civil Condition, Married - Sep

Children, None

Age Youngest Child,

Occupation, Housework

Degree Education,

Profession Religion,

Habits, Questionable

Nativity, Iowa

Physicians Committing, H. N. D

Correspondents,



No. for Year, 281

Insane Relatives, None

Cause Exciting, Sexual abuse

Cause Predisposing, Unknown

Form, - Dementia

Accompanying Bodily Disorder, -

Suicidal or Not, Not

Date of this Attack, 1890

EXA

Examined Jan 9 - 9

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Good

Recent Events, Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, Fair

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Denies all her symptoms
Seems to want to get well
Says has not been right
for three yrs - Headache increasing
among last 3 yrs - Back & legs and front part of head

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent -

Voluble or Reticent, Talks willingly
and very well
Says had nervous prostration 3 yrs
ago. Complains of indigestion

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4½ in WEIGHT, 102 NUTRITION, Very good

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Slight Coatings, Promptness Movement,

PUPILS, Equality, Unequal Size, Left dilated

Response Light, R responds but Accommodation, left pupil does not

SIGHT, Very poor in left eye R very good Uses glasses

HEARING, Impaired somewhat and complains of ringing in ears

COORDINATION, Arms, Some deviation in testing fingers & nose
Says can not rest on head or shoulder on account of tumor
Legs,

TREMORS, Hands, Says at times Tongue, Some

Facial Muscles, General,

REFLEXES, Patellar, Both equal & active

Other Reflexes,

ARTICULATION, Hesitating, Prompt Slurred,

FACIAL EXPRESSION, Normal

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Some in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal Position of uterus Hemorrhoids Septum & Sphincter

MENSTRUATION, Suppression

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean Careless,

BOWELS, Normal, Constipated, Irregular, Irregular

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, Usually Poor, Irregular,

PULSE, 76 RESP., 20 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,

Brothers or Sisters,

Personal and Medical History of Lena Jordan

EBERT, FIDLAR & SCHAEBER, DAVENPORT, IOWA.

1893 This woman was brought here by her sister and Dr Ely. First symptoms were manifested three years ago and have been increasing. Symptoms manifested are Sexual matters. Her behavior is described by her sister as wandering irritable, purposeless, reticent pulling or tearing at clothing. Demented & state with hysterical behavior. Has to be watched. Had threatened to injure others with scissors. Father used liquor at times. Had smoked for many years. Mother temperate. Patient under treatment of Dr Riggs of St Paul about three months last fall. Has a skin eruption Dr A. N. Dale has treated case for last month. She lived with her husband until four years ago when she began a course of self abuse which has been continued to present date entitling her to be called a Nymphomaniac.

June 8. On admission. Pulse 84 Resp. 22. Temp. 98. Bodily clean.

. First day: Was quiet. Appetite good. Slept. Pretty well. Cough: none. Bowels. Regular. Pulse 84 Resp 22. T. 98.

June 9. Patient is very quiet. Stays in her room all day. Appetite good. Complained of headache. Slept well.

" 10 Very quiet. Stayed in her room. Appetite good. Slept well.

" 14 Came from B[2] to B'. Seems very nervous.

" 15 Still seems very nervous. Appetite good. Complained of not sleeping well & asked to sleep where it was more quiet which request was granted.

June 16. Has been in her room most all day, reading. Has 5 different kinds of medicine & still wants some more. Troubled with Constipation.

June 17. Complains of not having her clothing and wants it sent for, while all the time her clothing is in the ward.

June 18. Went to Sewing room this forenoon. Complained of her eyesight being to weak to go this afternoon. Stayed on the ward to read a novel.

June 19. Still complains as much as ever. Very careless in her room & personal appearance.

" 20. Helped in dining room to day - otherwise no change.

General Notes: June 9 93. Was quiet, Stayed in her room all day. Appetite good. Complains of headache, Slept pretty well, clean in habits. July 17 93 Moved to B[2]

July 29. 93 Appetite good. Habits clean. behavior quite natural & all sensible. Complains of Constipation. Works in Kitchen. Aug 31. 93. Appetite good Clean in habits Works a little on ward dining room, behavior quiet. Stays in room most of the time. Complains much of Constipation & of headache.

Sept 29/93. Appetite very good Habits clean. Works on ward. Complains of headache & constipation. Menses about Oct 30 93 Appetite good. Clean in habits. Does no work. Does not seem to complain of headache so much before 31st Transf to B W.

Nov 2, Out of bed. Nov 13/93 Sat up today. Nov 15/93. Eating well Nov 17/93. Careless in habits. Wanting something all the time. Has good appetite Nov 28/93. Picks up every thing she can find, put it in her pocket & hides the things she took, about her person, takes bread out of the dining room at meal time & crumbs all over the hall. Nov 29/93 Untidy in habits at times -

Personal and Medical History of Lena Jordan.

In addition to other notes Nov 2nd operation of removing hemorrhoids. Was given Ether. Hemorrhoids ligated with cat gut, goes out to bed and get along well, complaining some of pain in the rectum during the second day, but otherwise seeming quite comfortable. Details found in nurses notes on file. Dec. 3. 93 Appetite good. Sleeps well. Is dirty in habit at night. Will tear the names off of the other patients clothing if not constantly watched. Is very forgetful, always wanting something & on tonic.

May 3. 94. Appetite good Sleeps well. Complains a great deal of headache. Feb 28 94 Appetite good. Sleeps well. Is always complaining of headache or Constipation. Is on tonic. Is very forgetful. Helps in dining room & on the ward.

Mch 28 94. Appetite good. Quiet in behavior. Adolescent at times. Untidy in appearance. Sleeps well. Gen. health good. Apr 5 94 Appetite good. Very silly in behavior. Has delusions. Sleeps well April 18 94 Has delusions. Appetite good. Sleeps well. Helps in dining room & laundry.

Apr 26 94. Has been crying all morning. More quiet since dinner. Went to school. May 1 94 In bed, face very much swollen by being poisoned with ivy. May 28 94 Face about well. Appetite good. Sleeps well. Is very forgetful. Sept 24 94 Seems to have failed some in past month. Nov 1 1894 Very nervous. Noisy at times. Occasionally assists some with ward work. Appetite good, bowels not regular. At times constipated. Dec 28 94. Very nervous & very disagreeable at times.

Has very dirty habits. Destroys clothing. Is riding & walking. Appetite good. Bowels constipated mostly, has to take cathartics often.

Jany 5 95. Very nervous all day. Has to be watched closely. Jany 12 95 Very dirty & filthy in her habits & disagreeable. Jany 19 95 Nervous & noisy most of the day, crying, fretting & complaining. Undressed herself many times during the day. Jany 26 95 Very nervous this morning and needed a great deal of care. Moved to B 3d Feb 2 1895. Appetite good. Dirty in habits. Destroys her clothing. Is very troublesome at times. Has to be watched closely, cries a good deal. Bowels regular. Mch 28. 95. More quiet to day than usual. Untidy in habits. Quite demented. Seems "all right" - motor signs no more prominent, is definite case of paresis - coming on 3 - 4 years after marriage, an infection is possible. Apr 28. 95 Very restless on her feet. Is quite troublesome. Destroys her clothing. Appetite good. Bowels reg. May 2 1895. Has been quite noisy at times. Destroyed her clothing lately. Health about the same. June 27 About same - Appetite good.

July 29 Appetite fair. Fed on hall. Occasionally dirty. Bowels regular. Aug 31 Appetite good. very unsteady on feet. Quiet in behavior. Dirty. Bowels regular. Extremely demented - paretic now.

Sept 30 About same. Appetite good. Very nervous & unsteady on her feet. Bowels regular.

Oct. 19 Sick in bed. Has diarrhoea. Very nervous & restless. Oct 31 Up on ward.

Oct 30 Appetite good. Habits untidy. Quiet in behavior. Nov 30 Patient has been in bed constantly. Very weak. Tremors very marked. Talks with great difficulty. Has very little mind left. Gradually failing. Dec 20 Patient very weak. Extremely noisy at times. Appetite good. Bowels constipated. Habits dirty.

Jan 1 Appetite poor. Very restless & noisy. Cries a great deal. Jan 26 Appetite poor. Bowels constipated. Cathartic given. Bowels moved. Was catheterized

Feb 10 Very restless & out of bed. Appetite better. Bowels regular. Feb 20 Visited by sister. Feb 21 Does not sleep well. Out of bed during night. Cries a great deal

Mar 7 Very restless: Out of bed all the time: Extremely noisy: Habits dirty: Bowels constipated

" 9 Put in restraint. Quite noisy this. Mar. 17 Still in restraint. Very restless & noisy. Bowels regular. Apr. 1 Out of restraint. Very weak: Quite noisy at times. Has a bed sore on back. Dressed antiseptically daily: Appetite poor. Bowels quite regular. May 9 Failing in flesh: Appetite good. In bed: some of time in restraint. Very noisy most of time. May 30 Still in bed out of restraint. Quite noisy at times. Failing in flesh: Appetite good

Personal and Medical History of Charlotte Burns

ROBERT, PICLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3371
Residence, Owatonna State
Date Admission, June 10 – 1893
Admitted by, Dr Phelps Hour, 1.30 P.M.
How Sent, In Prof M.R. Chadwin
Sex, Female
Age, 70
Civil Condition, Widow twice
Children, 5
Age Youngest Child, 41
Occupation, Housekeeper
Degree Education, Can read & write
Profession Religion, Methodist
Habits, Good
Nativity, New York
Physicians Committing, J.H. Adair & T.M. Smith
Correspondents, H.B. Chambers San Havana Minn

No. for Year, 283
Insane Relatives, None
Cause Exciting,
Cause Predisposing, Old age
Form, Senile Dementia
Accompanying Bodily Disorder,
Suicidal or Not, Not
Date of this Attack, June 1892
Duration, 1 yr
No. of Attack, 1
No. of Admissions, 1
Age First Attack, 69
Time of Leaving, Feb. 20th '94
Time in Hospital, 8 ms. 10 ds.
Result, Imp.

Crossed off from Attendee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

June 13 – Examined C.E. Phelps

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY: Impaired
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Partially correct
REASONING POWER: Impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Dull and demented

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Very restless Wanders
Exalted, around in an aimless
Depressed, manner as if half
DELUSIONS, realizing things
Systematized or Not, No definite ones
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,
Very talkative Mind wanders
from one subject to another

Personal and Medical History of Charlotte Burns

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in WEIGHT, 109 lbs NUTRITION, Fair
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Some hesitating Coatings, Considerable Promptness Movement, Hesitating
PUPILS, Equality, Unequal Size, Slightness of speech
Response Light, Sluggish Accommodation, Sluggish
SIGHT, Poor Uses Glasses
HEARING, Impaired
COORDINATION, Arms,
Legs,
TREMORS, Hands, Tongue,
Facial Muscles, Drawn towards right General, side Boy says side face was paralyzed about a year ago when she had an acute attack of Neuralgia
REFLEXES, Patellar, Equal & -
Other Reflexes,
ARTICULATION, Hesitating, Hesitating Slurred, Speech thick
FACIAL EXPRESSION, Dull and sleepy looking -
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION, Ceased
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 78 RESP., 18 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,

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 This patient was brought here by her son and daughter accompanied by following history & Symptoms first manifested June 1892 and have been increasing. Has many Has shown no disposition to injure others No disposition to filthy habits No intemperance in the family No restraint has been employed but has been watched at home Has been under tonic treatment Inclined to be talkative and mind wanders from one subject to another During examination was excited, restless and talked in a rambling manner Has propensity to wander away from home Her disease is of such a nature as to require treatment

June 10 On Admission. Bodily condition: good.
" First day. Behavior: Has been quite noisy & runs up & down the hall. Talk. Incoherent. Appetite: Refused to eat her supper. Cough: none. Complains of being tired & nervous.
June 11 Very nervous all day, walking up & down the hall Would scream out of the window at different times Fought attd Appetite good.
June 12. Moved to B2. Walking up & down the hall, quarrelsome, Complains of being weak & wants to go to bed. Was very quiet at night & slept well
June 13. Patient about the same Will lie on her bed or walk up & down the hall. Very quiet at night. Slept well
June 14 Patient same in behavior, on her bed most of the day. Appetite good Slept well
" 15 Walking up & down the hall all day.
" 16 Complains of weakness & wants to go to her bed. Appetite good Slept quite well
" 17. Patient about the same in behavior. On her bed most of the day. Appetite good. Slept well
" 18. Very nervous all day. Walking at different times up & down the hall. Appetite good Slept well
" 19. Complains of weakness & wants to go to bed. Will not go to dining room to eat. Very quiet at night in behavior.
" 20. Patient the same quarrelsome at times. Refused to eat breakfast & want us to bring it to her. Ate her dinner. Is very quiet at night.
" 21. Very quarrelsome at times but quite restless. Appetite fair.
" 22 The same.

General Notes: June 30.93. admitted, appetite good. Rests well at night. Very restless most of the day. walking the floor, always talking of going home
July 10.93. Standing about, talking wanderingly about going home. Slept but very little Complains of pain in the stomach July 21.93 Appetite good & more quiet on ball, out riding seemed to enjoy it very much. July 31.93. Appetite fair tidy in habits, always talking about going home. Aug 1 93 About the same, Aug 31.93 About the same. Sept 30.93 Appetite fair Untidy habits Talks all the time Wants to go home. Oct. 31.93 Appetite poor. Sleeps well Talks & laughs Silly. Fell out of bed & bruised her eye. Complains of her head being dizzy. Nov. 29.93 Eats & sleeps well.

Complains a great deal of dizzy headache. Is never still in bed. Has been for the past seven day. Seems to have a bad cold. Dec 30.93 Appetite poor. Cleanly habits. Complains a great deal of a dizzy headache. Is very careless about dressing herself. Is always talking about going home. Jany 30.94 Appetite poor. Habits clean Constantly talks about going home. February 20.1894 Went home.

From Folio 28 Leona Jordan 5369

June 1896 Patient still in bed. Gradually losing flesh. July 2 Remains constantly in bed. Has a very bad bed sore on back which is dressed daily. July 16 Patient failing very fast, has had several very bad bed sores which were dressed several times a day. Gradually sank & died at 10 A.M.

Died July 16th 1896

Bridget Reed - From Folio 48

1900
Oct 15. Put to bed. Seems too feeble to sit up. Sleeps most of time. Trans. to Infirmary Ward. Very untidy, requiring frequent baths & changes of clothing. Does not converse or answer questions. Fed from tray. Appetite fair. bowels constipated. Sleeps well. Dec. - Feb 28 1901. Confined to bed. Too weak to sit up. Is at times very noisy. Feb 28 Wt. 78# Mar. 1 - June 1 - 1901 No change. Wt. not taken patient being confined to bed.
June to Sept. 1901 Patient very feeble requires a great deal of attention, eats and sleeps fairly well, has to be fed by nurses, is at times very noisy, habits very dirty. July 23 taken with weak spell, has difficulty with swallowing. July 24 died at 1:25 P.M.

Dead

HERBERT, PUGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3373
Residence, Johnsburg - Adams, Mower Co.
Date Admission, June 13 - 1893
Admitted by, Dr Phelps Hour, 2 30 P M
How Sent, In Charge of Sheriff Hutchinson
Sex, Female
Age, 34
Civil Condition, Married
Children, 6
Age Youngest Child, 1 yr
Occupation, Housekeeper
Degree Education, Common School
Profession Religion, R. C.
Habits,
Nativity, Minn
Physicians Committing, A. E. Hinslin & M. Aldorff
Correspondents, John Adams Husb Johnsburg Minn; A. E. Hinslin Family Phys. Le Ray Minn

No. for Year, 285
Insane Relatives, None
Cause Exciting, Anaemia
Cause Predisposing, —
Form, Acute Melancholia
Accompanying Bodily Disorder, Anaemia
Suicidal or Not, Threatened
Date of this Attack, May 1st 1893
Duration, 6 weeks
No. of Attack, 1
No. of Admissions, 1
Age First Attack,
Time of Leaving, June 17, 1893
Time in Hospital, 14 days.
Result, Died.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish,
MEMORY: Will not talk
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY: Refuses to talk
Alert or Dull,
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Very much emaciated - Refuses to eat or talk - Resists every thing

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Indifferent
Exalted,
Depressed, Very feeble
DELUSIONS: Refuses to feed
Systematized or Not, Fed with tube
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.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
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,

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NICAL NOTS IN THE CASE OF Mrs Nelle Adams

MO:	DA:	HR:	PULS:	TEMP:	RES:	NOTES BY NURSE	NOTES BY PHYSICIAN.
1893 June	14	10 A.M.		98.4		on B.P.	
June	16	10 A.M.	124	101.8	34	Quiet but Cross	
		6	130	101.8	30	Fed with tube	
		8	132	102	32	Cathart very free	
						Bowels moved	mented
		10	124	101.6	44		
		12	120	101	42	very long and high	
	15	4	124	100	36	Bowels moved	ural
		6	124	100	24		
		9 P.M.	130	101	37	appears restless	
						this morning quiet	
		12	144	102.2	42		
						Fed with tube	
		4	144	102.8	63	Groaning seems	
						to be 1st part	
		6	130	103	67	Pulse quick	
						strong	
		11	144	103	65	Talked some	
						of her husband &	
	17	2 AM	148	102	64	brother	
		5 AM	130	102	66	very low all night	
						& cannot be	
						some part	
		8 AM	138	101.6	60	was quiet	
						the most of	
						12 O'clock	
						Bowels moved	ural
						Died apparently	
						a little cold	
						very low all the	
						morning appeared	
						almost dying	twice
June	17	5 P.M.				died	

Patient being so weak and no entrance of food or medicine to be had. We have only succeeded in getting a 2nd day by the judicious use of the proper enemata. Should death occur it will be by reason of food, & not for want of nourishment as it has been impossible to feed her after the morning of the 15th for 12 days on account of Patient now kindly taken anything.

128.

weak.

ght.

other

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d.

sible

Jun

Personal and Medical History of Minnie Kaeding

36

1894 From 76

1894 Feb'y 28 cont'd behaved. At times, laughs and talks to herself. Is very contrary and hard to get along with.

Mar 3 Mar 3/94. This patient was committed here under the Law of 1893 recently declared unconstitutional. She was today, Taken out and Returned under "new Warrant" from Chester County.

Mch 28/94 Quiet in behavior, but stubborn and hard to get along with. Talks rather disconnected. Also talks to self. Clean in habits & neat in appearance. Appetite good. Apr. 7/94 Has been quiet in behavior of late. Works some on ward. Appetite good. Gen health good. May 31. 94 Quiet in behavior. Talks to self a great deal. but is more tractable than heretofore. Gen health good.

1894 June - Appetite good. Clean in habits. Very disagreeable at times. Is continually asking for privileges. July 31. 94 Goes out riding & walking. General health good. No other change. Menstruates regularly. July 31/94 Transf'd to 2d. July 31. 94. Appetite good. Disagreeable at times. Goes out walking & riding Aug 31. 94. Taught in sewing room. No change. Sept 13. 94. Appetite good. Quiet in behavior. Noisy at times. Talks impudently at times. Menstruation regular. Transf'd to 2d. Oct. 12. 94. Appetite good. Clean & tidy in habits. Is quiet. Goes riding & walking. Gen. health good. Dec. 9. 94 Visited by her mother. Feb 6/95. Appetite good. Clean & tidy in habits. Is rather noisy singing and whistling. Is very obstinate and occasionally violent. Gen health good. Will not go riding or walking. Mch 14. 95. Appetite good. Clean & tidy in habits. Is rather noisy, sings & talks a good deal and is very restless. Gen. health good. Will not go riding or walking. Menstr. Apr 7. May 4 95 Visited by mother.

June 16 Menstr. July 3. Appetite good. Clean & tidy. Quite noisy. Talks & sings a good deal. Very obstinate. Gen. Health improved. Does not want to go riding or walking.

July 10 Menstr. July 13. Visited by mother. Aug 8. No change. Aug 11. Menstr. Sept 8 - Oct 11. Menstr. Sept Oct & Nov. Appetite good. Clean & tidy in habits. Quite noisy. Talks & laughs a good deal. Is very stubborn & impudent. Mends her own clothes. Gen. health good. Goes riding & walking. Jan. 7. Menstr. Jan 30. Appetite Good. Clean. Noisy & restless. Works in sewing room part of time. General health Good. Takes out door exercise. Feb 11 Menstr. Feb 28. Does not look well but makes no complaint 10 A.M. Pulse 80 Temp. 98. Mar. 29. Appetite good: Clean & tidy in habits: Noisy on ward: Very obstinate & impatient: Works in sewing room. General health good: Takes out door exercise. May 12. Menstruates regularly. Summary Nurse's Notes by Dr. E.L. Phelps: Aug 9. Appetite good: noisy & restless & very obstinate & impudent: stupid: works in sewing room:

Nov. Very restless at night: Gen'l health good. Dec 9. Health only fair: does not recover her mental tone: seems to have no recurrent tendency: May 97 Menstr. regular: no change. Aug 97 Lungs & Heart examined: Gen'l nutrition impaired: Tubercular glands of neck are ulcerating & discharging: Resp. 18: Chest expansion normal: Percussion note dull over right lung, anteriorly & posteriorly: Hyperresonance over left lung, anteriorly: breath sounds shallow & impaired: expiration prolonged: rales heard over right lung posteriorly: Heart is rapid: Apex-beat transmitted to axilla: Pulse 103. (counted by Dr. R.M. Phelps) Nov. 8 97 In fairly good health although growing rather more untidy & more silly: Dec. 9 98 Weight 110: At times is somewhat restless & violent. Apr. 2 98 Visited by lady & gentleman: Feb 6 99 Has been at work most of time lately: always silly, untidy & careless, but never very violent. General health appears poor at times but there is no progressive disease.

(See p. 37)

EBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 This patient was brought here by her husband John Adams and her brother Henry Hyman. First symptoms were manifested about May 1st 1893. Refused to take food saying that her stomach and whole left side were gone. She also complained of severe headache and dizziness. Symptoms are increasing. Had one rational interval about a week ago. She now refuses to eat. Talks incoherently. Seems afraid that everything will be destroyed that the house will burn up, funds will be squandered. No discretion to injure anything. Has said she would hang herself and has asked her husband to cut her throat. She has often said that she has sinned so much that she would not go to heaven and has mourned a great deal over this fact. Her father uses tobacco and alcoholic stimulants to a moderate extent. Had Measles when 2 yrs old and has never felt as well since. Has taken Pot. Chl. Hydrate 5ss gr X V at night for sleeplessness with good results and Ferri Chlor for anaemia. She is very weak and emaciated. During examination would not speak. Was very quiet.

June 13. Commencing of the 13th. Bodily condition: Emaciated & weak.
Fed day. Quiet. Will not talk. Appetite refused to eat. Sleep: Did not sleep much. Cough: Very little.
" 14. Very quiet. Fed with tube. Very weak. Was restless about 3 hours at night.
" 15. Very weak, refused to eat. Moved to C2. Fed with tube. Bowels regular. Patient very low. Pulse 128. Temp. 101.8. Resp. 54. Very low all night. Telegraphed relatives.
16. Appeared better early this morning, worse later in the day, lies in low & haunted manner, very weak & some pain. Pulse 144. Temp. 103. Resp. 68. Visited by her husband & brother. Very low all night.
17. Visited by priest. Very low all morning. Appeared almost dying twice, died 5 P.M. Her brother & husband stayed with her till she died. — Patient being so weak, had to Entrance exam. & continued to fail. Was very emaciated. Was found on 2 day to be failing & her people were telegraphed. The Emaciation seemed chiefly due to being refused of food from a point from which it was impossible to recover after coming here. Relatives now say that for 14 days she had hardly taken anything.

Died.

1894 From 76
Feb'y 2 Came to [illegible]
May 3 [illegible]
Mch 28 [illegible]
1894 June - [illegible]
June 16 [illegible]
July 10 [illegible]
Nov. [illegible]

[redacted]

ing rather more untidy & more silly. Oct. 9'98 Weight 110: At times is somewhat restless & violent. Apr. 2'99 Visited by lady & gentleman: Feb. 6'99 Has been at home most of time lately: always silly, untidy & careless, but never very violent. General health appears poor at times but there is no progressive disease.

(See p. 37)

Personal and Medical History of Margaret Gubblemann

GIBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3374
Residence, Melton Dodge Co
Date Admission, June 13-1893
Admitted by, Dr Mann Hour, 7 P.M.
How Sent, by Prof. E. F. Way
Sex, Female
Age, 32
Civil Condition, Married
Children, 3
Age Youngest Child, 4 mos.
Occupation, Housewife
Degree Education, Com. School
Profession Religion, Lutheran
Habits,
Nativity, Switzerland
Physicians Committing, S. F. Vanteleve and Bedient
Correspondents, Mr. Gubblemann (Husband)
Berne Dodge Co Minn

No. for Year, 286
Insane Relatives, Grandmother Suicided
Cause Exciting, Puerperal
Cause Predisposing, P.
Form, Acute Melancholia
Accompanying Bodily Disorder,
Suicidal or Not, Suic
Date of this Attack, May 1893
Duration, 1 mo
No. of Attack, 1
No. of Admissions, 1
Age First Attack, 32
Time of Leaving, Feb. 20th '94
Time in Hospital, 8 mos 7 ds.
Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined June 28 Dr. R M. Bluffs

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish,
MEMORY:
Past Events, Can not test
Recent Events,
Special Subjects, Refuses to talk
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER: Will not talk
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Sits steadily in a dull wandering way. Health and face has been very much diffused

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed,
DELUSIONS: Is evidently controlled
Systematized or Not, By some delusion
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Will not talk
Coherent or Incoherent, Not especially
Voluble or Reticent, afraid

Personal and Medical History of Margaret Gubblemann

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Fair
WOUNDS OR ABNORMALITIES, None noted
TONGUE, Tremors, Will not show Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, Dilated
Response Light, Good Accommodation, Good
SIGHT, appears to be good
HEARING, " " "
COORDINATION, Arms, Seems good
Legs,
TREMORS, Hands, None Tongue,
Facial Muscles, None General, None
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Will not talk Slurred,
FACIAL EXPRESSION, Diminished
SENSIBILITY,
HEART,
LUNGS, Seems in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., Lacerated cervix Some laceration perineum & Cystocele
MENSTRUATION,
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 Margaret Gubblemann

EBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA.

1893 This patient was brought here by W. A. Sunstun accompanied by her husband. Symptoms date from last confinement 14 months ago. Became insane 2 months ago. Wants to get away from home. Home Does not think she is treated as she ought to be. Neglected her children. Does not eat or sleep well. Talks a good deal about Religion. No rational intervals. No disposition to injure others. No fatality or destructive habits. Has asked her husband to kill her. Has Brandon other committed suicide. No intemperance in the family. No restraint has been employed. No treatment. Has refused all kinds of food & every thing. Her symptoms are increasing.

June 13 Upon Admission was dirty. Temp 98.2. Pulse 68.

" 14 Very quiet in behavior. Does not talk, excepting asks to go home. Ate very little food. Did not sleep. Sat upon side of the bed most of the night. Bowels are constipated.
Temp 98.2 Pulse 69. R. 17.

" 15 Patient very dull. Sat in same place all day. Urinates & defecates in bed. Having to be dressed and undressed.

" 16 Refuses food. Fed by tube. Does rarely speaks. Slept well all night. June 17. Was visited by a neighbor. Fed by tube.

" 18 Ate her own meals today. Carried clothes from the laundry. Went out walking. Helped some in the dining room. Looks some brighter mentally.

" 19 Went walking and tried to run away twice today.

" 20 Appetite good. Talks very little. Went out walking this morning.

" 21 Went riding. Appetite good. Habits neat and clean.

" 22 Constantly asking to go home. Would sit in a corner or behind a door if allowed.

" 23 Went riding and walking. Talks some in German.

" 26 Was visited by her husband and brother and talked to them. Is some brighter than when admitted but is still stupid. Sitting in a chair most of the time. Manifesting very little interest in anything.

July 6 Fed by tube. July 6. Put to bed. Drank some milk. July 7. Got up today but was very weak. Ate her regular meals today. Will not remain still long enough to allow her Temperature taken.

" 9 Sat up in bed all day but too weak to be up and dressed.

" 10 Had a full bath. Upon the ward. Bowels regular.

" 11 Went to dining room for her meals. Gains & changes.

" 13 Visited by her husband. Was stupid and would not talk.

Personal and Medical History of Margaret Gubblemann.

1893 July 14 Refuses to eat. Sits in her room. July 16 Slept well part of the night. Rounded on the door for two hours this morning.

July 17 For past two days has been restless. Out of bed latter part of night.

" 18 Slept well. Rested quietly all night. July 19 Goes to dining room for meals. Bowels are regular. General Notes.

June 13. Rec'd in C[2], very quiet, refuses food, sleeps well, talks none, very helpless.

" 14 Fed with tube, talk none, except asking to go home. June 15. Much brighter, does some work, appetite good, sleeps well, does not talk except asking to go home. June 16. Very dull, sitting in one place all day, very helpless. Appetite good. June 20th. Appetite poor. Throws up. July 6th 93 Fed with tube, 6[th] Put in bed 10[th]. Appetite good. Drank milk. Put to bed. 11[th] Upon ward.

" 13. Visited by husband but would not talk to him. Very stupid, refuses to eat. Fed with tube. Aug 16. Tube used again. July 21 93. Has been eating quite well since July 16[th]. Sits most of the time, cannot be made to talk or walk. Very stupid & does not talk. Does not move much.

Aug 7th 93 Fed with tube. Is very quiet & stupid. Aug 9 Fed with tube. Aug 11. Fed with tube.

" 30. Appetite good, but still remains very dull & stupid, goes out walking.

Sept 1. 93. Had some company would not talk to them. Appetite is very poor.

" 4. Tried to run away while out walking. Sept. 14. 93 Seems somewhat better. Has good appetite, assists some with fallwork. Goes out without any trouble.

Sept 24. 93. Asks frequently to go home. Oct 2. 93 Went walking, tried to run away.

Nov 6. Doing very nicely, went out walking today & to entertainment this eve.

" 26. Not so well, crying today, Menstruation absent. Nov 28 93 Crying most of the day. Has a good appetite. Assists a little with dining room work. Dec 9. 93. Refuses C[2]. Fed with tube & was very much excited by it. Refuses to take any nourishment. Dec 12. 93 Visited by husband & was pleased by his visit. Dec 14. 93 Ate quite well. Dec 21. 93 Appetite good & seems much better. Dec 31. 93 Appetite good. Very quiet in behavior. Habits clean. Sometimes quite noisy. Singing. Does not do any work.

Jany 11. 94 Visited by friend. Jany 16. 94. Complained of bowels being constipated. Asked for pills.

" 17 94 Transf to A[1]. February 20. 1894 Went home.

Personal and Medical History of Jane McMenamy

SIEBERT, FIGLAR & CRAMER'S, DAVENPORT, IOWA



Whole No. 3375
Residence, Stillwater
Date Admission, June
Admitted by, Dr Philips
How Sent, Jo Prob
Sex, Female
Age, 68
Civil Condition, Widow
Children, 6 – 3 living
Age Youngest Child, 38
Occupation, Housework
Degree Education, None
Profession Religion, R.C.
Habits,
Nativity, Ireland
Physicians Committing, D.C. Merrill & H.C. Clark
Correspondents, George H. Sullivan San Stillwater Minn

No. for Year, 287
Insane Relatives, None
Cause Exciting, Unknown
Cause Predisposing, Unknown
Form, Acute Melancholia
Accompanying Bodily Disorder,
Suicidal or Not, Not
Date of this Attack, About May 1 - 1893
Duration, 6 wks
No. of Attack, 1
No. of Admissions, 1
Age First Attack, 68
Time of Leaving, Mar. 31. 1898
Time in Hospital, 4 yr. 9 mos. 18 d.
Result, Died. Fatty Heart.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined June 26 '93 by Dr R M. Philips

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Fairly quick
MEMORY:
Past Events, Impaired
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,
REASONING POWER: Poor
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed,
DELUSIONS: Many – Tells a long
Systematized or Not, story of seeing relative
Special Subjects, almost night after
Transitory or Not, night
HALLUCINATIONS: Many
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Jane McMenamy

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Impaired somewhat from age
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Slight Coatings, None Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Good Accommodation, Good
SIGHT, Impaired from age
HEARING, Fair
COORDINATION, Arms, Fair

Case No. 3375 . Jane McMenamy. Vol.24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

ARTICULATION, Hesitating, Fair Slurred,
FACIAL EXPRESSION, Rather dull
SENSIBILITY,
HEART, Muffled sound
LUNGS, Some in good condition
EXAM. URINE. Sept 9/95. Color yellow. Character flaky dep. S.G 1016. Reaction Acid. Urea 8% Ur. Ac. Urates # Triple phosphates. Amor. Mates
GYNAECOLOGICAL EXAM., Normal condition
MENSTRUATION, Ceased
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Good Medium, Poor Poor. Eats murders etc
SLEEP, Good, Poor, Irregular, at night.
PULSE, Some Atheroma 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 Jane McMenamy

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3375

Residence, Stillwater

Date Admission, June

Admitted by, R. Philips

How Sent, Jo Prat

Sex, Female

Age, 68

Civil Condition, Widow

Children, 6 – 3 living

Age Youngest Child, 38

Occupation, Housework

Degree Education, None

Profession Religion, R.C.

Habits,

Nativity, Ireland

Physicians Committing, D. Merrill & W. C. Clark

Correspondents, George H. Sullivan San Stillwater Minn

No. for Year, 287

Insane Relatives, None

Cause Exciting, Unknown

Cause Predisposing, Unknown

Form, Acute Melancholia

Accompanying Bodily Disorder,

Suicidal or Not, Not

Date of this Attack, About May 1 – 1893

Duration, 6 weeks

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined June 26 by R. M. Philips

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Fairly quick

MEMORY:

Past Events, Impaired

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive,

REASONING POWER: Poor

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed,

DELUSIONS: Many – Tells a long story of loving Relatives

Systematized or Not, abused taught after

Special Subjects, night

Transitory or Not,

HALLUCINATIONS Many

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Jane McMenamy

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Impaired somewhat from age

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Slight Coatings, None Promptness Movement,

PUPILS, Equality, Equal Size, Normal

Response Light, Good Accommodation, Good

SIGHT, Impaired from age

HEARING, Fair

COORDINATION, Arms, Fair

Legs, "

TREMORS, Hands, Slight Tongue, Slight

Facial Muscles, General,

REFLEXES, Patellar, Equal 7 on scale 10

Other Reflexes,

ARTICULATION, Hesitating, Fair Slurred,

FACIAL EXPRESSION, Rather dull

SENSIBILITY,

HEART, Muffled sound

LUNGS, Some rales good condition

EXAM. URINE. Sept 9/95. Color yellow, Character flaky, dep. S.G. 1016. Reaction Acid. Urea 8 1/2 Gr. Am. Mrates # Triple phosphates. Amor. Mates

GYNAECOLOGICAL EXAM., Normal condition

MENSTRUATION, Ceased

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Good Medium, Poor Poor. Sea murders etc

SLEEP, Good, Poor, Irregular, at night.

PULSE, Some Atheroma 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 Jane McMenamy

EBERT, FICKE & CHAMBERS, DAVENPORT, IOWA

1893 This woman was brought here by her Son Mr Sullivan and daughter Ann Sullivan. First symptoms were manifested about May 1st 1893 – by Illusions and Hallucinations. Disease increasing. Is rational at times refuses to eat because thinks there is poison in the food. Also thinks different people try to kill her at night. Sees people and hears voices. No filthy or destructive habits. Nicely in habits and very sensitive to adverse criticism. No intemperance. Had a severe attack of La Grippe during the winter of 1891 & 92. During the last two weeks has been at the City Hospital and had required restraint at night to prevent her wandering away from the hospital. Has a neat general appearance. Conversation is rambling and manifests illusions and hallucinations. Claims that she was in constant fear of death at the hands of imaginary people. Thinks that her head was to be cut off and her body burned. She was quiet and rational on other subjects. Memory is good.

June 13 On admission Temp 100. P. 98. R 26. At bath retired in clean condition.
" 14 Sat quietly upon the ward. Talks incoherently. Appetite good. Slept 6 hours. Very nervous during the night. Would awake thinking someone would kill her. Bands constricted.
" 15 Rested well. Sleeping most of the night. Bowels moved.
" 16 Slept well during night. Refused to come to the dining room.
" 18 Appetite good. Bowels regular. Was noisy part of the day.
" 22 Refused to come to the dining room and was very noisy about bed time.
" 26. Had been quite noisy at night because she heard voices that bothered her and she got up nights and pounded the door. During the day she is fairly quiet.

Sept 29. 93. Appetite good. Behavior quiet. Clean in habits. Works on ward. Talks quite sensibly.
Oct 30 Says she would like to go home. Oct 30 93. Appetite good. Works on ward. Clean in habits.
Nov 4 Talk sensible. Wants to go home. Nov 24. 93. Visited by daughter. Nov 28 93. Appetite good.
" 28 Quiet & pleasant in appearance. Is sick in bed, has been for the past 5 days. Would
Dec 30 like very much like to go home. Dec 30/93. For past week, has been complaining of a cold & some cough. Appetite is good. Is quietly behaved. Talks quite sensibly, although she seems to be a little weak-minded. Works in ward, dining-room. Is clean in personal habits.

1894
Jan 1/31 Jan 1/94. Had a "noisy spell" today. Talk is very delirious. Jan 31/94. Appetite good. Habits continue clean. Has not been so well for the past month, as she had been before. Manifests hallucinations; also illusions. Is, at times, very much excited and noisy. Works in dining-room. Wants to go home.
Feb 1/7 Feb 1/94. Complains, today, of headache. Feb 7/94. Today, complains of pain in right side of her face;

Personal and Medical History of Jane Mc Menamy

1894
Feb 28 the eye looks red. Feb 28/94. Still has a sore eye; Complains of it giving her a good deal of pain. Is quietly behaved. Seems quite fairly well, at the present time. –
Mar 9 March 9/94. Still complains of her eye which is quite sore. Patient transferred to Ct West, today.
" 18 March 18/94. Very quiet & agreeable. Stays in her room, most of the time. Eye still is very sore. –
" 21 March 21/94. Patient was committed here under "Law of '93." recently declared unconstitutional. She was, today, Taken out and Returned under "new warrant" from Muscatine County. Eye is somewhat better. Goes to dining room for her meals now. Apr 1 94 Her eye much better, has a bad cold, coughs some. Is taking med. for cold, assists a little with ward work. April 10 94 Talking & scolding much of the time. Apr 13. 94 Transf to 1st. April 28 94 Appetite good. Behavior quiet. Helps a little with the ward work. May 28 94 Appetite very good. Clean in habits. Had a crying spell the other days. Works on ward. June 1 94 Is not feeling well. Complains of pain in abdomen. Works in the dining room. June 20 94 Is very irritable & quarrelsome. Cries occasionally. July 6 Is feeling some better of late. Appetite good. Bowels reg: Works in the mending room. July 20 94 Appetite good. Clean in habits. Works in the mending room. Aug 10 94 Has been in bed 2 days. Aug 17 94 Appetite good. Works in the mending room. Aug 31 94 Good
Aug 31 94 health. No change in any respect. Sept 30 94. Has not been feeling well for about a week. Appetite quite good. Bowels constipated. Sleeps well. Takes medicine. Works in the mending room. Oct 15 94. Appetite good. Bowels reg. Sleeps well.
Oct 23 94. Was in her spell a few days. Noisy & crying a great deal. Very quarrelsome at times. Has delusions. Nov 15 94 Has not been feeling well for some time. Appetite quite poor. Bowels regular. Does not sleep well. Quite noisy at times.
Nov 30 94. Is feeling better. Works in the mending room. Appetite fair. Bowels regular. Complains of not sleeping well.
Jany 28 95. Behavior noisy & quiet. Appetite good. Bowels regular. Coughs some. Is taking medicine. Feb 25 95 Has a bad cold. Appetite quite poor. Sleeps quite well. Bowels constipated. Is quiet in habits. Works in the mending room most every day.
March 25 95 Has a good appetite. Sleeps quite well. Behavior usually quiet. Has crying spells occasionally. Apr 30 95 Appetite good. Bowels reg. Sleeps well. Behavior has been more quiet of late. Has delusions. May 30 95 Has a good appetite. Sleeps well. Behavior usually quiet, but has crying spells occasionally. Has delusions. Does not work. Quiet in habits. June 24 Appetite fair. Sleeps well. Bowels regular. Has delusions. Tries occasionally to work some in dining room. Aug 31 Been in bed two days. Appetite fair. Sleeps well. Complains of pain in stomach & headache. Behavior usually quiet.
Sept Oct – Nov. Appetite fair, sleeps well; bowels regular; usually quiet though becomes very excited & noisy at times. Refuses to go walking & riding.
Jan 96 Quiet in behavior, but at times talks to herself. Is troubled with asthma. Appetite quite good. Sleeps well. Bowels regular. Does no work. Seldom goes out of doors.
Feb 8 Sick in bed – Feb 9. Transf. to Infirmary. Feb 28 Sick record kept. Bowels regular. Pains dusted with bismuth. Appetite quite good. Mar. 10 Appetite good. Bowels usually constipated. Sits up in a chair in her room at times. Medicine given. Apr 30 Up & out on ward. Seems quite well. May 10 Sitting up. Seems quite well. Appetite fair. May 23 Appetite fair. Neat & tidy in habits.
May 26 Transf. to A. 2. Summary Nurse's Notes by Dr. L. L. Phelps: June 96 Appetite good. Bowels usually constipated. Behavior quiet. Sleeps well. Nov 96 Quiet on ward. Neat in habits. Has delusions. Appetite good. Sleeps well. Very dull & demented & seldom speaks unless to ask for something. Bowels regular. Apr 97 Transf to Inf. Out of bed. Very sore around waist & hips so that it is necessary to wash & dress

(See p. 52)

Personal and Medical History of Bridget Reed

LIBBEY, PUGAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3376
Residence, St Paul Hann
Date Admission, June 13-1
Admitted by, Dr Phillips H
How Sent, Ref Prob J
Sex, Female
Age, 67
Civil Condition, Widow
Children, 1
Age Youngest Child, 30 to 35
Occupation, Housekeeper
Degree Education, None
Profession Religion, R C
Habits,
Nativity, Ireland
Physicians Committing, J. C. Markoe & J. H. Clune
Correspondents, Wm Reed Son - "Home Aged" 19 Wilkin St St Paul
Dunagen Park Raymond Ave St Paul Minn

No. for Year, 288
Insane Relatives, Unknown
Cause Exciting,
Cause Predisposing, Old Age
Form, Senile Dementia
Accompanying Bodily Disorder,
Suicidal or Not, Not
Date of this Attack, Nov 1892
Duration, About 8 mos
No. of Attack, Unk
No. of Admissions, 1
Age First Attack, Unk
Time of Leaving, July 24 - 1901.
Time in Hospital, 8 yrs 1 mo 11 ds
Result, Died. Senility.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
~~Quick or~~ Sluggish, and confused
MEMORY:
Past Events, Dull
Recent Events,
Special Subjects,
PERCEPTIVITY: Dull
Alert or Dull, Poor
Correct or Illusive,
REASONING POWER: Poor
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS: Patient does not talk and can get very little from her She is dull and but about 1 decide

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, & dull
DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Bridget Reed

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 87 lbs NUTRITION, Infants frame age
WOUNDS OR ABNORMALITIES, Has a deformed toe
TONGUE, Tremors, Some Coatings, Promptness Movement,

Case No. 3376. Bridget Reed. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

remains - was case of Paralysis Agitans

TREMORS, Hands, Some Tongue,
Facial Muscles, General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Can not test Slurred, Will not talk
FACIAL EXPRESSION,
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal condition
MENSTRUATION, Irregular
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, 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 Bridget Rud

HERBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA.



Whole No. 3376
Residence, St Paul Minn
Date Admission, June 13 - 1
Admitted by, Dr Phillips H
How Sent, Co Prob J
Sex, Female
Age, 67
Civil Condition, Widow
Children, 1
Age Youngest Child, 30 to 35
Occupation, Housekeeper
Degree Education, None
Profession Religion, R.C.
Habits,
Nativity, Ireland
Physicians Committing, J. C. Markoe & J. H. Cleaver
Correspondents, Mrs Rud Son - "Home of Aged" 19 Wilkin St St Paul
Dunagan Park Raymond Ave St Paul Minn

No. for Year, 288
Insane Relatives, Unknown
Cause Exciting,
Cause Predisposing, Old age
[illegible]

No. of Admissions, 1
Age First Attack, Unk.
Time of Leaving, July 24 - 1901.
Time in Hospital, 8 yrs 1 mo 11 ds
Result, Died. Senility.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
~~Quick or~~ Sluggish, and confused
MEMORY:
Past Events, Dull
Recent Events,
Special Subjects,
PERCEPTIVITY: Dull
Alert or Dull, Poor
Correct or Illusive,
REASONING POWER: Poor
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS: Patient does not take care of herself very little. She is deaf and half almost blind

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, ~~&~~ dull
DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Bridget Rud

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 87 lbs NUTRITION, Infants for age
WOUNDS OR ABNORMALITIES, Has a deformed toe
TONGUE, Tremors, None Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, Dilated
Response Light, Normal Accommodation, Normal
SIGHT, ?
HEARING, Very poor
COORDINATION, Arms, Can not test Has a hunt back and
Legs, human Mild case of Paralysis Agitans
TREMORS, Hands, None Tongue,
Facial Muscles, General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Can not test Slurred, Will not talk
FACIAL EXPRESSION,
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal condition
MENSTRUATION, Irregular
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, 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 Bridget Reed

BARNEY, FOLAN & CHAMBERS, DAVENPORT, IOWA

1893 This woman was brought here by Dep Sh Hanes accompanied by Fallanning Hartung - Symptoms manifested Sept 1892 - time she has been at the Home of Aged St Paul - Disease has been increasing since then Insanity rapidly more furtive past 8 or 10 days - Imagines she is going to be killed - Will not eat and dresses hurriedly and destroys her clothing Has Insanna Dispsychiatric & puerperal attack Has been confined in a room for last five days - Refuses all medicine - During examination said she was going to be killed Complained that she had no money and refused to be comforted Was very much excited She is helpless and without support

June 13 Bodily condition clean - Walks very much bent over
" 14 Very uneasy Walked the floor nearly all day and constantly taking off her clothes - At times little
" 16 Most part of the day Rude watching most of the time
" 18 Appetite good Still uneasy and troublesome
" 20 Behavior quiet in behavior today Appetite very good
" 21 Has walked the floor and talked most of the day -
" 23 Appetite good Is more quiet today -
" 26 Talks most of the time Complains of a lame back
Is very much bent in walking Sits most of the time in a self absorbed way or talks restlessly about talking to herself General Noted June 15th 93 Removed to C 2

July 6th 93. Appetite usually good Dirty in habits occasionally, Behavior violent at times. 19. Talk is not rational. Aug 12 93 Has been sitting up a few hours each day for about a few days. Up on the ward today Appetite good Talks incoherently a great deal & pinches the hair when she walks Aug 21. 93. Moved to C 3

Sept 30. 93. Appetite good Behavior restless. Walks up & down the hall, tries doors rooms Talk not sensible. Was thrown down by C 4 patient, bruised forehead & had a black eye.

Oct 30 Generally very quiet. Neat & clean in habits. Oct. 30. 93 Appetite good Behavior generally quiet, but occasionally has singing spells is quite noisy at such times Clean in habits. Bowels regular.

Nov 30 Nov 30. 93. Appetite good Behavior generally quiet, clean in habits. Bowels regular. Report of nurse commencing July 23. 93 Jumped out of the window from 2nd Story, sprained her left ankle badly complained some of her left side, but did not seem to have any other injury - Patient is quite weak, but has always been weak, likes quietly in bed. Was very cross at times, but otherwise quiet & enjoyed good night rests, appetite good, was a little restless Aug 17 & 18 after words quiet & up in ward on Aug 21st For further particulars see nurse records case /-

Dec 11 Dec 11/93. Sleeps well. Appetite good. Quietly behaved, of late. Clean in her habits
" 30 Was today, Moved to P. East. Dec 30/93. Eats well. Talks very little. At times, is quite noisy. Makes no complaints.
1894 Jan 15/94 Jan 15/94. No very material change - Jan 31/94. Appetite fair. Sleeps, at times, quite noisy. Becoming untidy in habits.

Personal and Medical History of Bridget Reed

1894

Feb 20 Feb 20/94. Appetite is good. Quite often is noisy, scolding &c. Talks to herself. Habits untidy.
" 23 Feb 23/94. Patient was committed here under the "law of 1893", recently declared unconstitutional; She was, today, Taken out and Returned under "new Warrant" from Olmsted County.
Mch 30 94. Appetite fair. Untidy in habits. At times quite noisy singing & talks to herself. Apr 30 94 About the same May 16 94 Transf to B 3 May 29 94. Appetite good. Untidy in appearance Habits dirty Refuses her meals at times does not go forward. June 5 94 Appetite poor has diarrhoea & vomiting Medicine as directed Sick in bed 3 days June 8 94 Up on hall June 30 94. Appetite good Untidy in habits Talks incoherently Walks about ward a great deal. General health good. July 29 94 Appetite good Neat in appearance. Untidy in habits At times quite noisy. Talks incoherently Aug 31 94. Appetite fair. Habits very untidy in behavior. At times very noisy & will fight. Destructive to clothing. Bowels regular. Goes riding. Sept 28 94 Appetite good Occasionally dirty in habits. Noisy and disturbed at times. Talks incoherently Oct 26 94. Appetite fair. Clean in appearance occasionally dirty in habits. At times quite noisy and restless at night. Nov 29 94 Continues just the same.
Feb 28 95. Appetite quite good. Clean in habits Quiet in behavior Talks very little and incoherently. General health good.
Mch 28 95. Quite noisy at times. Occasionally dirty in habits. Appetite fairly good Apr 28. 95. Gen health good
May 28. More restless and nervous lately. June 28 Gen. health good. Behavior same. July 29 Appetite good. Bowels regular Noisy at times. Incoherent. Dirty occasionally. Aug 27 Same & B 4
Sept 20 Eats & sleeps well. Bowels regular Goes out doors Aug 31 Noisy at times
Oct 18 Appetite good Bowels regular Noisy at times. Goes out doors.
Nov 20 Eats & sleeps well. Dirty in habits. Nov 29 No change.
Dec 11 1895 Appetite fairly good Bowels regular. Noisy at times. Very dirty in habits.
Jan 20 Eats & sleeps quite well. Mar. 15 Appetite fairly good. Noisy at times
Bowels regular. Very dirty in habits.
June Summary Nurse's Notes by Dr. E.L. Phelps. Appetite fair: bowels regular: extremely noisy at times: Habits dirty: Oct '96 No change: Jan '97 Talks a great deal to herself: Very incoherent & demented: Physical health as good as usual: Jan 15 '97 Sick in bed: Has a very sore arm: dressed twice a day: Very stupid most of time: Sleeps a good deal: Jan 31 '97 Has been steadily in bed since last note: To-day able to sit up in bed: Arm has been dressed daily: Is now almost healed
1897 July Very demented & helpless: Habits dirty: Appetite good. (Cont'd by Dr. R. M. Phelps)
Oct 30 Talks somewhat noisily: Is very old, emaciated & bent: quite helpless, at 70 she gets about: Heart shows considerable weakness: great irritability of pulse:
1898 Jan 3 Weight 96 lbs. Aug 2 '98 Transferred to A': Jan 2 '99 About the same in very much exceeding old & emaciated. (Cont. by Dr. R. A. Peters) Mar to Sept. '99: Very feeble: appetite quite good: bowels regular: sleeps greater part of time - often while sitting up in chair: Very dirty in habits: practices self abuse usually quiet but noisy at times Sept 1 - Dec 29 1900 (Dr. Weyse in place) Sept. 18 very old & feeble. Requires a great deal of attention. Appetite good. Bowels regular: Very dirty in habits: Jan 18 97 Eats & sleeps well: Very noisy at times: May 15 1900 No change. July 2 Vaccinated. Sept 1 - Nov 30 1900 Eats & sleeps well: Seems very feeble: Requires much attention: Habits dirty: At times noisy: Sept 15. Hand bruised in some unknown way.

See Folio 3

Personal and Medical History of Mary Jansen

EBERT, PICAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3380
Residence, Whitall St St Paul
Date Admission, June 15 1893
Admitted by, Dr Phelps Hour, 7 P. M.
How Sent, Jail Pat J. B. Clinics
Sex, Female
Age, 43
Civil Condition, Married
Children, 2
Age Youngest Child, 10 yrs
Occupation, Housework.
Degree Education, Common School
Profession Religion, Lutheran
Habits,
Nativity, Denmark
Physicians Committing, Dr. Degner & A. A. Flisburg
Correspondents, Mr George Jansen Whitall St St Paul Minn

No. for Year, 292
Insane Relatives, None known
Cause Exciting, Climacteric & Uterine Disorders
Cause Predisposing,
Form, Acute Melancholia
Accompanying Bodily Disorder,
Suicidal or Not, Not
Date of this Attack, April 10 1893
Duration, About 2 mos
No. of Attack, 1
No. of Admissions, 1
Age First Attack, 43
Time of Leaving, Sept. 6th '93
Time in Hospital, 2 mos 21 ds.
Result, Imp.
Crossed from Reserve List, April 1st, 1894, because illegally committed.
Dr Edgar Schmidt Family Phys.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined June 17 Dr. C. Phelps

MENTAL ACTIVITY:
Clear or Confused, Very much confused
Quick or Sluggish, Sluggish
MEMORY: Very much impaired
Past Events, Did not answer
Recent Events, questions
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,
REASONING POWER: None
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Walks from one to another in dazed and confused manner Acts as if afraid.

EMOTIONAL STATE:
Normal, Calm, Resists anything
Indifferent,
Exalted,
Depressed, Depressed
DELUSIONS: Seems to have many
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Very incoherent
Voluble or Reticent, Talks about going away - Refuses to answer any question Refuses to eat

Personal and Medical History of Mary Jansen

1893

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 1/2 WEIGHT, 94 NUTRITION, Very poor
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, Dilated
Response Light, Sluggish Accommodation, Sluggish
SIGHT,
HEARING, Seems good
COORDINATION, Arms,
Legs,
TREMORS, Hands, None noted Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Equal +
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Dazed and frightened look
SENSIBILITY,
HEART, Very tumultuous action
LUNGS, Could not test thoroughly Seems as if impaired
EXAM. URINE.

GYNAECOLOGICAL EXAM. Some laceration of perineum
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Drinks milk Poor, only by urging
SLEEP, Good, Poor, Irregular,
PULSE, Was not always taken 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 Mary Jansen

EBERT, FICLE & CHAMBERS, DAVENPORT, IOWA

1893 This woman was brought here by Dep. Shf. Haines and her husban Symptoms were first manifested about Apr 10 1893 and have been increasing She has hallucinations of sight and mental depression Delusions of persecution No disposition to injure others or destroy clothing etc No intemperance in the family Has suffered from insomnia, loss of appetite Has been treated by tonics &c &c, Mix etc with little benefit Does not believe her husband is her husband Always has a good deal of headache Thinks her husband has been changed to his brother Has a spasmic facial expression Melancholy and quiet Inclines to wander away from home In a state liable to develop suicidal tendencies

June 16 Restless Running up and down the hall Refused to eat her supper Did not sleep very much last night

" 17 Wanders up and down the hall Talks about her home Refused to eat Drank some milk Slept about one hour Sat up in bed but was very quiet

" 19 Refused to eat Drank some milk Remained in her room all day Refused to take her medicine

" 20 Slept well during the night Quiet in behavior Talks but little Ate some of dinner Drank small quantity of milk

" 22 Rests quite well at night Appetite poor Talks very little

" 28 Appetite poor Eats only as fed Sleeps well Quiet in behavior

General Notes June 16. 93. Admitted. June 20 93. Appetite very much improved, very good at this date. Very quiet on ward. Rests well at night. July 10 93. Very dull & depressed, looks emaciated. July 14 93. Helps in dining room & asked to know when she could go to St Paul. July 17. 93 Visited by husband. 22nd Appetite good. July 29 93. Seems to be improving in every respect, her conversation is seemingly quite rational & she does her work as she understood that she was asked to do. July 31. 93. Appetite fair. Rests well at night. Does not talk very much & says that she does not understand very much English. Is anxious to go home. Aug 11 93. Attempted to escape while out walking this forenoon. Does not seem as well as usual. Aug 21 93 Very anxious to go home. Aug. 23 93. Moved to Inf. Aug 8 93. Somewhat depressed as to of moved back to B2. Aug. 29. 93 Seems more contented & in the same ward still anxious to go home. Sept 6. 93. Visited by husband & returned home with him. Had been in state of mild Melancholia forward the last. Very quiet & backward & depressed. Timid to go home.

~~March 3a 95 Appetite good Sleeps well Eats & drinks Dress Does riding & walking Habits clean Rides out with attendant~~

~~Apr 18 95 Wants to go home Mary Jansen 95. Appetite good Sleeps well Does riding & walking Habits clean Rides out with attendant~~

Personal and Medical History of Jane McMenamey

(From p. 44)

often: Apr. 21 '97: Has been steadily in bed since last note: Baths washed & dressed often during day: Has taken regular meals. Temp. has ranged from 99 to 100. May '97 Able to be up on ward: Transf. to A3: Does no work: Takes out door exercise: July '97 Quiet: Has delusions: Appetite good: Has some difficulty in breathing at times (Noted by Dr. R. W. Phelps) Oct. 8 '97 About the same as for some time past: has cardiac asthma: Is quite feeble & there are some signs of failure at times: Dec 8 '98 Weight 116 lbs. Asthmatic breathing shows more prominently at times: Mar. 31 '98: Patient had a sudden heart failure at 3 a.m. extreme dyspnoea & congestion of face. Died at 5:30 a.m.

Died

Minnie Harding

From p. 36
1899 March Sept. (Noted by Dr Bell) General health fair appetite very good: sleeps well: neat in habits rather careless in appearance: at times destructive: very active: at times quite restless: talks little, but answers questions quite sensibly & is not nearly so silly as formerly, much quieter: works in sewing room. Has tubercular ulcer on right side of neck. Aug 18 '99 Weight 104 lbs.

Sept. Feb 28 1900. Nov 29. Neat in habits but careless in appearance: Very active: Works in dining room: Does not express any delusions: Talks but little answers questions: Eats & sleeps well: Takes out door exercise: Menstruation regular: Jan 1st. Wt. 111½. March - Aug 31 - During the Spring was neat in habits but later became untidy & careless: So restless & active: Appetite good: Bowels regular: Sleeps well: Takes outdoor exercise July 1st. Vaccinated. Sept. Nov 30 Appetite good: Sleeps well: Bowels regular: Menstruates regularly: Takes out door exercise: careless in appearance: Dirty in habits: at times noisy: Speech incoherent. Nov 24. Wt. 107½ lbs

Dec. Feb 28 1901. General health good: attends amusements occasionally: Takes outdoor exercise: Assists with ward work: Very untidy. March Wt. 110 lbs

Mar - June 1 - 1901 Mental and physical condition unchanged: menstruates May 29 cervical glands enlarged painted with iodine twice daily May 30 Wt. 106 lbs. June to Sept. June 20 trans. to Inf. W suppurating glands both sides of neck glands opened, drained and dressed daily, Aug. 30 Wt. 97 lbs. Sept. to Dec. Sept. 5 visited by friends, glands still dressed: Nov. 29 Wt. 100 lbs.

Up to Feb 1, 1903. General health fairly good: bowels regular: takes exercise: sleeps well: eats well: assists with the work: neat in habits: rather careless in appearance: menstruates regularly: Dec. 1st, Wt. 116¾ lbs.
as a rule does all commands: whispers to herself at times: will answer questions intelligently.

Personal and Medical History of Isabelle M. Hatt

SIBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3381 Manchester — 293

Residence, Albert Lea — Iowa, Two cousins Paternal

Date Admission, June 15 - 1893 — Domestic trouble

Admitted by, Dr Phelps Hour, 7 P — sing, Hereditary taint

How Sent, Jas Prab. H. Blake — wnie Melancholia

Sex, Female — Bodily Disorder,

Age, 33 — Suic.

Civil Condition, Married Divorced — tack, 9 mos ago

Children, 2. — nar

Age Youngest Child, 6 — /

Occupation, Housework — ons, /

Degree Education, Common School — Attack, 33

Profession Religion, Presbyterian — e of Leaving, January 25 - 1903

Habits, Good — e in Hospital, 9 Yrs 7 Mos 10 Ds

Nativity, Canada — ult, Died; Pulmonary Tuberculosis

Physicians Committing, L. A. Blackmer P. W. Carey

Correspondents, Dr L. A. Blackmer Family Phys. Mother Mrs Almira Pickford Hatt

Albert Lea Minn — Albert Lea Minn

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear on most subjects

Quick or Sluggish, Fairly quick

MEMORY: Seems good

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive,

REASONING POWER: Impaired

Ordinary Subjects,

Own Mental State, Partially realizes her

Special Subjects, mental condition

GENERAL DESCRIPTIVE REMARKS:

Has an appearance manner - Wanders if she will get well so can go home again

EMOTIONAL STATE:

Normal, Calm, Calm usually

Indifferent,

Exalted, Cries at times

Depressed, Inclined to be depressed

DELUSIONS: Has many -

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Mostly coherent

Voluble or Reticent, Talks freely and quite sensibly on most subjects

Isabelle M. Holt.

...ical History of Isabelle M. Hatt

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 in — WEIGHT, 115 lbs — NUTRITION, Fair

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, None — Coatings, Considerable — Promptness Movement, Normal

PUPILS, Equality, Slight inequality — Size, Dilated slightly

Response Light, Normal — Accommodation, Normal

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Says has always had trembling of hands and when she tries to exert self tremble in arms and legs

Legs, No

Case No. 3381. Isabelle Holt. Vol.24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

ARTICULATION, Hesitating, Prompt — Slurred,

FACIAL EXPRESSION, Worried look

SENSIBILITY,

HEART, Somewhat irregular

LUNGS, Seems in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, — Clean, Clean — Careless,

BOWELS, Normal, — Constipated, Constipated — Irregular,

APPETITE, Good, — Medium, Medium — Poor,

SLEEP, Good, Fairly 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 had nervous prostration at one time

Father or Pat. Relations, Has Asthma

Brothers or Sisters,

Personal and Medical History of Isabelle M. Hatt

LIBRARY, PUTNAM & CHAMBERS, DAVENPORT, IOWA



Whole No. 3381 Manchester
Residence, Albert Lea — Freeborn
Date Admission, June 15 — 1893
Admitted by, Dr Phelps Hour, 7 P
How Sent, Sheriff Prob. H. Blacker
Sex, Female
Age, 33
Civil Condition, Married Divorced
Children, 2
Age Youngest Child, 6
Occupation, Housework
Degree Education, Common School
Profession Religion, Presbyterian
Habits, Good
Nativity, Canada
Physicians Committing, Dr. A. Blackmer & Dr
Correspondents, Dr. A. Blackmer Family Rep. Mother Mrs Almira Hatt Stepford
Albert Lea Minn Albert Lea Minn

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear on most subjects
Quick or Sluggish, Fairly quick
MEMORY: Seems good
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive,
REASONING POWER: Impaired
Ordinary Subjects,
Own Mental State, Partially realizes her mental condition
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Has an anxious manner. Wonders if she will get well so can go home again

EMOTIONAL STATE:
Normal, Calm, Calm usually
Indifferent,
Exalted, Cries at times
Depressed, Inclined to be depressed
DELUSIONS: Has many.
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Mostly coherent
Voluble or Reticent, Talks freely and quite sensibly on most subjects

Personal and Medical History of Isabelle M. Hatt

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 in WEIGHT, 115 lbs NUTRITION, Fair
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, None Coatings, Considerable Promptness Movement, Normal
PUPILS, Equality, Slight inequality Size, Dilated slightly
Response Light, Normal Accommodation, Normal
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Says has always had trembling of hands and when the least excited will tremble in arms and legs
Legs, Trembling when excited
TREMORS, Hands, Some - Not noticeable when writing Tongue, None
Facial Muscles, None General, Under
REFLEXES, Patellar, Equal 5-
Other Reflexes,
ARTICULATION, Hesitating, Prompt Slurred,
FACIAL EXPRESSION, Worried look
SENSIBILITY,
HEART, Somewhat irregular
LUNGS, Some in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Constipated, Constipated Irregular,
APPETITE, Good, Medium, Medium Poor,
SLEEP, Good, Fairly 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 had nervous prostration at one time
Father or Pat. Relations, Has Asthma
Brothers or Sisters,

HERBERT, PUCKLE & CHAMBERS, DAVENPORT, IOWA

1893 This woman was brought here by her family Phys Dr F. A. Blackmer and her mother Symptoms were first manifested about nine months ago by fearing approaching insanity weeping, insomnia, threatening actions etc. Disease has been increasing Insanity manifested as delusions Hears voices say she is against her Life is variable Has shown savage disposition to injure others No filthy or destructive habits Sharpened a knife and said she was going to cut her throat took it but gauntle knife of easily Taken had Opium habit but contracted it after her birth Has Diphtheria some yrs ago Has been secluded in a room Has been treated with tonics and sedatives but with no particular effect Talks incoherently Upon examination said she was not insane Is constantly weeping Imagines her husband is going to take her children from her That he blames the whistle of every train she hears passing That people are making to betray her with his hands

June 16 Bodily condition clean Quiet in behavior Appetite not very good Slept well last night

" 18 Was very noisy this morning Wanted to go home Bowels constipated Slept about four hours

" 19 Quiet in behavior Appetite good Slept quite well last night

" 20 Was very noisy in morning Crying and wanting to go home

" 22 Nervous and very much disturbed at bed time Gave a small sleeping dose but no effect

" 23 Very fractious and crying at times Appetite fair Awake most of the night

" 24 Very noisy at times Appetite poor Was out walking and tried to throw away

" 28 Appetite poor Noisy and restless at times

General Notes Admitted June 15.93. June 24.93 Rested much better than usual, quiet sleeping most of the night. June 26.93. Restless all night, came out in hall & had to force her back to her room. June 28.93 Extremely noisy 4 hrs walking about the room crying. Gave sleeping dose 10 30 PM no effect - more quiet after 1 a m but did not sleep.

June 29.93. Noisy 1 hr. gave sleeping dose 10 30 PM slept the rest of night.

" 30. Noisy at 1 a m, pounding the door, gave sleeping dose, quiet for rest of night. Appetite fair, noisy at times, is hysterical at times In seclusion 8 hrs.

July 1 2 93. Extremely noisy most of the day, gave quieting dose with very little effect, awake all night, noisy at times. July 1 3 93. Slept 2 hrs out of bed 1 hr. Pounding on the door, gave sleeping dose 11 30 PM, some quieter after taking.

July 14.93 Very hysterical, took 4 attds to hold her, would pound & bruise herself, appetite very poor July 16 93 Attempted suicide by trying to cut her throat. Sleep very restless but not noisy paced. July 17 93. Restless most of the night slept about 2 hrs. July 19 93 Very wild & trying to injure herself, struggled with her for 1 1/2 hrs, gave sleeping dose, made her sleep for 2 hrs - while awake quite restless sitting up in bed. July 23. Very much excited, gave hypod July 24 93. Slept 7 hrs, had quite a hysterical spell, held her 1 hr. gave Hypod 3 40 a.m. July 26 93. Very quiet, but did not sleep much, if any. July 30 93 Appetite very poor at times, will not feed herself does not talk much at anytime, Sometimes asks to go home to her children. Very much depressed

Aug 8 93. Very bad hysterical spell, had to hold her for 2 hrs. Gave hypod. More quiet after 3 PM Appetite very poor. Aug 11 93 Visited by mother & sister but would not talk to them Aug 12 93. 1 PM. Very bad hysterical spell 5 attds had to hold her, spell lasted 1 1/2 hrs. gave hypod as directed was quiet for 1 hour after the medicine remained so the rest of day. Aug 13 93. Very restless most of the night but quiet while awake. Aug 16 93 Tonic but does not care to take it. Appetite poor Aug. 18 Will not take tonic Aug 19 Fighting Mrs Knutson & kicked her in back Aug 22 Fighting Aug 26 Fighting & very restless most of the night. Aug 29 93 Very wild & fighting. In seclusion - also gave hypod more quiet after 1 hrs. Aug 30. 93 The same.

Aug 31 93. Fighting. In seclusion 20 hrs during month. Sept 1 93 Tried to get out through the door while company was coming in & fought when brought back. Had to be put in seclusion. Sept 2, 3 rd & 5. 93. The same Sept. 5 93 Very bad about taking the keys to get away - fought to get them from her. Being very restless, did not sleep any out of bed several times Sept 6 93. Very wild, fighting, gave hypod. as dir: much quieter from after. Sept. 8 93 Sleeping 2 hrs in seclusion. Sept 12 93 Trying to get out of seclusion Sept 21 93 Fighting Sept 28 93. Always trying to get out, when ever the door opens. Got out bed & fell on stairs & bruised herself some Sept 26 93 Quiet but awake most all night. Slept about 4 hrs. 27th Awake most all night. Slept 3 1/2 hrs. Removed one of the grates from airflue & tried to throw herself down. Sept. 30 93 Appetite good Tidy in habits Has been fighting In seclusion 52 hrs during month Oct. 93 Tried to carry a fork out of dining room & when it was taken from her commenced to fight & in the scuffle got hold of a gold ring which she tried to swallow. Oct 2 93 Tried to cut her throat while in the dining room, also fighting & put in seclusion. Oct 3 93 Fighting so that it was impossible to keep her on hall & had to keep her in seclusion all day & also has to be fed in room for her own safety as she is so determined to take her own life. Oct 5 93 Very wild, gave hypodermic, which quietened her. Oct 6 93 Fighting. Oct 8 93 Fighting tore a pillow & tried & attempted to strangle herself. Gave hypod - no effect. Oct 9 93 made an other suicidal attempt had to put restraint for her own safety. Oct 23 93 Awoke out of bed at 3 a.m. pounding, screaming & hallowing, & bruised noisy 4 hrs. Oct 24 93 out of bed & restless. Slept 3 1/2 hrs. Oct 27 93 Fighting. Received a black eye. Oct 31, 93. In seclusion 21 2 hrs. R. 317. Nov 7 93 Refused supper Nov 8 93 Did not take any nourishment Nov 9 93 Ate dinner & supper. Made her Escape out on the stairs when a party came in. Fought very hard when brought back or word had to put in her room Nov 14. 93. Fighting, Kicking Shockingly on hall had to be put in her room for a while. Nov 26 93 Fighting Nov 27 93 Fighting, very difficult to take care of. Has to

Personal and Medical History of Sarah E. Goodrich

GIBERT, FICKAN & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3384.
Residence, Rochester, Minn.
Date Admission, 17th June 1893
Admitted by, Dr. Phelps Hour, 3 PM.
How Sent, Thomas Fraser, Jof C, Olmsted County
Sex, Female
Age, 73 years
Civil Condition, married (has not lived with husband for many yrs).
Children, none; has had one son, killed on R.R. 6 or 7 years ago.
Age Youngest Child, —
Occupation, Tailoress
Degree Education, Common School
Profession Religion, Methodist
Habits, has been intemperate + addicted to use of narcotics
Nativity, unknown. —
Physicians Committing, E. C. Cross & Chas. T. Granger.
Correspondents, Family Phys^cn. Mrs Lucy Easton. Rochester Minn
(Niece + Friend) Mrs Henry Olsen, Rochester, Minn

No. for Year, 296.
Insane Relatives, not known if any
Cause Exciting, excessive use of morphine
Cause Predisposing, not stated.
Form, Acute Melancholia
Accompanying Bodily Disorder, ?. Has had head-injury
Suicidal or Not, Suicidal; by opening artery + by morphine
Date of this Attack, June 4th 1893; Suicidal attempt
Duration, about 2 weeks —
No. of Attack, not the 1st —
No. of Admissions, 1
Age First Attack, not stated
Time of Leaving, June 28 - 1893
Time in Hospital, 11 days
Result, Died

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:

Wait weight to be made
out Warrant for Mental + Physi-
cal examination. Could not
be made

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 Sarah E. Goodrich

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION Decrepance from age
WOUNDS OR ABNORMALITIES, Cut on left arm Same bruise on limbs
TONGUE, Tremors, Some Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, Dilated
Response Light, Normal Accommodation, Normal
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.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
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 Sarah E. Goodrich

EMBURY, FISCHER & OHAUSBERG, DAVENPORT, IOWA

1893

This patient was brought here by deputy Sheriff Morey, attended by Mrs. Morey, with following history. Do not know as to consanguinity or heredity. This is not the 1st attack. She has been getting in this way for years. Has not been in hospital. First symptoms of this attack were manifested June 4th 1893, when she attempted suicide, by opening a vein in left arm. She also swallowed a large quantity of morphine on the night of 14th inst. with suicidal intent. Disease appears to be increasing, but it is variable and there are rational intervals, irregularly. Derangement is now manifested by the development of this disposition to suicide. Is not disposed to injure others. Nor is she filthy or destructive. Patient has been addicted to intemperance & habitual use of narcotics. Has also had an injury to the head. She has not been restrained or confined. Supposed cause of attack is excessive use of Morphine. No treatment has been given her, until now, at the present attack. On Personal Examination, learned the above facts regarding her attempts at suicide. She stated to several witnesses examined that she wanted to kill herself. But she made no statement in presence of the Examiners, she being under the influence of morphine. Patient's appearance and manner were those of a person addicted. The people with whom she is staying are afraid to leave her alone on account of her suicidal propensities.

June 17 93. Patient is in a weak & somewhat exhausted condition. Was put on B².

" 18 Quiet in bed some. Talks very little. Appetite very poor. Awake all night.

" 20 Was in bed all day. Ate but little.

" 21 Did not seem to vomit from Morphine but wanted something to relieve nervousness. Is pallid and weak.

" 23 Moved to C² Restless and nervous.

" 24 Ate no breakfast. Temp 98.4 Pulse 96. Resp 20. Asks for water every few minutes. June 25 - Is noisy and restless.

" 26 Gave Morph gr ¼ in morning & another dose at night. Drinks milk & takes very little solid food.

" 27 Very restless, screaming and noisy. Gave Morph S. gr ¼ morning and repeated at bed time. Sitting and screaming nearly all the time. Eats very little. Drinks milk and takes some.

" 28 - 9 am Pulse 80 very weak - Temp 93.8 in axilla. Surface cold. Resp 30 - Became cold & quiet morning. Gave dose. Part nine & Morph. gr ¼ - Raised up to take the nine and laid back on pillow as if fainting. Hypodermic of Digitalis given. Did not revive. Died at 10 A.M.

Died

from page 56

Personal and Medical History of Isabella M. Holt.

Kept in restraint day & night. When given a bath, it takes 5 or 6 attds to do it. Nov 29 93 Appetite good. Talks about her children most of the time & thinks they are in the building somewhere, very determined to take her own life, has to be kept in restraint all the time. Not very neat in habits. Will spit on the floor or the wall, in her room or on the floor. Will also spit in attendants face while trying to give her proper care. Rests well at nights. 7 20 hours, seclusion 5 3 hrs. Dec 3 93 Fighting. Dec 7 93 Out of bed, lying on the floor at 1.30 A.M. Restless & awake until morning. Dec 8 93 Ear bleeding, cause unknown, may have hurt herself in some way, used med as dir. Complained of scratching, & might out of bed at 12 M. standing by heater, lying a floor ½ hr at 2.30 A.M. Restless & out of bed until morning. Dec 10 93 Out of bed, lying on floor at 3 a.m. ½ hr. restless until morning. Dec 11 93 Found a needle in the wooden part of screen where she had hurt her ear. Was very angry because I removed the same, has taken but very little nourishment for past few days. Dec 14 93 Ear seems to be worse, has been discharging some pus, use med as directed. Ear the same, use med as dir. Dec 28 93 Seems much brighter, realizes that she has been very sick. Talks very rationally about home. Asked to be taken out of restraint said she would not try to harm herself & her request complied with & so far has been very quiet. Dec 31 93 Appetite good & for the past 2 days takes her turns willingly - does help with the work on ward. Talks very rationally & considerately about everything. Realizes that she has been very sick & feels grateful for the care she has received - Expresses her sorrow for having fought the attds & asks their forgiveness. Habits clean. In restraint 6 2 8 hrs during the month. Think it was right to put her in restraint, for if not, she would have killed herself she says. Had

1894
Jan 18 hallucinations of hearing some one telling to kill herself. January 18 1894 For the past 3 weeks has improved in every way, has gained in flesh & seems quite well in every respect. Visited by mother & returned home with the same. (Patient had been committed Here under the "Law of 1893", recently declared unconstitutional).

Feb 27 Feb 27 94. Patient was Returned today under "New Committment papers" from Keokuk County. Put on B². (Wt 130 pds.). Feby 27 94 Rec'd on ward. Mch 15 & 22 94 Visited by Prof.

Mch 29 94 Menstruating. Appetite good. Nois'd quiet on ward. Seems to appreciate & feels very thankful for her kind treatment & always speaks well of every body. Says she feels much stronger now. Talks coherently & feels a little nervous at times. Apr 15 94 Complains of feeling nervous & also of bad taste in the mouth. Ears med as directed. Apr 16 94 Transf to B¹.

Apr 28 94 Appetite poor. Sleeps well. Seems very despondent. Takes little if any interest in anything. Does no work. May 1 94 Removed to B². May 5 94 Menstruated.

May 12 94 Very much excited. Violent. Put in seclusion. Refused med. May 14 94 8 a.m. Vomited. Put in bed. Med as dir. 3 a.m. Up on hall & seemed very excited. demanded clothing to go home. Had to be kept in lower bay the rest of the day. May 16 94. Out of bed talking for 2 hrs. Slept 3 hrs. May 17 94 Very much depressed. Has to be dressed & undressed & also spoon fed. May 21 94 Fought in morning. Had to be dressed. Has to be kept in lower bay. Talking to herself most of the time. Violent in behavior.

June 5 94 Fought with Mary Wagner. Broke dishes in dining room. In seclusion at meal times. June 7 94 Menstruating. June 9 94 Very quarrelsome all day. Destroyed clothing. June 30 94 Noisy all night. Quite noisy when out walking. July 3 94 Menstruating. More quiet. Eats in dining room. July 22 94 Noisy all day.

over to page 124.

Personal and Medical History of Bridget Donohue

SEBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3385.
Residence, Faribault, Rice County, Minn
Date Admission, 19th June 1893. —
Admitted by, D^r Kilbourne Hour, 4 P.M.
How Sent, T. A. Mott, Jof P. Rice County. —
Sex, Female
Age, 50
Civil Condition, widowed
Children, 5
Age Youngest Child, 13 years
Occupation, Housekeeper (Husband was a Merchant)
Degree Education, Common School.
Profession Religion, Catholic
Habits, Not intemperate - probably good.
Nativity, Ireland (Parents also born there) -
Physicians Committing, Roscoe N. Jackson M^d D.M. Cool.
(Family Phys^n R. N. Jackson)
Correspondents, John Donahue (son)
Faribault, Minn.

No. for Year, 297.
Insane Relatives, None
Cause Exciting, menopause last menstruation, July 93
Cause Predisposing, not given
Form, Chronic Delusional Melancholia
Accompanying Bodily Disorder, None -
Suicidal or Not, Not
Date of this Attack, March 1893.
Duration, about 3 months
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, about 50 years.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY: Good
Clear or Confused, Clear
Quick or Sluggish, Quick
MEMORY:
Past Events, Seems good
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Fair
Correct or Illusive,
REASONING POWER: Fair
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Denies that she did anything but worry. Says a Mr Murphy came in and told her that her property was lost. Hughes read [illegible] and published that she left all to them for her property

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 Bridget Donohue

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Fair
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, None Coatings, Slight Promptness Movement, Sluggish appearance
PUPILS, Equality, Equal Size, Normal
Response Light, Normal Accommodation, Normal
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs, Good
TREMORS, [illegible] None

Case No. 3385. Bridget Donohue. File No. 9

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

FA... Good
SE...
HE...
LU... ...od condition
EX... Low. Character Flaky dep. Sp. Gr. 1025. Reaction Acid +. Epith. of pus + bladder cells
#...
GE...
MU...
OP...
HE... ...ean, Careless,
BR... ...ipated, Very much Irregular,
AB... ...dium, Poor,
SK... ...oor, Irregular,
PU... ...ESP., TEMP.,
CH...

11:30
4/1

Dr. Tyce:
Please call Dr. John Donohue re: Grandmother, Brigit Donohue.
Kahler
282-2581
rm: 849
CO

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 Stroke
Brothers or Sisters,

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3385.
Residence, Faribault, Rice County, Minn
Date Admission, 19th June 1893. —
Admitted by, D'Silbourne Hour, 4 P.M.
How Sent, L.A. Mott, Jof P. Rice County. —
Sex, Female
Age, 50
Civil Condition, widowed
Children, 5
Age Youngest Child, 13 years
Occupation, Housekeeper (Husband was a Merchant)
Degree Education, Common School.
Profession Religion, Catholic
Habits, Not intemperate - probably good.
Nativity, Ireland (Parents also born there) -
Physicians Committing, Roscoe N. Jackson & D.M. Cool.
Family Phys^n R.N. Jackson
Correspondents, John Donahue (son)
Faribault, Minn.

No. for Year, 297.
Insane Relatives, None
Cause Exciting, menopause last menstruation, July 93
Cause Predisposing, not given
Form, Chronic Delusional Melancholia
Accompanying Bodily Disorder, None -
Suicidal or Not, Not
Date of this Attack, March 1893.
Duration, about 3 months
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, about 50 years.
Time of I[illegible]

EXAMINATION ON [illegible]
MENTAL CHARACTERIS[illegible]

MENTAL ACTIVITY: D
Clear or Confused, Clear
Quick or Sluggish, Quick
MEMORY:
Past Events, Seems good
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Fair
Correct or Illusive,
REASONING POWER: Fair
Ordinary Subjects,
Own Mental State,
Special Subjects,

EM[illegible]
D[illegible]
H[illegible]
I[illegible]
C[illegible]
Coherent or Incoherent,
Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:
Denies that she did anything but worry Says a Mr Murphy came in and told her that her property was lost Hughes read she was foolish that she left all to show for her property

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Fair
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, None Coatings, Slight Promptness Movement, Slug gish in appearance
PUPILS, Equality, Equal Size, Normal
Response Light, Normal Accommodation, Normal
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, None Tongue, None
Facial Muscles, None General, None
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Fairly good
SENSIBILITY,
HEART, Normal - pounds
LUNGS, Seem in good condition
EXAM. URINE. Sept 26/93. Color Red yellow. Character Flaky dep Sp Gr 1025. Reaction Acid +. # Uric acid. am urates. Oxalate of Lime. a few pus + bladder cells
GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,		Careless,
BOWELS, Normal,	Constipated,	Very much	Irregular,
APPETITE, Good, Good	Medium,		Poor,
SLEEP, Good, Sleeps well	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 Stroke
Brothers or Sisters,

Personal and Medical History of Bridget Donohue

SEIBERT, FIDLER & STAUBERN, DAVENPORT, IOWA

1893

This woman was brought here by Sheriff B.N. Stewart, attended by John Donohue & Katie Donohue, with the following history of case. No history of consanguinity; no relatives insane. This is 1st attack; occurring in March 1893; disease appears to be increasing; no rational intervals; for 3 weeks the talks of her trouble constantly & sleeps very little. Derangement is now manifested in her thinking her property has been taken, and her friends & relatives are against her, except her Children for whom she feels greatly concerned. Has shown no disposition to injure others. Is not suicidal, nor filthy nor destructive. Has not been addicted to intemperance or habitual use of narcotics, nor has she had any severe disease or head-injury. Has not been restrained or confined. Supposed cause of this attack is menopause; last menstruation in Febry '93. Has been treated by nervines and tonics, general & uterine. On personal examination, tongue is coated, swollen, blood-shot Eyes, pulse 85, some tremor of fingers. She never has been sick, but, immediately after February menstruation, she was told a man had seized her property and left her and her Children destitute & it worried her so she cannot sleep, Eat &c. Patient cried, Talked as above, over & over and incessantly. Appearance and manner were sorrowful, depressed, positive. Some days, one man is suspected; other days, another. Gets out when possible, and talks all her trouble to any one she meets.

June 19. June 19/93. The patient is in good physical health (apparently). Was put on A'-

" 20 Slight rash on body from heat. Very quiet and natural in behavior. Talks little. Has not shown any delusions. Appetite good. Rested well last night. Bowels constipated. Says always so. P 64 R 22 Temp 97.4

" 21 Quiet in behavior. Talks sensibly. Says she does not intend to stay here more than a month. Appetite good.

" 22 Cried some this P.M. Saying she was insane. Appetite good. Sleeps well. Bowels move regular. Complained of headache.

" 24 Complains of constipation. Rx upon medicine. Also thinks she has some kidney trouble. Quiet in behavior.

" 26 Sleeps well. Talks sensibly. Behavior natural. No delusions noted. Has offered to help with the work.

" 30 Wants to go home. Pulse very low in action. Almost dull at times. Sleeps well most of the time.

July 1 Complains of headache. Says has had it a great deal in the past. Sleeps well. Appetite good. Sits in her room a good deal of the time. July 6 93. Talks in a rather feeble minded way. Health seems good.

July 24 93. Appetite good. Sleep good. Cleanly habits. Behavior quiet. Complains of constipation occasionally. Aug 31. 93. Appetite fair. Sleep good. Cleanly habits. Complained of diarrhoea the 2 or 3d, but is better now. Has kidney troubles she says.

Sept. 29. 93. Appetite good. Sleep good. Behavior dull. Talk quite sensible. Has headache occasionally. Oct 31 93. Appetite poor. Sleep good. Behavior quiet. Seems quite weak minded. Complains of constipation & dizziness. Nov 1 2 93. Very noisy during night & this morning. Delusions very noticeable. Moved to B 1

Nov 27. 93. Sleep poor. Noisy at night. Appetite fairly good. Has delusions. Moved to B 2

Personal and Medical History of Bridget Donahue

1893

Nov 27 93. Awake & quite noisy talking till 2 A.M. Came out on hall & wanted to know if would not lie in bed but on the floor. Nov 28 93. Restless & awake till 2 A.M. quite noisy 30

" 29 walking, refused to take salt. Nov 29 93. Rested quite well, slightly noisy, talking at 11 P.M.

" 30 slept 4 hrs. Nov 30 93. Appetite very poor. Very restless on ward. Very sarcastic & thinks there is not anything clean or good enough for her. Tidy in habits, talking of home & how she has been robbed of her property. ——

Dec 1 Dec 1/93. Has awake and quite noisy until 3 A.M. Then slept for 1½ hours. Awake again since 5 A.M. Noisy & fighting.

" 2 Dec 2/93. Awake & extremely noisy for 4 hours, last night; talking; slept but 3 hours. Since 4 A.M. extremely noisy and keeping the other patients awake. Dec 3/93. Again, quite noisy & talkative last night; complained of constipation. Slept but 3 hrs.

" 4 Complains of sore throat this morning. Dec 4/93. Noisy for 2 hours; out of bed, pounding the door; slept only 3½ hours last night.

" 6/7 Dec 6/93. Rested quite fairly well, last night; slightly noisy in early morning. Dec 7/93. Was awake & quite noisy until 11.30, last night. Talking loud & quarreling with another patient (E. A. Libby). Was, today, visited by friends.

" 9 Dec 9/93. Restless & quite noisy, most of the night; talking. Slept but 3½ hours. Quite noisy, this morning.

" 10 Dec 10/93. Again passed a poor night. Awake the greater part of the time. Quite noisy & talkative. Pulled bed against

" 11 door at 3.30. A.M. Dec 11/93. Quite noisy for ½ an hour at 11 P.M. Had her bed against the door.

" 12/13 Dec 12/93. Awake at 2.30. A.M., and crying for an hour or so. Dec 13/93. Awake & quite noisy, talking.

" 18 since 11.30. Slept but 3 hours, last night. Dec 18/93. Awake since 4. A.M.: quite noisy; walking about

" 19 room and quarreling with Mrs Libby, (her roommate). — Dec 19/93. Out of bed; quite noisy until 10.30. —

" 20/23 Dec 20/93. Restless & slightly noisy, till 11 P.M. Dec 23/93. Last night was out of bed: pushed her bed against the door, and left it there until morning; was extremely noisy for an hour or so; rested quite well, rest of night.

" 31 Dec 31/93. Appetite fair. She has to be kept in lower Bay most of the time, during the day. If not, is lying on the bed & sleeping & then noisy at night, keeping other patients awake. Talks of home. Shows delusions. Talks "of her property all being stolen from her &c &c". —

Jan 5/1894 Jan 5/94. Restless for 2 hours or so, last night; crying & talking. Jan 11/94. Restless & noisy me hour, last night.

" 15 Jan 15/94. Out of bed at 11 P.M., last night and quite noisily talkative for 3 hours or so. Complains of a pain in

" 16/20 left side. Jan 16/94. Awake at 4 A.M. Complains of a very severe pain about heart. Jan 20/94. Restless, last

" 21 night; quite noisily talkative and quarreling with Mrs Libby till 11.30. Jan 21/94. Restless, last night, from 11 P.M. till 3 A.M. Complained of headache; of "feeling sick all over body"; drank a glass of milk. Today, Complains of bowels troubling her; of "feeling bloated"; also of being dizzy & her head aching. Given medicine. Bowels moved freely.

" 28 Jan 28/94. In bed all day; refused nourishment, except one glass of milk. Complains of headache. Refused medicine.

" 29 Jan 29/94. Very restless, last night & out of bed. 2 A.M. Sick at stomach & vomiting. Drank a glass of lemonade & then slept 4½ hours. Jan 31/94. Awake at 1.30 A.M.; had quite a weak and "smothery" spell, lasting 15

" 31 minutes. Pulse weak. Applied cold water & camphor to forehead. —

Feb 9 Feb 9/94. Out of bed, again, last night; quite noisy for an hour, about 10 P.M.: had bed against door till 3 A.M.

" 14 Feb 14/94. Awake & quite noisy till 3.30 A.M.: out of bed; quarreling with E. Libby. Slept but 2½ hours.

" 21/22 Feb 21/94. About 4 A.M. was awake & quite noisy for an hour; also crying. Feb 22/94. Awake at 12 P.M.

" 23 last night; had quite a hard chill; very nervous & dizzy; out of bed twice. Feb 23/94. Was awake at 11.30 last night. Had hemorrhage of bowels at 1. A.M. given hypodermic of morphine, as directed. Bowels moved at 3 A.M. Drank 2 glasses of milk. Was vomiting early morning. Bowels moved very freely, 6 times, during the day. Some blood & mucus was passed: also some faint, eaten the day before last digested;

Trans. Bk. A. 37.

(Carried to page 120)

Personal and Medical History of Bessie Mc Tagert

BARRETT, POLLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3386.
Residence, Keene house (St Paul ?) —
Date Admission, 19th June 1893.
Admitted by, Dr Kielbourne Hour, 7 PM.
How Sent, John. P. Oliver J of P, Ramsey County
Sex, Female
Age, 56 Years.
Civil Condition, married
Children, 3
Age Youngest Child, 12 years
Occupation, Housewife
Degree Education, Some
Profession Religion, Roman Catholic
Habits, unknown.
Nativity, Ireland (Parents born there also).
Physicians Committing, Geo. J Hanley & R. S. Bole.
Family Physician address unknown —
Correspondents, none came with papers - address unknown

No. for Year, 298.
Insane Relatives, unknown
Cause Exciting, unknown
Cause Predisposing, unknown
Form, Senile Dementia
Accompanying Bodily Disorder, None (?).
Suicidal or Not, not. —
Date of this Attack, unknown - probably recent
Duration, probably nothing
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, not given
Time of Leaving,
Time in Hospital,
Result, Trans. to Fergus Falls July 30 95 dk pm
Nat. McTagert (Son) Rose McTagert (daughter) St Paul Lexington Hotel Chicago Ills.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Fairly clear
Quick or Sluggish, Quick
MEMORY: Seemingly good
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Mildly demented
Correct or Illusive,
REASONING POWER: Impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Police picked her up at 2 o'clock at night. Could give us good reason for this.

EMOTIONAL STATE:
Normal, Calm, Seems normal now
Indifferent,
Exalted,
Depressed,
DELUSIONS: None noted
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent, Talks fully and fairly well
Says Mr Dumond (Dead) is some relation to her.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 3/4 in WEIGHT, 143 lbs 176 Once NUTRITION, Fair
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, None Coating None Promptness Movement, Normal
PUPILS, Equality, Equal Size, Normal
Response Light, Normal Accommodation, Normal
SIGHT, Impaired some from age
HEARING, Normal
COORDINATION, Arms, Good

Case No. 3386. Bessie McTagert. Vol. 24.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

Other Reflexes,
ARTICULATION, Hesitating, Fair Slurred,
FACIAL EXPRESSION, Fair
SENSIBILITY,
HEART, Normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., Uterus 1st degree of prolapsus Rectocele
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Clean	Careless,
BOWELS, Normal, Normal	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good, Good	Poor,	Irregular,
PULSE, Normal	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 old age Paralysis.
Brothers or Sisters,

Personal and Medical History of Bessie Mc Tagert

ROBERT, PICLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3386.

Residence, Stearns house (St Paul ?) —

Date Admission, 19th June 1893.

Admitted by, D. Kielbourne Hour, 7 PM.

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

Sex, Female

Age, 56 Years.

Civil Condition, Married

Children, 3

Age Youngest Child, 12 years

Occupation, Housewife

Degree Education, Some

Profession Religion, Roman Catholic

Habits, unknown.

Nativity, Ireland (Parents born there also.)

Physicians Committing, Geo. J. Hawley & R. D. Bole.

Correspondents, Family Physcn address unknown - none came with papers - address unknown

No. for Year, 298.

Insane Relatives, unknown

Cause Exciting, unknown

Cause Predisposing, unknown

Form, Senile Dementia

Accompanying Bodily Disorder, None (?).

Suicidal or Not, not. —

Date of this Attack, unknown - probably recent

Duration, probably nothing

Result, Trans. to Fergus Falls St Hosp

Nat. McTagert (Son) Rose McTagert (daughter)

St Paul Lexington Hotel Chicago Ills.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Fairly clear

Quick or Sluggish, Quick

MEMORY: Seemingly good

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Mildly demented

Correct or Illusive,

REASONING POWER: Impaired

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Police picked her up at 12 o'clock at night. Could give no good reason for this.

EMOTIONAL STATE:

Normal, Calm, Seems normal now

Indifferent,

Exalted,

Depressed,

DELUSIONS: None noted

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent, Talks fairly and fairly well

Says Mr Stewart (here) is some relation to her.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 3/4 in WEIGHT, 143 lbs 170 Oct NUTRITION, Fair

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, None Coating None Promptness Movement, Normal

PUPILS, Equality, Equal Size, Normal

Response Light, Normal Accommodation, Normal

SIGHT, Impaired some from age

HEARING, Normal

COORDINATION, Arms, Good

Legs, Good

TREMORS, Hands, Much Tongue, None

Facial Muscles, None General, None

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Fair Slurred,

FACIAL EXPRESSION, Fair

SENSIBILITY,

HEART, Normal

LUNGS, Seem in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM., Uterus 1st degree of Prolapsus Rectocele

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean Careless,

BOWELS, Normal, Normal Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Good Poor, Irregular,

PULSE, Normal 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 old age Paralyzed.

Brothers or Sisters,

Personal and Medical History of Bessie McTagert.

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893 This woman was brought here by Deputy Sheriff C.C. Haas, with the following history. No consanguinity; acts hereditary unknown. This is 1st attack - when 1st symptoms were manifested is unknown; supposed cause, also unknown. Nothing seems to be known regarding patients habits - Disease is not variable, nor are there rational intervals. Derangement is now manifested by delusions; also by mania, at intervals. Is disposed to injure others, but is not suicidal, nor filthy nor destructive. Has not been subject to any severe disease nor injury to head. Has not been restrained or confined, nor under treatment. On personal examination, it is found patient has no home: shows great irritability of temper; has pronounced delusions on many subjects; claims the Police are persecuting "her &c" - While being examined, tried to hide herself under a mattress. Appearance and manner were those of an insane person. Patient wanders about and is exposed to lack of food & shelter -

June 19 JWW 19/93. The patient, on admission, is in fair condition. Has some bruises on body. Was put on B2 -

" 20 Quiet in behavior - Says she does not entirely like the way she was brought here as she was alright. Slept fairly well. Bowels regular

" 23 Is quiet - Appetite good

" 24 Appetite good. Sleeps well. June 25 Sick in bed. Complains of great pain in the stomach and bowels. Has enema also given Hypodermic Morphia S.gr. ¼. Moved to Sick ward. Put to bed

" 26 Appetite very good. Bowels constipated. Has enema. Has Indian Hemp 2 doses - June 27 Complains of pain in bowels and back. Appetite good. Put upon Malteine three times per day - Still in bed

" 29 Feels much better but still in bed. Bowels regular

" 30 Sat up in a chair short time today. Appetite good. Bowels regular. Sleeps well. Malteine still continued

July 1 Sitting up in bed. Appetite very good. Bowels regular. Sleeps well. July 2 Very noisy. Take up her bed & tosses about. Appetite good. Bowels regular. Sleeps well.

" 8 Upon the ward appears well. Ate a good breakfast. Moved to B2. June 20.93. Rec'd on B2. Appetite very good. Bowels constipated. Habits clean, quiet most of the time, talks a good deal mostly of herself & of her family. Sick in bed 5 days. July 3 93. Moved to B2. July 10.93. Complaining. Irritable. Stomach. Vomited up cathartic & vomiting since. July 11.93. Complains of stomach. Appetite fair. July 18.93. Talks in an angry way about considered persons. Wants some "foolscap" paper to write to British Government. July 19.93. Ate no dinner or supper. Very untidy, spitting on the floor, talks in a very unlady like way & is never satisfied with what is done for her. July 21 93. Sleeping 2 hrs very restless while awake. Sick at stomach. Vomiting & bowel trouble. July 24 Tells many things evidently false. To day given Cantera against any one signing her name. July 27.93 Would not go to bed & called help from C2. took to undress her, changed her form dormatory to side room as it was not safe for her to sleep with other patients in her excited condition.

July 27 93 Visited by friend. July 30.93. Fighting Mrs Holt, pulling her hair & scratching her face. Untidy untidy in habits. Seems to have some catarrhal trouble. Always wearing her dress over her head. Is very ill contented. Aug 1 93. Moved to C1 Aug 2 93. Been very quiet & very irritable. Eats well, does no work. Aug 19 93. Very noisy & violent refuses food. Aug 21. Talks very silly, sleeps well, Complains of pains in stomach. Aug 23 Laughing & whispering to herself. Very irritable & at times noisy asks to go home. Aug. 26. In bed, very irritable. Aug. 28 93 Still in bed. Bowels moved freely this morning. Sept. 1. 93 Appetite very good. Behavior noisy very irritable keeps asking to go home, bowels regular, does no work talks silly at times, has delusions, untidy in habits in the way of spitting on clothes. Sleeps poorly. Sept. 3 93. Fighting other ladies, very noisy all day. Sept 6 93 Fighting all morning. In seclusion ½ hour very noisy. Sept 7 93 Has been irritable and cross. Unreasonable causes a good deal of trouble. Thinks she is imposed upon. Has not wanted to be treated of late.

Sept 10 93 In bed all day. Sept. 26 93 In bed all day. Sept 27 93 Up and dressed, very irritable all day.

Oct 1 " Refusing food the last 3 ~~days~~ meals. Oct 8 93 Has had delusions of late. Oct 12 93 Very noisy all morning, scolding & violent. Oct 16 93 Very irritable all morning, was visited by nephew.

Oct 23 93 Very sullen and irritable all morning. Oct 30 93 Causes much trouble on ward. Never satisfied. Always asking for something. Sullen and ill tempered. Nov 1 93 Been very noisy and whistling all morning. Nov 14 93 Complains of headache. Quarreling with other ladies & thinks all day.

Nov 24 93. Growing more quiet. Nov 27 93 Very irritable, has shown violence, striking the other ladies.

" 29 " In bed. Complains of headache, seems worse after receiving a letter. Nov 30 93 Been extremely

Dec 1 noisy and irritable all day. Dec 1/93. Sleeps well. Appetite good. Bowels constipated. Does no work. Is untidy in habits. Shows delusions. Has been in bed, all day. Dec 9/93. Very violent & irritable, all day.

" 13 Dec 13/93. Extremely violent; kicking & biting; also very noisy. Was held for about 2 hours, today.

" 14/5 Dec 14/93. Refused all meals, today. Dec 15/93. Patient has been very violent, of late; very disagreeable & hard to get along with. Has required "holding" in the lower bay, several times, this past week. Is very

" 21 careless in appearance. Dec 21/93. Received a letter today. Was very disturbed & irritable directly afterwards.

" 30 Dec 30/93. Is extremely noisy & violent, today. Still untidy in her habits. — " —

1894 Jan 9/10 Jan 9/94. Has been extremely violent, all day. Jan 10/94. Had a fight today with Mrs Lustig; hurt her arm. Was extremely violent. Was put in seclusion, and kept there, part of the day. Is intelligent

" 19 in talk. She declares "she will fight to revenge her being kept here". Jan 19/94. Was taken with

" 20 severe pains, abt 6.30 A.M. Complained of stomach & heart". Jan 20/94. Remained in bed, all day,

" 31 although much better. Did not take meals nourishment. Jan 31/94. Has, of late, been very quiet & talks sensibly. Behavior rather of a nervous character. Is on tonics. —

Feb 18/22 Feb 6/94. very irritable, today. Refused to bathe. Feb 22/94. Appetite quite good, though she, occasionally, refuses a meal. Bowels regular. Very irritable, at times; talks silly & incoherently. Keeps threatening to have revenge for being kept here. Is still very careless in her habits. — " —

" 23 Feby 23/94. Patient was committed under the "law of 1893", recently declared unconstitutional. She was, today, Taken out and Returned under "New Committment papers" from Muscatine County

March 10/94 Appetite fair, careless in habits, towels very noisy & violent; talks silly, has delusions, fought in seclusion one hour. March 14 Taken suddenly ill, put to bed, seemed in severe pain, put hot water bag to stomach, given hypodermic - also enema. Bowels moved. 14" still in bed, appetite good, very nauseated. " 16 Extremely noisy & irritable all day, menstruation absent. 28" has not behaved so well of late. March 14" 94 refused all meals 1 day. 17" same as last note. May 24 goes to 2 R., eats well,

June 4 94. Appetite good. Does no work. Has delusions. Behavior quiet most of the time. Silly in head, but spits on the floor. Is careless in her

over L.P. 136.

Personal and Medical History of Bessie McTagert.

EGBERT, FIGLAR & CHAMBLESS, DAVENPORT, IOWA

Whole No. 3392.
Residence, no home; Comes now from St Paul
Date Admission, 26th June 1893.
Admitted by, Dr Phelps Hour, 7 Pm
How Sent, John B. Olivier Jof P. Ramsey County.
Sex, female
Age, about 60(?)
Civil Condition, widow
Children, 4
Age Youngest Child, 27
Occupation, washerwoman
Degree Education, Common-School
Profession Religion, Roman Catholic
Habits, not definitely stated
Nativity, Ireland (Parents also born there)
Physicians Committing, Geo. J. Hanley & Arthur B. Ancker
Correspondents, no address come with "Papers"

No. for Year, 304
Insane Relatives, unknown
Cause Exciting, Senile dementia
Cause Predisposing, unknown
Form, Dementia
Accompanying Bodily Disorder, None (?)
Suicidal or Not, not
Date of this Attack, Since last March
Duration, 3 months or so
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, about 60(?)
Time of Leaving,
Time in Hospital, July 30/95
Result, Trans. to Fergus Falls,
OK Jfm

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Fairly quick
MEMORY:
Past Events, Not much impaired
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive,
REASONING POWER: Unpaired
Ordinary Subjects,
Own Mental State, Dont know why she is here
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Denies having any relatives Dont know much but of a place this is asks "Is this Minnesota" Shows great dullness

EMOTIONAL STATE:
Normal, Calm,
Indifferent, and dull
Exalted,
Depressed,
DELUSIONS: None determined
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None "
ILLUSIONS: " "
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Fair
WOUNDS OR ABNORMALITIES, Eczema of feet and ankles
TONGUE, Tremors, None Coatings, None Promptness Movement, Fair
PUPILS, Equality, Equal Size, One lid drops some
Response Light, Normal. Accommodation, Normal
SIGHT, H.

Case No. 3392. Catherine Clark. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

Other Reflexes,
ARTICULATION, Hesitating, Normal Slurred,
FACIAL EXPRESSION, Normal
SENSIBILITY,
HEART, Some irritable
LUNGS, Some normal
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Normal Constipated, Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, 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, No relatives
Brothers or Sisters,

Personal and Medical History of Catherine Clark.

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3392.

Residence, no home; comes now from St Paul

Date Admission, 26th June 1893.

Admitted by, Dr. Phelps Hour, 7 PM

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

Sex, female

Age, about 60(?)

Civil Condition, widow

Children, 4

Age Youngest Child, 27

Occupation, washerwoman

Degree Education, Common-School

Profession Religion, Roman Catholic

Habits, not definitely stated

Nativity, Ireland (parents also born there)

Physicians Committing, Geo. F. Hanley & Arthur B. Auch

Correspondents, "no address came with papers"

No. for Year, 304

Insane Relatives, unknown

Cause Exciting, Senile dementia

Cause Predisposing, unknown

Form, Dementia

Accompanying Bodily Disorder, None (?)

Time of Leaving,

Time in Hospital,

Result, Trans. to Fergus Falls, July 1

OK fm

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Fairly quick

MEMORY:

Past Events, Not much impaired

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive,

REASONING POWER: Impaired

Ordinary Subjects,

Own Mental State, Don't know why she is here

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Denies having any relatives Don't know what kind of a place this is asks "Is this Minnesota" Shows great dullness

EMOTIONAL STATE:

Normal, Calm,

Indifferent, and dull

Exalted,

Depressed,

DELUSIONS: None determined

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None "

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Catherine Clark.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Fair

WOUNDS OR ABNORMALITIES, Eczema of feet and swollen

TONGUE, Tremors, Some Coatings, Slight Promptness Movement, Fair

PUPILS, Equality, Equal Size, One lid droops some

Response Light, Normal. Accommodation, Normal

SIGHT, Has used glasses

HEARING, Normal

COORDINATION, Arms, Normal

Legs, Normal

TREMORS, Hands, Tongue, Considerable tremor

Facial Muscles, General,

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Normal Slurred,

FACIAL EXPRESSION, Normal

SENSIBILITY,

HEART, Some irritable

LUNGS, Some normal

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Normal Constipated, Irregular,

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, 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, No relatives

Brothers or Sisters,

Personal and Medical History of Catherine Clark.

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 This patient was brought here by Deputy Sheriff Kinney and Mrs Akers, with following history. She is quite an aged woman. As to consanguinity or heredity, unknown. This is 1st attack. Was never sent to an hospital. First symptoms manifested since last March. Disease appears to be stationary; there are no rational intervals. Derangement is now manifested by the fact that she has money, and will not take care of herself, and has probably Bright's disease. Has not been sleeping in bed since last March, sleeping on stair-ways + door steps + at the same time having $165.00 on her person. Is neither disposed to injure others, nor suicidal, nor filthy nor destructive. If intemperate +c, unknown. Has had no severe disease or injury to head. Has not been restrained or confined nor under medical treatment. Supposed cause of the disease is senile dementia. When taken, was found sleeping on the Stairs in a Church, and had on 3 dresses + 2 suits of underclothes. On personal examination, her conversation seems sensible; but appearance and manner were those of an insane person.

June 26 June 26/93. Patient is in aged, but fair, physical condition. Was put on A2.
" " As seen at bath tubs swollen and painful. Body quite clean
" 27 Very quiet and agreable. Appetite good. Sleeps well. Bowels
Habit not marked
" 28 Continues very quiet and pleasant.
" 29 Eats well and is quiet. Talks quite sensibly
" 30 Sleeps well. Is quiet and pleasant in manner
July 1 Bowels are regular. Quiet and agreable.
" 2 Makes no complaint. Continues quiet and well behaved
" 5 Eats and sleeps well. Very quiet
" 6 Continues quiet.
" 8 Very agreable. Now works in centre dining room
" 10 Still works in dining room. Quiet and pleasant
June Bowels. Appetite good. Cleanly in habits. Behavior quiet. Talks quite sensibly. Complains of pain in her ankles, which appear to be badly swollen. July 25 Always dull + quiet in behavior. July 29. 93. Eats well. Clean in habits. Is quiet + talks quite sensibly. Works in centre dining room. Aug 28. 93. About the same, transf'd to A2. Aug 31. 93. Appetite good. Sleep good. Works in E.D. Has made no complaints.
Sept 27. 93 Appetite good. Sleep good. Behavior quiet. Talks quite rational. Works in E.D. Has had a breaking out on limbs but seems to be about over it now; Wants to go away.
Oct 31. 93 Appetite good. Sleep good. Behavior quiet, working in Employes dining room
Nov 30. Appetite good. Sleep good. Very quiet. Has not been working off the board. Plate
Dec 31 1894 Dec 31/93. Sleep + rest at night are good. Appetite also good. Is pretty behaved. Works around ward + in Employes Dining room.
Jan 31 Jan 31/94. Continues to sleep well. Has not feeling very well for a while, the first part of the month, but has quite recovered + is again quite well. Still works in employes dining room.
Feb 7/93 Feb 7/94. Today, removed to A1 East. Feb 23/94. Eats + sleeps well. Clean in habits; quiet in behavior. Does not work at the present time. Transferred to B3 West.
" 23 Feb 23/94. This patient was committed here under the "Law of 1893", recently declared illegal. She was, today, Taken out and Returned, under "New Commitment Papers" from Olmsted County.

Personal and Medical History of Catherine Clark.

Mch 31 1894 Works in centre dining room all the time. Very quiet in behavior. Talks sensibly.
Apr 29. Appetite good. Works in centre dining room. Quiet on ward. May 17. 94. Appetite good. Tidy in appearance. Refused to work in centre dining room. Talk incoherent. Transf'd to A3. May 16 94. May 28 94. Appetite good. Sleeps well. Gen. behavior quiet. Is irritable. Works in E. D. R. June 22. 94. Comes most of the time when on ward.
June 94. Works about the wards. Bowels regular. July 18 94 Bowels reg: Appetite good. Works in the dining room. Aug 31. 94 Gen. health good. Wh. 260 lbs.
Sept 30 94 Is very cross most of the time. Gen. health good. Works in the E.D.R. Oct 20. 94. Appetite good. Bowels regular. Sleeps well. Very quiet when on ward. Seldom will go out of doors. Works in the E.D.R. Nov 27. 94. Appetite good. Bowels reg. Sleeps well. Is very cross and quarrelsome at times. Works in the E.D.R. Feb 28 95. Appetite good. Gen. Tidy in habits. Is rather quarrelsome most of the time. Works in dining room. Poor riding. Gen health fair. Mch 31. 95. No change. May 24 95 Does not work any. No other change. June 30 Appetite good. Clean. Quiet. Rests occasionally. Encouragement. Troubled some with fat sweeting. Gen. health good. Goes riding + walking. July 29 Works in d.r. for last few days. no change. July 30 Trans. to F. Falls.

Personal and Medical History of Minnie Kaeding

GILBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3395

No. for Year, 307

Residence, Smith's Mills, Maine

Insane Relatives, 2 sisters (here in hospital)

Date Admission, 28th June 1893

Cause Exciting, Unknown (at present admn., religious features)

Admitted by, Dr. Kilbourne Hour, 1 P.M.

Cause Predisposing, Heredity

How Sent, E. P. Latham, Ct. Commr., Itasca County

Form, Chronic Mania (Puerperal insanity)

Sex, Female

Accompanying Bodily Disorder, not stated

Age, 27

Suicidal or Not, Not

Civil Condition, Single

Date of this Attack, (probably 2nd) June 21/93

Children, —

Duration, about a week

Age Youngest Child, —

No. of Attack, probably 2nd

Occupation, Domestic (farmer's daughter)

No. of Admissions, 2nd

Degree Education, probably fair

Age First Attack, about 20

Profession Religion, Lutheran

Time of Leaving,

Habits, probably good

Time in Hospital,

Nativity, Germany (parents also born there)

Result,

Physicians Committing, D. J. Cummings & M. J. Taylor

Correspondents, Rudolph Kolz Smith Mills Itasca Co. Minn

Family Phy. of M. J. Taylor Jamestville Minn

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Fairly clear

Quick or Sluggish, Quick at present

MEMORY: Good

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY: Fair at present

Alert or Dull,

Correct or Illusive,

REASONING POWER: Fairly good

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Slightly

Depressed,

DELUSIONS: None

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS: None

CONVERSATION:

Coherent or Incoherent, Disinclined to converse

Voluble or Reticent, Condition fairly well. Says she has spells at which time her morbid ideas come into her mind and for the time being can not get rid of them

Personal and Medical History of Minnie Kaeding

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 107 pds. NUTRITION, Somewhat impaired. Pale

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Quite marked Coatings, Promptness Movement,

PUPILS, Equality, Unequal Size, Dilated Left somewhat larger

Response Light, Accommodation,

SIGHT, Seems good

HEARING, Good

Case No. 3395. Minnie Kaeding. File No. 9.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

came with eyes shut

Other Reflexes,

ARTICULATION, Hesitating, Good. Slurred,

FACIAL EXPRESSION, Good

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

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,") No history of apoplexy or nervous disease known

Mother or Mat. Relations, Mother living Says healthy

Father or Pat. Relations, Father dead Drank a great deal

Brothers or Sisters, 1 Brother 2 Sisters have been here in Asylum

Personal and Medical History of Minnie Kaeding

GILBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3395
Residence, Smith's Mills, Minn
Date Admission, 28th June 1893
Admitted by, Dr Kilbourne Hour, 1 P.M.
How Sent, E. P. Latham, Ct. Commr, Itasca County
Sex, Female
Age, 20
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Domestic (farmer's daughter)
Degree Education, probably fair
Profession Religion, Lutheran
Habits, probably good
Nativity, Germany (parents also born there)
Physicians Committing, D. J. Cummings & M. J. Taylor
Correspondents, Rudolph Kaeding Smith Mills - Itasca Co, Minn

Family Phys. of M. J. Taylor Jamestown N. Dak.

No. for Year, 307
Insane Relatives, 2 sisters (here in hospital)
Cause Exciting, Unknown (attributes advice, religious agitation)
Cause Predisposing, Heredity
Form, Acute Puerperal Insanity
Accompanying Bodily Disorder, not stated
Suicidal or Not, Not
Date of this Attack, (probably 2nd) June 21/93
Duration, about a week

Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Fairly clear
Quick or Sluggish, Quick at present
MEMORY: Good
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY: Fair at present
Alert or Dull,
Correct or Illusive,
REASONING POWER: Fairly Good
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Slightly
Depressed,
DELUSIONS: None
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None
ILLUSIONS: None
CONVERSATION:
Coherent or Incoherent, Describes her own condition fairly well. Says she has spells at which time her morbid ideas come into her mind and for the time being can not get rid of them

Personal and Medical History of Minnie Kaeding

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 107 pds. NUTRITION, Somewhat impaired Pale
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Quite marked Coatings, Promptness Movement,
PUPILS, Equality, Unequal Size, Dilated Left somewhat larger
Response Light, Accommodation,
SIGHT, Seems good
HEARING, Good
COORDINATION, Arms, Fairly good
Legs, " " Sways some with eyes shut
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Good
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
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,") No history of apoplexy or paralysis nervous [illegible] insanity
Mother or Mat. Relations, Mother living Says healthy
Father or Pat. Relations, Father dead Drank a great deal
Brothers or Sisters, Brothers 2 sisters have been here in Hosp.

Personal and Medical History of Minnie Kaeding

EBERT, FISCHER & SCHAEBERLE, DAVENPORT, IOWA.

1893

This patient was brought here by Sheriff Henry Reynolds, attended by Miss Nellie Reynolds, with the following history. (She was here before, from Feb 8/91 to Augt 8/91 – see Vol. 15 page 261. No. 2604.) – This is probably the 2nd attack; first symptoms of it were manifested June 21st 1893 (about a week ago) by excited & erratic actions. Disease is increasing, but it is variable and there are rational intervals. Derangement is now manifested in no particular subject. There is history of heredity, 2 sisters being insane. Patient is neither dispos'd to injure others, nor suicidal, nor filthy nor destructive. Has not been addicted to intemperance or habitual use of narcotics; nor has she been subject to any severe disease, nor has she had injury to head. Supposed cause of disease is unknown; (no previous patient insanity, religious Excitement was assigned as cause). Has not been under treatment this time. On personal examination, said very little; answered such questions as were put to her, fairly well: kept up a constant singing in German; appearance & manner were those of happy exaltation.

June 28 June 28/93. On admission, was quiet, though showed a tendency to become excited. Was put on B2. Is in good physical Condition.
" " Temp. 98. P. 80. Resp 18 Bodily condition clean.
" 29 Was in bed all day. Very quiet. Talks very little. Thinks herself sick. Refuses food. Sleeps well. Slight cough. Bowels regular. Complains of pain in bowels. Temp 98. P. 80. R 18.
" 30 Very weak and faint. Refuses food. Fed by tube. Complains of pain in the chest. Vomited. Bowels constipated.
July 1 Is in bed. Complains of pain in the chest and dizziness. Eats no solid food, but drinks milk.
" 2 Up on the ward.

1893
June 28. On admission: Pulse 80. Resp 18. Temp 98. – Bodily clean.
" 29 1st day. Behavior: lay very quietly in bed all day. Talks very little, believes herself sick. Refuses food. Sleeps well. Slight cough. Bowels regular. Complains of pains in bowels. P 80 R 18. T 98.
June 30. Very weak & faint, refusing food. Fed with tube. Complains of pain in chest. Bowels constipated – In bed. Menstruating.
July 1. In bed. Complains of pain in chest & dizzy weak, Eats no solid food, but drinks milk.
" 2 Up on ward to day, ate no solid food, drinks milk, bowels regular.
" 3 Sick in bed. Complains of pain in chest & feeling cold. Gave hot ginger. Was faint this morning. Temp. normal.
" 4 Up on ward. Feels much better. Appetite very poor. Bowels regular. Talks sensibly.
" 5 Up in ward. Appetite poor, taking very little solid food.
" 6 Helped some with ward work. Appears to feel well. Appetite very poor.
" 7 Helped some with ward work. Bowels regular. Sits in her room most of the time. Wants to be alone.
" 8 Helped a little with the ward work. Talks of going home. Refuses to go out doors.
" 9 Patient much ~~better~~ the same, stayed on ward more, sitting in her room less.
" 10 Out walking to day. Appetite better. Bowels regular. Wrote a letter to her mother.
" 11 " " " " " Stays out on ward more. Sitting in her room less.
" 12 Helps sweep ward. Appetite good. Sleeps well.

Personal and Medical History of Minnie Kaeding.

June 28/93. Admitted June 28. Since which time she has been sick in bed on C2. Does not talk. did not eat anything & was fed with tube, 6 day. Is very quiet.
July 2/93. Got up to day, seems quite sensible. Eats poorly. July 18/93. Appetite good. Rest & habits. Has been helping with ward work most every day. Talks sensibly. Is anxious to go home. July 31. Appetite good. Still helps with ward work. Is quite cheerful of late. Anxious to go home. Aug 3. 93 Menstruating Aug 11. 93. Has been working in sewing room most of the month. Also helping with ward work & is not easy, unless busy. Is making a bag cover for the ward. Appetite good. Seems very sensible. Aug 14. 93. Has seemed quite silly. Laughing to herself & talking. Does not assist with ward work & is rather stubborn. Aug 28. Reported by night watch as quite restless during night. Sept 4. 93 She is quite badly disturbed. Talks to herself all the time. She gets very angry if she is not allowed to do as she pleases, has a good appetite, is neat in habits. Is menstruating. Sept 6. 93 Transf'd to B2. Sept 8. 93 Did not take any nourishment to day. Sept 7. 93 Sleeping 3 hrs, quite restless while awake. Laughing a part of the time.
Sept 10. 93 Sleeping 3 hrs, awake quite a while. Sept 30. 93 Appetite good. Neat about herself.
" 30. Appetite good. Neat about herself. Is very silly. Talking & laughing to herself most of the time.
Oct 8. Complained of headache & hot flashes. Gave med as directed.
" 9. Menstruating. Oct 10. 93 Complains of headache, gave med as directed.
" 11. Complained of stomach. Gave med as dir. for the past few days, has taken but very little nourishment. Oct 14. 93 Seems better & not silly acting for the past few days.
Oct 16. 93 Mind quite bright & seems to realize that she has been sick & not able to control herself. Anxious to go home. Oct 28. 93 Awoke from 1:30 A.M. laughing & talking quite noisy 1 hr. Restless till morning. Oct 31. 93 Appetite good. Does not seem as well mentally for the past 2 days. Talking & laughing to herself acting very silly at times. Nov 2. 93 Visited by friends. Nov 10. 93 Slept about 1 hr. awake and slightly noisy the rest of night. Nov 20. 93 Awake, sitting up in bed till 2:15 restless all night. Nov 21. 93 Refused all nourishment to day.
Nov 22. 93 Menstruating. Nov 27. 93 Awake and restless till 12:30 slept 4 hrs. Nov 29. 93 Appetite good,
" 29 most of the time. Very silly in behavior, acting, talking to herself & singing in common at times. Has to be kept in lower hall, as the other ladies complain about her, on ac't of her making too much noise.
Dec 12 Dec 12/93. Appetite good. Is mostly behaved most of time, talking to herself. Habits clean. Neat about herself.
" 14 Dec 14/93. Was restless & sitting up in bed last night and until 2 AM. Slept only 2 hours or so.
" 15 Dec 15/93. Her manner is very disagreeable towards the other patients. At times, also, is very noisy.
" 16 Dec 16/93. Has continued more or less restless, at night & noisy by day. Transferred to C3 today.
" 31 Dec 31/93. Since her removal to this ward, she has become somewhat better behaved. Habits cleanly.
1894
Jan 7 Jan 7/94. Coughs very hard, at times and expectorates some. Behavior is also improving.
" 31 Jan 31/94. Sleeps well, at night, now. Appetite good; bowels regular. Still coughs quite hard, at times. Quiet and has been very nicely behaved, the past 2 weeks. Talks of going home. – (Menstruated from December 1.) Habits continue clean and neat. –
Feb 15 Feb 15/94. Continues quite well-behaved. Habits are less disagreeable towards the others.
" 24/28 Feb 24/94. Removed to B4 today. Feb 28/94. Appetite good; bowels normal. Is usually quiet.

(carried to page 36) 5 V

Personal and Medical History of Henrietta Gusa

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3397.
Residence, Fosco, Minn.
Date Admission, 30th June 1893.
Admitted by, D Phelps Hour, 7
How Sent, C.J. Latham Let Commr,
Sex, Female
Age, 24.
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Servant (farm
Degree Education, none
Profession Religion, not a church member
Habits, not definite stated. Is dirty -
Nativity, Germany (Parents also born there)
Family Physician, Dr. J. Taylor
Physicians Committing, M J Taylor & D.S. Cummings
Correspondents, no names given in "papers"

No. for Year, 309.
Insane Relatives, None
Cause Exciting, unknown
Cause Predisposing, previous attack
Form, Chronic Melancholia
Accompanying Bodily Disorder, not stated.
Suicidal or Not, not.
Date of this Attack, June '91.
Duration, about 2 years or so.
No. of Attack, probably 2nd (one in Sept '88) -
No. of Admissions, 1
Age First Attack, about 16.
Time of Leaving, June 29 95
Time in Hospital, 1 year.
Result, Died

EXAMINATION ON ADMISSION.

Examined July 14 '93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Can not test
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Very poor
Correct or Illusive,
REASONING POWER: Very poor
Ordinary Subjects,
Own Mental State,
Special Subjects, Feeble minded pr
GENERAL DESCRIPTIVE REMARKS: her appearance and behavior indicate this Pallid and poorly nourished at any time told People she was dying (Dont answer why she thought so

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None noted
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Very dull &
Voluble or Reticent, Sluggish

Personal and Medical History of Henrietta Gusa

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 101 lbs Has weighed 114 NUTRITION, Impaired
WOUNDS OR ABNORMALITIES, Some scars, young child, scars on hands
Same swelling on neck Slight goitre
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, Dilated
Response Light, Sluggish Accommodation, Sluggish
SIGHT, Not so good as formerly
HEARING, Seems good

Case No. 3397. Henrietta Gusa Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Rather depressed
SENSIBILITY,
HEART, Sounds are good
LUNGS, Seem in good condition Thinks she has Consumption
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Constipated Irregular,
APPETITE, Good, Medium, Poor, Very poor
SLEEP, Good, Superficial Poor, Irregular,
PULSE, 80 RESP., 19 TEMP., 99
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Says Mother is sick Thinks has Consumption
Father or Pat. Relations, Father living Says healthy
Brothers or Sisters,

Personal and Medical History of Henrietta Gusa

HERBERT, PUCKAN & CHAMBERS, DAVENPORT, IOWA



Whole No. 3397.
Residence, Posco, Minn.
Date Admission, 30th June 1893.
Admitted by, D. Phelps Hour, 7
How Sent, C.J. Latham, Let Commr.
Sex, Female
Age, 24.
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Servant (farm
Degree Education, none
Profession Religion, not a church membe
Habits, not definite stated. Is o
Nativity, Germany (parents also born there)
Physicians Committing, M.J. Taylor & D.S. Cummings
Correspondents, no names given in "papers"

Family Physician Dr. J. Taylor, Jamestown

No. for Year, 309.
Insane Relatives, None
Cause Exciting, unknown
Cause Predisposing, previous attack
Form, Chronic Melancholia
Accompanying Bodily Disorder, not stated.
Suicidal or Not, not.
Date of this Attack, June '91.
Duration, about 2 years or so.

Result, Died

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined July 14 '93

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Can not tell
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Very poor
Correct or Illusive,
REASONING POWER: Very poor
Ordinary Subjects,
Own Mental State,
Special Subjects, Feeble minded ap
GENERAL DESCRIPTIVE REMARKS: her appearance and behavior indicate this. Pallid and poorly nourished At one time told people she was dying. Can't answer why she thought so

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None noted
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Very dull &
Voluble or Reticent, Sluggish

Personal and Medical History of Henrietta Gusa

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 101 lbs Has weighed 114 NUTRITION, Impaired
WOUNDS OR ABNORMALITIES, Some scars on forearm, old scars on hands
TONGUE, Tremors, Some swelling on neck Slight goitre Gratings, Promptness Movement,
PUPILS, Equality, Equal Size, Dilated
Response Light, Sluggish Accommodation, Sluggish
SIGHT, Not so good as formerly
HEARING, Seems good
COORDINATION, Arms, Fair
Legs, Fair Can not stand on one foot
TREMORS, Hands, Tongue, Will not show
Facial Muscles, General,
REFLEXES, Patellar, about 8 on scale of 10
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Rather depressed
SENSIBILITY,
HEART, Sounds are good
LUNGS, Seem in Good condition Thinks she has Consumption
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,		Careless,
BOWELS, Normal,	Constipated,	Constipated	Irregular,
APPETITE, Good,	Medium,		Poor, Very poor
SLEEP, Good, Sleepless	Poor,		Irregular,
PULSE, 88	RESP., 19		TEMP., 99

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Says Mother is sick Thinks has Consumption
Father or Pat. Relations, Father living Says healthy
Brothers or Sisters,

Personal and Medical History of *Henrietta Gusa*

BARGEY, PUSLAN & SCHAEBERG, DAVENPORT, IOWA

1893

This patient was brought here by Sheriff Reynolds, attended by Miss Reynolds, with the following history. There is no history of consanguinity or heredity. Had a previous attack in August '85 lasting about 2 years; was kept at home; no treatment. First symptoms of this attack were manifested in June 1891, when she developed filthy habits. Disease appears to be increasing; not variable; no rational intervals. Derangement is now manifested as no particular subject. Imagines she is dying. Has filthy habits. Is not disposed to injure others nor is she suicidal. But is filthy & destructive. Has not, nor have parents, been intemperate nor used narcotics. Has had no severe illness nor injury to head. Has not been restrained or confined. Cause of disease is unknown. Has not been under treatment.

On personal Examination, patient has a dull, sluggish, simple look. Said nothing, however, symptomatic of insanity, and did nothing to indicate insanity; manner, dull & sluggish.

June 30 July 1 — June 30 93. The patient is in apparently fair physical condition. Was, on admission, put on B.S. Talks same. Walks up and down the hall a great deal. Wants to go home. Answers questions sensibly. Appetite very poor. Bowels have not moved. Sleeps well.

July 2 — Ate no breakfast nor dinner but ate supper. Temp. 99. P. 78. R. 18. Complains of being sick. Throws herself upon the floor often.

" 3 — Behavior is the same. Appetite is poor. Slept most of the night. Bowels moved. Temp. 99. Pulse 78. R. 18.

" 4 — Talked same at supper. Bowels moved today. Behavior the same.

" 6 — Slept last night. Appetite poor. Undressed herself during the day several times.

" 6 — Appetite very poor. Seems brighter mentally. Went out walking with the patients.

" 12 — Ate daily one meal today. Behavior good.

" 13 — Tried to run away while out walking with the patients.

" 29 — Appetite has improved. July 29. 93. Appetite poor. Clean in habits. Works some in the laundry room in dining room. Stupid at times. Moved to Annex of the 2nd inst. Oct. 6. 93 Appetite fair. Is quite untidy in habits. Gen. health good.

Oct 6 — Oct 31/93. No material change to note, at this date.

" 31 — Dec 31/93. There is no noticeable change reported in patient's condition during these 2 months.

Dec 31 1894 Jan 31 — Jan 31/94. Patient is still at the Annex. Lives along there quietly & seemingly contentedly.

Feb 9 — Feb 9/94. Appetite good. Is quiet. Works a little, occasionally, in the sleeping flat. Rather stupid. Is growing very fleshy. Goes riding & walking. Habits are dirty. General health is good.

" 28 — Feb 28/94. No change to note since the above report.

Mar 3 — March 3/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. She was, today, Taken out and Returned, under "new warrant" from Olmsted County.

May 19 — Appetite good. Is quiet. Habits dirty. Very untidy in her personal appearance. Talks quite sensibly. Works a little on sleeping flat. Goes riding & walking. Gen. health good. Since 2894 Appetite good. Dirty & very untidy in habits. Gets very silly. Goes riding & walking. Gen. health good. Aug 2 94 Works in laundry. No other change.

Personal and Medical History of *Henrietta Gusa*

Oct 7 94 Appetite good. Dirty and very untidy in habits. At times will talk quite sensibly. Works in laundry. Goes riding and walking. General health good. Oct 17 94 Visited by her sister. Dec 6 94 Went to bed with the O.M. Complains of headache. Dec 7 94 Upon ward. Feb. 1 95 Appetite good. Dirty & untidy in habits. Works in laundry. Is quiet most of the time. Occasionally is very obstinate. Gen health good. Goes riding & walking. Mch 2 95 Appetite good. Extremely dirty and untidy in habits. Very obstinate & impudent. Complains occasionally of headache. Gen. health good. Goes riding and walking. Menstruated Mch 4. 95. June 20 95 Vomited a little food during the night. Vomited a good deal. Complains this morning of headache & of nausea. Refuses no nourishment today. June 21 95. No better, still vomiting. June 22 95. No better, complained today of having a very bad headache & pain in stomach. June 23 95 No better has taken no nourishment yet. June 24. 95 Some better, ate a little breakfast and supper, no dinner. June 25 95 Upon ward part of the day went to bed. O.M. No better. No nourishment today. June 26 95 No better. Transf to Dr Pinning. Found to have strangulated hernia

Died June 29. 1895.

June 27 — Was operated upon for strangulated inguinal hernia. A section of intestine removed & Murphy's Buttons used. Bowels moving well until third day when she suddenly developed Peritonitis and died.

Past Mortem showed that the button had slipped on one side causing death. (See Case Record)

Personal and Medical History of Marie Rix

KIBBERT, PICLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3399.
Residence, West Superior.
Date Admission, 1st July 1893.
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, John B. Olivier, Jeff, Ramsey County.
Sex, Female.
Age, 28.
Civil Condition, Married
Children, 3
Age Youngest Child, 4 mos.
Occupation, Typewriter. (Husband, Druggist).
Degree Education, Good.
Profession Religion, Roman Catholic.
Habits, not intemperate
Nativity, Wisconsin (parents, in Ireland).
Physicians Committing, Geo. J. Hanley & Arthur B. Meeker.
Correspondents, (Husband), Otto Rix
Iron Mountain Mich

No. for Year, 311.
Insane Relatives, none
Cause Exciting, unknown
Cause Predisposing, previous attacks.
Form, Not Insane
Accompanying Bodily Disorder, not stated
Suicidal or Not, not.
Date of this Attack, Chronic.
Duration, Some time
No. of Attack, 5th probably
No. of Admissions, 1 here - (has been in 4 others)
Age First Attack, about 20.
Time of Leaving, July 17. 93
Time in Hospital, 16 days
Result, Rec.

Family Phys. D. Geo Robt Nevins Pt. Wis.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined July 5-93 Dr Phelps

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Quick
MEMORY:
Past Events, Good
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Good but silly
Correct or Illusive,
REASONING POWER: Impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent, Very anxious to go home
Exalted,
Depressed,
DELUSIONS: None noted
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Marie Rix

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 120 lbs NUTRITION, Good
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Good Accommodation, Good
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Test finger to nose, equivalent, Spasm
Legs,
TREMORS, Hands, Tongue,
Facial Muscles, General, Slight
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Fair
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION, Regular
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Normal Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Good Poor, Irregular,
PULSE, 72 RESP., 22 TEMP., 98.6
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 heart disease
Brothers or Sisters,

Personal and Medical History of Marie Rix.

EBBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Deputy Sheriff Courteau, attended by Mrs Akers, with following history of case. This is probably the 5th attack; first being about 8 years ago, duration 3 months. Has been in Northern Hospital (Wis); Tobey (Ill); Mendota (near Madison); St Peter (Minn). Form is Chronic: disease appears to be Stationery; but it is variable & there are rational intervals. Derangement is now manifested by violent temper & she is generally irresponsible. Is disposed to injure others. Is not suicidal. Inclined to filthy & destructive habits. There is no history of consanguinity or heredity, or intemperance. She had no severe disease or injury to head. Supposed cause of disease is unknown. Treated in Hospitals. On personal examination, found her listening by stealth to hear what Examiner was saying, and she was acting generally like an insane person. She is now threatening to smash windows, when she comes out of asylum. Appearance was that of an insane person. Also has threatened the life of a woman with a knife.—

July 1 July 1/93. On admission, was put on B2. While in office, (for weeks to coming up toward), talked freely and rationally in form. Tells of being in 4 different Asylums - Stayed 10 days at St Peter, for the Doctors did not believe there was such a thing as "Emotional Insanity"; Stayed only 1 day at Oshkosh. Was always on the best wards. Said it was temper. She sassed & threatened one of the inmates at the Home for the Friendless, and they, fearing she had been insane, took her up. Patient is in fair condition.

" 5 Mother took her to Batavia 8 yrs ago. Was in Northern Asylum six times. In St Peter ten days. All together has been in Insane Asylums about twelve times. Is quite shameless. Tells of about her always going back & forth; drunk, pranks etc. Says Dr Kempster described her as "depraved and unsane" and not insane. Says she drank and then became ugly. She has been in jail. Seems utterly careless about the manner to get out. Has been usually in houses of ill fame or vanity fair for past

July 2 Quiet in behavior. She was taken from the Home of the Friendless. Stated that she had been drunk. During the first part of the night was restless and did not sleep. Rested better the latter part. Eats regular. P 72. T 98.6.—

" 4 Quiet on the ward. Rested well last night

" 6. Helped some with the work this morning

" 7 Helped with the work. Quitting behavior

" 9 Went out walking. Went to chapel. Rest well at night. Appetite good

" 10 Wanted to go home. Rested well until 4 o'clock A.M. but was awake after that time

" 11 Only slept about four hours

" 13 Slept three hours during the night. Very quiet while awake

" 14 Says she has a pen knife and that she will pick the lock if not allowed to go. Restless all night. Made attendants think

1893 July 1

Evidently let her go exceedingly even Broken the general I last stamp came Rome

Miss Marie Rix (Rix Sweeney)

Rochester, July 3rd 1893.

Clarence Snyder,
Presdt. State Board of Con--
Madison Wis.

Dear Sir:- Will you please send me a statement, stating condition while at the Wisconsin Asylum, and why discharged. Please to send it as soon as possible, I want to use it.

Yours,
Mary Sweeney,
Rochester, Minn.
(Asylum)

W.Hancker, M.D.,
Northern Hospital, Winnebago, Wis.

Dear Sir:- Please send me a written statement, stating my condition when in your charge, and why discharged.

Yours
Mary Sweeney,
Asylum, Rochester, Minn.

Mr.H.H.Hart,
Board of Cor. & Char. St.Paul, Minn.

Dear Sir:- I am an inmate of this Asylum, was taken here the first of July. My home is in Wis., I cam to St.Paul two weeks ago from Ashland Wis., and went to the home of the friendless to see if the matron wanted a servant; I was employed. I was there on y a few days, when a man, I formerly lived with, called and wanted me to leave and keep house for him. I said that I would not go. He is a bar tender in a house of ill fame where I was inmate at West Superior, Wis. He was angry when I would not go. He wrote a letter to the matron, stating that I had insane spells, and that I had been inmate of said Institution. I was called vile names by one of the inmates last Friday night. I had been drinking, had a knife, and was so angry that I threatened to strike her. At the time, I was under the influence of one, I did not have any control over myself I was arrested and sent to the County jail; was examined by the county Physician and his assistant; I was not given any chance to defend myself, did not even see the Judge; I was taken here. The ward I am in is terrible, the patients are very insane, the ward is crowded, the rooms are small and patients are hurled together closer than cattle in a car. The treatment I get here is different to St.Peters, one would thinkthey did belong to the same State that I was inmate of the st.Peter asylum for ten days; Drs Bartlett and Tomlinson did not think that I was insane I was discharged last Oct. every one was very kind to me during the time I staid. I have been in the Northern Hospital, Mendota Asylum Wis., but was discharged as not insane Dr.Walter Kempet was one of the Supts. He has made a study of insanity for 15 ys and ought to be a judge. Drs C.E. Booth, Head Waggie were supts. I was discharged by them It is everything but pleasant here shut up among raving maniacs, with nothing but your thoughts If you would get me discharged, I would go back to Wis. Let me know if you can. Yours Mary Sweeney. If you will write to Dr.Weiggs of the N.H., you can find out about my case.

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" 4 Quiet on the ward. Went to bed at night
" 6. Helped same with the work this morning
" 7 Helped with the work. Quiting behaviour
" 9 Went out walking Went to chapel Rested well at night
appetite good
" 10 Supposed to go home Rested well until 4 o'clock A.M. but
was awake after that time
" 11 Only slept about four hours
" 13 Slept three hours during the night Very quiet while awake
" 14 Says she has a pen knife and that she will pick the lock if
not allowed to go Restless all night Made attendants think

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1893 that she had the knife concealed in the vagina Evidently
has set to work to hasten me so that he will let her go
July 17 Was sent to La Crosse today Has been very quiet, expeedingly
depraved and working to get out in an open way ever since
coming Has been in various institutions and the general
opinion has been that she is not insane but drunk
and was ill tempered at times and played insane pranks
times to avoid jail sentences.

Wisko Sept. 5. 93.

Personal and Medical History of Mrs. Rika Beyer.

EUBERT, FULLAN & CHAMBERS, DAVENPORT, IOWA



Whole No. 3405.
Residence, Fairbault,
Date Admission, 6th July 18
Admitted by, Dr. Phelps H
How Sent, R. & Mott, Jof
Sex, Female
Age, 58.
Civil Condition, Married
Children, Six
Age Youngest Child, 19 years
Occupation, Housewife
Degree Education, Common
Profession Religion, German M. E.
Habits, Not intemperate —
Nativity, Germany (parents also born there).
Physicians Committing, C. G. Wagner & D. McCook
Correspondents, None given in "papers" —

No. for Year, 317.
Insane Relatives, None
Cause Exciting, Chorea (?).
Cause Predisposing, not given
Form, — Chorea Dementia
Accompanying Bodily Disorder, Chorea.
Suicidal or Not, Not; but propensity active.
Date of this Attack, about January 1/93.
Duration, about 6 months
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, about 57.
Time of Leaving, Mar. 17. 1899
Time in Hospital, 5 yrs. 8 m. 11 d.
Result, Died Exhaustion in Chorea Dementia.

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,

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION,
WOUNDS OR ABNORMALITIES, Some bruises on arms
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Size,
Response Light, Accommodation,
SIGHT,
HEARING,
COORDINATION, Arms,

Case No. 3405. Rika Beyer. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

Stated,
FACIAL EXPRESSION,
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
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 Mrs Rika Beyer.

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3405.

Residence, Fairbault,

Date Admission, 6th July 18

Admitted by, Dr Phelps H

How Sent, R & Mott, Jof

Sex, Female

Age, 58.

Civil Condition, married

Children, six

Age Youngest Child, 19 years

Occupation, Housewife

Degree Education, Common

Profession Religion, German M. E.

Habits, Not intemperate —

Nativity, Germany (parents also born

Physicians Committing, C H. Wagner & D

Correspondents, None given in "Papers" —

No. for Year, 317.

Insane Relatives, None

Cause Exciting, Chorea(?).

Cause Predisposing, not given

Form, — Chronic Dementia

Accompanying Bodily Disorder, Chorea.

Suicidal or Not, Not; but propensity active.

Date of this Attack, about January 1/93.

Duration, about 6 months

No. of Attack, 1st

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 Mrs Rika Beyer

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION,

WOUNDS OR ABNORMALITIES, Same bruises on arms

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.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

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 Mrs. Rika Beyer

CARROLL, FISCHER & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Deputy - Sheriff Stewart, attended by Hocaman Hans (son-in-law) with the following history. No history of consanguinity, or heredity (?). This is 1st attack, first symptoms appearing about January 1/93, by ill temper; formerly mild; disease appears increasing; no rational intervals. Derangement is now manifested by jealousy, rage, disposition to injure others, and threatens her own life. Thinks others are trying to poison her, particularly her husband. Propensity homicide now active. Is not filthy or destructive. Had also fears of poverty. About 15 years ago, patient had Cholera, with severe Chorea as a sequel; also lesion of brain & spinal cord. Has had ill health at times, & watched to prevent her running away. Supposed cause of disease is Chorea? Has had no medical treatment. On personal examination, there are found Chorea, absence of patellar reflex & other reflexes. Said very little or nothing; very reticent, and timid; refused, at first to enter room & once ran out of doors; refused to answer questions: Manner & appearance, Chorea & insanity.

July 5 July 6/93. On admission, is in apparently fair physical condition. Was put on Cl. Stok. Thinks her mother had Chorea. D.P.J. Temp 98- P.80- R.20-

" 6 Temp 98- P.80- R.20- Very restless. Noisy at times. Incoherent in talk. Appetite fair. Sleeps fearly. Bowels constipated. P.80 R.20 Same. Is noisy on ward.

" 7 Temp 98- P.80- R.20. Must quit. Ate quite a good breakfast. Complains of being sick. Was visited by son this morning.

" 8 Temp 98- Pulse 80- R.20- Very noisy all day. Ate quite well. Talks in a silly manner and incoherently. Has chann[illegible] manner. Has had no movement of the bowels since admission.

" 9 Patient is growing more quiet. Eats well. Slept part of the night. Bowels moved July 12 Undressed by force tonight.

" 11 Has been quiet all day. Very noisy the first part of the night.

" 13 No change. Eats well. Sleeps well. Latter part of last night. Sits quietly most of the day. Undressed herself tonight.

" 14 Ate well. Bowels regular. Slept well. Undressed by force.

" 16 Very restless all day. Slept sitting in a chair about two hours.

" 17 Sleeps very well all night. More quiet during the day.

" 19 Appetite good. Does no work. Sleeps well. Bowels reg. talks silly, behavior quiet most of the time.

July 25 No change, 31st same. Aug 2. 93. Her gen health seems splendid. Aug 13. 93. Has been quite noisy at times.

" 27 Visited by friends. Sept. 1. 93 Appetite good. Sleeps well. Does no work. Talks very silly, untidy in habits, bowels regular, behavior noisy at times. Oct 2 93 Has complained to several visitors about getting enough to eat, but she eats well most of the time. She is quiet & well behaved on the hall.

Aug 26 Oct 5. 93 Removed to B.1. Oct. 29. 93 Still in bed. Her face is swollen. Nov 6. 93 Is up and dressed to-day, the swelling in her face has disappeared. Nov 30 93 Appetite good. Sleeps well. Is quiet in behavior. Is very nervous. General health good.

Dec 26 1893 Dec 26/93. Sleeps well. Appetite good. Is still very nervous. Dec 31/93. No change to note.

Jan 31 1894 Jan 31/94. There is no change from what is above noted. She sleeps well at night. Appetite is good.

Feb 28 Feb 28/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. She was to-day, taken out and returned under new warrant from Chickasaw County.

Personal and Medical History of Mrs. Rika Beyer

1894 2d Cert.

Feb 28 Feb 28/94. Is sick & in bed; complains of sore throat & of her whole body aching. Appetite poor. Does not take any solid food. Is still quite nervous. General health seems quite good.

Mch 3/94 Sick in bed. Ton Mch 4/94 Still in bed. Ton bad. Took 1 glass of eggnog for breakfast and dinner Mch 3/94 refused breakfast & supper. Complains of sore throat. Mch 4/94 Up & dressed to day. Seems quite well. Ton normal Mch 5/94 Appetite good. Sleeps well Mch 27/94 Appetite good. Sleeps well. Is quiet. Clean in habits. April 5/94 Same

May 7 94 Gen health good. Sleeps well. May 22 94 Appetite good. Sleeps well. Is very nervous. June 28/94 Appetite good. Sleeps well. Gen health good. July 18/94 Clean in habits. Quiet in behavior. Usually sits in one place all day. Appetite good. Sleeps well

Aug 29/94. Untidy in her personal appearance. Clean in habits. Gen. health good. Sept. 21/94 General behavior very quiet. Sleeps well. Appetite good. Does not go walking and riding. Bowels regular. Does not complain. Gives no trouble. Speaks very sensibly when spoken to. Nov 26/94 Has been very quiet and agreeable. Appetite good. Sleeps well. Bowels regular. Does not go riding and walking. Does not complain in any way.

Feb 20/95. Quiet and agreeable in behavior. Sleeps well. Bowels regular. Appetite good. Talks very little but very sensibly. Transf to B.1 Feby 26/95. Appetite good. Bowels regular. Makes no trouble. Mch 3/95 Very quiet and agreeable. Makes no trouble. Appetite fairly good. Bowels reg: Sleeps well. Goes riding. Mch 8/95 Fainted several times during the afternoon. Refused supper. Mch 13/95 Refused breakfast. Mch 14/95 Transf to Infirmary.

April 8/95 Gen. health good. Appetite fairly good. Bowels constipated. Apr 20/95 Improved. Appetite good. Bowels reg: Apr 26/95: Seems the same. May 9/95: Has an abscess on her hand, abscess lanced, washed out with Peroxide, dressed with gauze. May 22/95 Appetite good. Sleeps well. Is quiet in behavior, bowels constipated part of the time. Given Dose of salts. June 14 Sits quietly on ward. Appetite good. Bowels constipated. July 12 Gen. health fair. Dirty in habits. Appetite good. Quiet. Sleeps well.

July 20 Lacks 3 lbs gain. Bowels moved freely. July 31 Trans. to B.1.

Sept 28 Quiet & agreeable in behavior. Clean in habits. Appetite good. Bowels regular. Sleeps well.

Oct 7 Trans to B.4. Oct. 20 Eats & sleeps well. Goes riding. Nov 27 No change.

Dec 20. Very quiet & agreeable. Appetite good. Bowels regular. Goes riding.

Feb 14 Was taken with fainting spell put to bed & complained of pain in her left side. Hot sand bag & medicine applied. Feb. 15 Is feeling some better today.

Feb 22 Dressed & up on ward. Appetite good. Bowels regular.

March 30 Appetite fairly good. Goes riding. Bowels constipated at times. April 20 Goes out of doors.

May 30 Seems to be more helpless of late.

July 9 Summary Nurse's Notes by Dr. E.L. Phelps:- Unable to walk or move around very far of late: very feeble: Oct 96 Appetite poor: Is on specials: takes out door exercise: no mental change: Very feeble: tremor has increased of late so that she cannot walk the length of the hall without falling: quite demented: Apr 97 no change: Aug 97 Very helpless & unable to walk: Eats & sleeps well: mentally unchanged. (Contd by Dr. A.M. Phelps) Sept 16 97 Still very helpless: unable to walk: at times is somewhat weak, but in general shows little or no sign of failure. The chorea is so extreme that she has grown entirely helpless & in addition, at times her heart seems somewhat weak. June 7 98 Weight 116: July 8 98 - Feeble & helpless. no especial happening part of time up - part of time in bed: Aug 1 98 Transf to A1: Sits about quietly.

Oct 9. Visited by friend: Dec 27 98 Complained of sickness & pain in abdomen-

(Record on page 104

Personal and Medical History of Clara P. Fraaseth

EGBERT, FIGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3406.
Residence, West St. Paul.
Date Admission, 6th July 1893.
Admitted by, Dr Phelps. Hour, 7 P.M.
How Sent, Thos. P. McGraw, Jo. P. Dakota County.
Sex, Female
Age, 23
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Housework (father, laborer).
Degree Education, Limited to norwegian language
Profession Religion, Lutheran
Habits, not definitely stated; not intemperate —
Nativity, Norway (Parents also born there)
Physicians Committing, J. C. Fitch & A. VanBeeck.
Correspondents, Herman Hemming (Bro-in-law) Parkdale & Minneapolis Res West St Paul

Family Phys. H. G. Thuesen Commissioner of State Public Work St Paul



No. for Year, 318.
Insane Relatives, Father's sister.
Cause Exciting, unknown
Cause Predisposing, Heredity, probably
Form, Acute Melancholia
Accompanying Bodily Disorder, not stated
Suicidal or Not, not stated —
Date of this Attack, July 2nd 1893
Duration, 3 or 4 days —
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, 23 years
Time of Leaving, June 11. 1897
Time in Hospital, 3 yr. 11 mo. 5 d.
Result, Died. Tuberculosis Pulmonalis.

EXAMINATION ON ADMISSION.

Examined July 26 93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Will not talk
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,
REASONING POWER: Impaired evidently
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Silly, careless and indifferent

EMOTIONAL STATE:
Normal, Calm, Stands around in
Indifferent, an indifferent and
Exalted, rather childish manner
Depressed, Silly
DELUSIONS:
Systematized or Not, Seems to have
Special Subjects, delusions
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Will not talk
Voluble or Reticent, Pulling away all the time — Will not attend a thorough examination

Personal and Medical History of Clara P. Fraaseth

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 118 lbs NUTRITION, Not good Greatly impaired
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, None Coatings, Promptness Movement, Prompt
PUPILS, Equality, Equal Size, Slightly dilated
Response Light, Accommodation,
SIGHT, Seems good Will not talk much
HEARING, Seems good
COORDINATION, Arms, Seems good

Case No. 3406. Clara P. Fraaseth. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

but weak at present

— Slurred,
FACIAL EXPRESSION, Rather Silly
SENSIBILITY,
HEART, Sounds are good
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless, 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 Clara P. Traaseth

GIBBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3406.
Residence, East St. Paul.
Date Admission, 6th July 1893.
Admitted by, Dr Phelps. Hour, 7 P.M.
How Sent, Thos. P. McGraw, Jos P., Dakota County
Sex, Female
Age, 23
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Housework (father, laborer)
Degree Education, Limited & Norwegian la
Profession Religion, Lutheran
Habits, Not definitely stated; not intemperate
Nativity, Norway (Parents also born there)
Physicians Committing, J.C. Ditch & A. Vaux
Correspondents, Herman Stenning (Bro-in-law) Oakdale & Minneapolis Ave W. St. Paul



No. for Year, 318.
Insane Relatives, Father's Sister.
Cause Exciting, unknown
Cause Predisposing, Heredity, probably
Form, Acute Melancholia
Accompanying Bodily Disorder, not stated
Suicidal or Not, not stated —
Date of this Attack, July 2nd 1893
Duration, 3 or 4 days —
No. of Attack, 1st
No. of Admissions, 1

Family Phys. St. Thomas Aquinas Convent St. Paul Wash St. Paul

EXAMINATION ON ADMISSION.

Examined July 26 93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Will not talk
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,
REASONING POWER: Impaired mentally
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Silly, careless and indifferent

EMOTIONAL STATE:
Normal, Calm, Stands around in
Indifferent, an air of defiance and
Exalted, rather childish manner
Depressed, Silly
DELUSIONS:
Systematized or Not, Seems to have
Special Subjects, delusions
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Will not talk
Voluble or Reticent, Pulling away all the time — Will not allow a thorough examination

Personal and Medical History of Clara P. Traaseth

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 118 lbs NUTRITION, Not good Mentally impaired
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, None Coatings, Promptness Movement, Prompt
PUPILS, Equality, Equal Size, Slightly dilated
Response Light, Accommodation,
SIGHT, Seems good Will not talk much
HEARING, Seems good
COORDINATION, Arms, Seems good
Legs, " "
TREMORS, Hands, None noted Tongue,
Facial Muscles, General, Somewhat weak at present
REFLEXES, Patellar, 1 to 2 Summoned
Other Reflexes,
ARTICULATION, Hesitating, Jerky speech Slurred,
FACIAL EXPRESSION, Rather Silly
SENSIBILITY,
HEART, Sounds are good
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless, 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 Clara P. Traaseth

CURRIE, PUGLAS & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Herman Henning, brother-in-law, attended by Chas Widman and Chas. Widman, with the following history. This is 1st attack; occured July 2/93; claims she saw and spoke to her deceased parents and relatives. Disease appears to be increasing. Is not variable nor are there rational intervals. Derangement now manifested by thinking her sister owns her relatives to annoy her. Attempted to injure her sister. Is not filthy or destructive. Her father's sister is insane. Patient has been, previously, of a very quiet and retiring disposition. Habits not definitely stated. Has had no severe disease &c. She has been closely watched since date of attack. Supposed cause of disease is unknown. Has had no treatment except two visits from her family physician. On personal Examination, is very excitable, restless, has a coated tongue, swelling of eyelids; complains of pain in her head. She refused to answer direct questions; complaining always of being sick & of pains in head. Talked continually in a wandering & incoherent manner. Manner & appearance excitable when disturbed.

July 6 July 6/93. On admission, is found to be in fair physical condition. Weight on B[d] —
Pulse 90. Resp 18. Temp. fought so I could not take it.

" 7 Very noisy & fighting at times. Does not want to stay in hospital. Will not eat. Thinks she has to pay for board. Appetite poor. Does not sleep, gave sleeping dose — no effect. Bowels moved. Has a small scratches on left foot. Pulse 80 Resp 18.

" 8 Very noisy. In seclusion 6 hours for fighting. Very untidy in habits. Sleeping dose, but with little effect. Did not take any nourishment.

" 9 Very noisy at times & would not keep on clothing in the forenoon. After 11.45 a.m. was dressed. In seclusion 9 hours. Untidy in habits. Bowels moved. Drank 3 glasses of milk during the day.

" 10 In seclusion 19 hours. Out of bed & very noisy. Pounding on the door until 4 o'cl a.m. Gave sleeping dose 11.30 P.M. No effect.

" 11 Does not take any solid food. Takes milk. In seclusion 14 hours. Out of bed & very noisy most of the night. Gave sleeping dose. No effect.

" 12 In seclusion 5 hours. Slept well most of the night.

" 13 In seclusion all day. Very destructive on hall & resisting while dressing & trying to give nourishment. Out of bed lying on the floor all night, but quiet.

" 14 In seclusion 6 hrs. While on hall had to be watched very close as she is very destructive if she is not with an att[t]. Not taken any nourishment. Sleeping 3½ hours out of bed, Standing by the door while awake but quiet.

" 15 Resisting all the time in dressing & feeding. Does not take any solid food. About 5 glasses of milk. In seclusion 2 hours & sleeping 6 hrs. very quiet all night.

" 16 Awake all night. Lying on the floor most of the night.

" 17 Very restless. Talks but very little English. only taken 3 glasses of milk. Untidy in habits. Very hard to take care of. Resisted all the time. Rested well until 4.30 a.m. awake & quite noisy at times since then.

" 18 Fed with tube. The same. Sleeping 3 hrs. Talking most of the time, while awake.

" 19 Fed with tube in the morning. Ate dinner & supper. More quiet at work. Untidy in habits. Slept well most of the night & stayed in bed. Much better.

" 20 Appetite poor & will not feed herself nor dress herself & resisting when she is cared for. Slept 8 hrs. Rested well most of night, quiet while awake. General Notes: July 6. 93. Ward. July 21. 93. Complains of headache. Temp 99. July 22. 93. Slept 4 hrs, talking most of the time while awake. July 31. 93. At times eats quite well, most of the time standing in the room door & at times pacing on the hall. Not very neat about herself.

Personal and Medical History of Clara P. Traaseth.

1894

Aug 8 In seclusion 6 hrs. Aug 2. 93. Awake all night & very untidy in habits. Aug 8. 93. Fighting, very
" 9/93 difficult to keep her clothing on her. 9th the same. Aug 23. 93. Awake all night & could not keep
" 24 her in bed. Aug 24. 93. Very restless until 3. am. out of bed part of the time, very untidy had to
" 26 clean her room twice during the night & change bed. Aug 26. 93. Very wild & early part of the night
" 29 out of bed, jumping about the room, gave sleeping dose, slept about 4½ hrs. Aug 29. 93
" 31 Appetite good, otherwise about the same. Aug 31. 93. In seclusion 2 hrs. Slept 3 hours, would
Sept 7th not stay in bed, talking some while awake. Sept. 7. 93. Pulling her own hair, so it had to be cut.
" 30 it pleased her. Sept 30. 93. Appetite good. Is in lower bay & has to be watched, she being
Oct 14 very destructive on ward. Not very neat about herself. Oct. 12. 93. Has some bowel trouble. Very
" 30 untidy today; gave med as dir. Oct 30. 93. Very untidy. Requires constant watching & must
have her from taking off her clothes. Violent. Never talks. Appetite is irregular. Does not menstruate.
Nov 3. 93 Menstruated Nov 29. 93. Appetite good. Very noisy at times, very untidy in dining room
" 29 has to be watched all the time, or will throw food on the floor or on the ladies sitting at
Dec 14 the same table. Very untidy at times. Dec 13/93. Appetite fair, at times. Severy noisy: untidy, about self: also,
" 15 at times, destructive. Dec 15/93. Out of bed, once last night: very untidy in habits; soiled her bed, also, last night. —
" 27 Dec 1/93. Out of bed last night; at 2. am, was noisy, talking; restless till morning. Dec 31/93. Is about the same.
1894 3
Jan 1 Jan 1/94. Out of bed at 1.30 AM: fighting and quite noisy from now. Jan 30/94. Awake, last night & talking
30 noisily (about 3.30. am) for an hour or so. Jan 31/94 No material change. ✓ note. —
" 31
Feb 7/94 Feb 1/94. Fighting today, with another patient (Mary Haggerty). Feb 10/94. Fighting with C. Person, today.
" 20/94 Feb 20/94. Complains today, of sore throat. Feb 21/94. Still complaining of sore throat. 5 PM. J. 99.4. —
" 28 Feb 28/94. Appetite good, at times: occasionally noisy & pugnacious, striking other patients; interferes fights
with attendants. Severely untidy in habits and destructive to clothing. At times, dirty also. —
March March 1/94. Continues more or less noisy & violent at times, striking and fighting with the other patients. —
Does not talk English but very little. Habits continue untidy. — Is also somewhat destructive, at times.
" 7 March 7/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. She
was, today, Taken out and Returned, under "new Warrant", from Olmsted County. —
March 18th 94. Appetite good, habits untidy, at times filthy, talks incoherent & again coherent.
April 25th " menstruating. April 30 94. Appetite good, noisy at times & violent. untidy.
May 18th " The same. May 25th " transferred to C-1. May 31st 94. noisy & untidy,
eats well, bowels regular, does no work, talk is incoherent, sleeps well, has
delusions. June 4 94. Appetite good. Bowels regular. Untidy in habits. Does no work. Behavior noisy. Talks silly. June 7 94. Menstr.
Very disturbed during period. July 6 94. Menstr. Has become more quiet during period. July 17 94. Is improving in every way. Becoming more
tidy in habits. July 27 94. Extremely violent to day. Aug 28 94. Menstruating. Behavior mischievous. Becoming more tidy in habits. Aug 31 94
Aug 31 94 Does riding and walking. Sept. 2 94. Appetite good. Does no work. Usually sleeps well. Very untidy in habits. Talks silly & incoherent.
Behavior mischievous. Removed to C-2. Sept. 28 94. Menstruating. Oct 30 94. Appetite good. Sleeps well. Does not work. Untidy in habits.
Laughs and talks to herself a great deal. Bowels regular. Nov 30 94. Appetite fair. Clean in habits. Behavior quite noisy, destroys her clothing
always fighting with other ladies. Nov 10 94. Fighting with J. Kam. has her eye bladed. In seclusion one day Nov 13 94. In seclusion 7 hrs C-2
Nov 30 94. Has been quiet and quite well behaved since in C-2. Nov 27 94. Menstruating, mischevious during period. Dec 17 94. Menstruating
Dec 9. Face badly swollen caused by her teeth. Jany 14 95. Quiet and well behaved of late. Jany 18 95. Menstruating.
March 14. 95. Appetite good. Does no work. Sleeps well. Dirty in habits. Bowels reg. Behavior noisy and at times violent. Menstruating

over to p. 160

BARGHY, FISLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3412.
Residence, East Saginaw, Michigan
Date Admission, 13th July/1893 –
Admitted by, S. Phelps Hour, 7 P.M.
How Sent, Jno. B. Olivier Jof P, Ramsey County
Sex, Female
Age, 46
Civil Condition, married
Children, seven (?)
Age Youngest Child, unknown
Occupation, Housewife.
Degree Education, unknown.
Profession Religion, unknown.
Habits, unknown
Nativity, Canada (that of Parents, unknown).
Physicians Committing, A. B. Stucker & Arthur Sweeny East Saginaw, Mich.
Correspondents, (Daughter) Mrs. Julia La Brack, Saginaw, East Side
#312 Youmans St – Mich



No. for Year, 324.
Insane Relatives, unknown
Cause Exciting, unknown
Cause Predisposing, unknown
Form, – Acute Melancholia
Accompanying Bodily Disorder, unknown
Suicidal or Not, not
Date of this Attack, Probably very recent
Duration, a day or so.
No. of Attack, unknown if 1st
No. of Admissions, 1
Age First Attack, unknown
Time of Leaving, Sept. 26. 1898
Time in Hospital, 5 yr. 2 m. 13 d.
Result, Discharged Nov. 9'98 Improved.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined July 14 '93 S. Phelps

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.

Strong examination patient refused to speak. Sat up in bed & moaned incessantly. During night sleeping. Seems increased depression – effort to cry along. Tears – appetite & sleep good. Tongue coated. Pulse compressible – heart & lungs normal. Urine not examined. Refuses to void. Face flushed.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Moans and cries most of the time
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, Slightly impaired
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Unequal Size, Left slightly enlarged
Response Light, Accommodation,
SIGHT,
HEARING,
COORDINATION, Arms,
Legs,

Case No. 3412. Almira Welch. Vol. 24.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

FACIAL EXPRESSION,
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

Refused to void urine

GYNAECOLOGICAL EXAM., Examination as to Pelvic Neoplasm of urethra extending almost into inferior length of urethra.
MENSTRUATION,
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,

SERGENT, FISCHER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3412.

Residence, East Saginaw, Michigan

Date Admission, 13th July/1893 —

Admitted by, Dr. Phelps Hour, 7 PM.

How Sent, Jno. B. Olivier, Jail, Ramsey County

Sex, Female

Age, 46

Civil Condition, married

Children, seven (?)

Age Youngest Child, unknown

Occupation, Housewife.

Degree Education, unknown.

Profession Religion, unknown.

Habits, unknown

Nativity, Canada (Dau of Parents, unknown).

Physicians Committing, A. B. Jucker & Arthur Sweeny East Saginaw Mich

Correspondents, (Daughter) Mrs. Julia La Brock, Saginaw, Mich

#312 Youmans St — Mich



No. for Year, 3214.

Insane Relatives, unknown

Cause Exciting, unknown

Cause Predisposing, unknown

Form, — Acute Melancholia

Accompanying Bodily Disorder, unknown

Suicidal or Not, not

Date of this Attack, Probably very recent

Duration, a day or so.

[illegible] with 1st

Result, Discharged Improved.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined July 14 '93 by Phelps

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.

Young woman about 46 stout
refused to speak to Dr.
evidently understands
Frowns a right hand
Seems incredulous
to everything
hand echo
closed right

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Moans and cries most of the time

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, Slightly impaired

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Coatings, Promptness Movement,

PUPILS, Equality, Unequal Size, Left slightly enlarged

Response Light, Accommodation,

SIGHT,

HEARING,

COORDINATION, Arms,

Legs,

TREMORS, Hands, Right marked & Con. Tongue, Tremor

Facial Muscles, General,

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE.

Refused to allow examination of urine

GYNAECOLOGICAL EXAM., Epithelioma of os, Polyp, Neoplasm of urethra & extending almost into orifice length of urethra.

MENSTRUATION,

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,

BARGET, FIDLAR & CHAMBLER, DAVENPORT, IOWA.

1893 Was brought here by Deputy-Sheriff Gjertson, attended by Mrs Akers, with following history. As to consanguinity or heredity, unknown. Also, if 1st attack, is unknown. Has been at City & County Hospital St Paul. No results from treatment. Was found at Union Depot, where she created a disturbance & was brought to the Hospital. Is afraid of being harmed by others. Disease appears to be increasing; no rational intervals; very little information can be obtained from her. Patient now has the idea that her son-in-law murdered some one and she told of his crime, when he became enraged & accused her of doing the deed and influenced wife to the same belief. Patient thinks she is being hung and prays for mercy from every one. Is continually crying and moaning, tearing her hair, refusing nourishment and sleepless. Is neither disposed to injure others, no suicidal, nor filthy nor destructive. Cause of the disease is unknown; has been treated by sedatives &c. On personal examination, there is found a continuous tremor of her right arm and leg, increased by voluntary effort or excitement. There were shown delusions of harm, continual crying and moaning; also a refusal of food & inability to free herself long enough from her fixed ideas to realize where she is, or to answer any questions. Begged for mercy. Appearance & manner were dejected & pitiful, & remely melancholy.

July 13 July 13/93. The Patient, on admission, is in fair condition. Was put on B2. No bruises upon her body. Same difficulty noticed in keeping her right hand still. Cried or moaned all day. Part of the time sits on the bed and at times on the bed. Ate nothing but drank three glasses of milk during the day. Slept about 4 A.M. Temp 98.4 P. 76 R. 18

" 14 " 15 Has taken no nourishment excepting two glasses of milk. On the bed and moaning most of the time. Seems very nervous. Reported as sleeping four hours. Very restless & moaning most of the time while awake. —

" 16 July 16/93. Slept but 2 hours, last night; was fed with tube at breakfast time this morning; but ate her dinner

" 17 and supper. Is very restless; moaning most of the time, by day, & while awake, at night. July 17/93. Slept very poorly, (only 2 hours), last night; Continually moaning when awake. Appetite is fair, but she will

" 18 not feed herself. Very restless in bed, most of the time. Is untidy in habits. July 18/93. Rested somewhat better, Sleeping 5½ hours, last night; though she still keeps up her moaning. Behavior & conduct, by day,

" 19 about as usual. July 19/93. Slept 6 hours, last night; lies quietly in bed, when awake. Appetite is quite good,

" 20 though she still has to be fed. Still untidy. Is somewhat fragmentary. July 20/93. Reported as sleeping only 1 hour, last night. Moaning. Appetite poor, today; will not feed herself. Has also be dressed, now.

" 21 This morning, was fragmentary for ¾ of an hour. July 21/93. Slept 5 hours, last night. This morning, Complains of pain in Stomach & bowels; refuses her medicine; is becoming more quiet & better behaved, in

" 22 ward; also more tidy in habits. Went out riding today & seemed to enjoy it. July 22/93. Rested well, last

" 23 night. Appetite is improving. Conduct by day, about as last described. July 23/93. About as usual.

" 25 July 25/93. Has rested & slept well, the past 3 nights. Seems much better today. Dressed herself, for the first time, this morning, has made her own bed, also helped with ward-work, but complained of feeling somewhat weak from her exertions. She seems very deaf. Appetite is poor, but she now feeds herself. —

" 26 July 26/93. Appetite is better. Takes her medicine without giving any trouble. Helps in dining-room.

1893 July 27 July 27/93. Sleep & rest at night have continued uniformly good. Has not been reported as moaning any, during the past week. Has become quiet & well behaved, by day; tidy in habits; helps with the work

" 28 on hall. Eats but little. July 28/93. Was wakeful & restless for 3 hours or so, last night. July 15 93 Admitted on ward: July 26 93. Very much brighter. Made her own bed, swept her room & helped on hall, days she feels weak. Put on tonic July 30 93. Appetite good. Tidy in habits, very quiet on ward, helps on ward. Is very deaf. Aug. 6 93. Complains of bowels being constipated, gave med: as dir: Aug. 7 93 Very much depressed, could not dress herself & did not feed herself. Aug 13 93 Complains of bowels being constipated, gave med: as dir: Aug. 14 93 Complains also of having trouble in passing urine, gave med: seems somewhat brighter again. Aug 20 93 Very stupid does not take any care of herself in any way. Aug 28 93. The same. Appetite fair, untidy in habits, if not closely cared for, will not do anything in the way of caring for herself.

Sept 1 93 Complained of bowels being constipated. Gave dose pills & bowels moved.
Sept 26 93. Some brighter again. Sept 30 93 Appetite good. Tidy in habits otherwise the same.
Oct 8 93. Complains of bowels being constipated. Gave pill as directed.
Oct 30 93. Sits quietly on ward. Appetite is good and feeds herself. Oct 31 93 Moved B C2
Nov 3 93 Put to bed Nov 15 93 Patient sat up to day. Nov 20 93 Is quite untidy in habits.
" 20 Will not dress or undress herself. Is somewhat prostrate. Has good appetite.)
" In addition to the other notes Nov 21st operation for removal of growth in urethra, Etherized and curetted out, recovered nicely from the operation, slept quite well, had four opths. for details see nurses notes on file. —

Dec 1 Dec 1/93. Appetite good. Is untidy in habits. Will not dress herself. Resists all interference. —
" 15 Dec 15/93. Transferred to C3 — Dec 31/93. No noticeable change. —
1894 Jan 10/93 Jan 10/94 Hand is badly swollen, today. Jan 13/94. Hand is now somewhat better.
" 31 Jan 31/94 Sleep good, at night. Appetite also good; bowels regular. Never talks; very restless; habits untidy.
Feb 15 Feb 15/94. Continues to sleep well. very quiet. Complains of Dyspepsia. Appetite fair. Still untidy in habits.
" 23 Feb 23/94. Patient was committed here under the "Law of 1893" recently declared unconstitutional. She was, today, Taken out and Returned under "new Warrant" from Olmsted County. —

Mch 6 94 Walking up and down hall Talking to herself. Seems very much excited. Mch 11 94 Very restless and excited this morning.
" 31 " Behavior about the same. Appetite good Complains of constipation. Cleanly habits. Slept Apr 3 94 Behavior has been very restless & noisy most of the time during month. Walking up and down talking to herself. Appetite good. Clean in habits. Bowels reg. May 16 94 Has been noisy the last few days. Bowels regular. Untidy at night at times. Tramps & Stands. May 24 1894 No change in any way. July 18 94 Appetite good. Clean & tidy in habits. Very noisy occasionally, Crying & talking very loud. Has delusions. Talks incoherently. Goes riding & walking. General health good. Nov 7 94 Appetite good. Clean & tidy in habits. Is occasionally very noisy. Talks incoherently and has many delusions. Helps with the mending. Goes riding & walking. Gen. health good. Febr. 19 95 Appetite fair. Clean and tidy in habits. Is very noisy at times. Talks incoherently and has delusions. Works in dining room. General health good. Goes riding & walking. ~~March 9 95 Appetite good. Goes to work. Good health. Untidy in habits. Remains as before. Is very noisy at times. Is at present very restless. Has good appetite. Is untidy in habits. Has not been noisy during past week. Has been very restless. Has good appetite. May 9 95. Is becoming very untidy in habits. Has to be watched in order to make her keep herself tidy in her habits. Has been very restless of late.~~

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Personal and Medical History of Kate Bolz

EBERT, PIXLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3413.
Residence, 444 Forest Avenue, St Paul
Date Admission, 14th July 1893
Admitted by, D. Phelps. Hour, 7 PM.
How Sent, John. B. Oliver, Jof P, Ramsey County
Sex, Female
Age, 45 years
Civil Condition, married
Children, 6
Age Youngest Child, 6 years -
Occupation, Housewife (Baker, weaver; husband, Laborer)
Degree Education, Limited
Profession Religion, Catholic
Habits, unknown; not intemperate
Nativity, Germany (Parents also born there)
Physicians Committing, E. A. Whitcomb & J. M. Finnell.
Correspondents, George Bolz, 444 Forest Ave St Paul

No. for Year, 325.
Insane Relatives, Father reported insane
Cause Exciting, Compulsory marriage; religious mania
Cause Predisposing, not stated
Form, Dementia
Accompanying Bodily Disorder, none noted
Suicidal or Not, not
Date of this Attack, 15 years ago
Duration, some 15 years -
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, about 30 years
Time of Leaving, May 7" 94
Time in Hospital, 9 m 23 d
Result, Imp.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Somewhat confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Uncertain but seemingly
Recent Events, quite good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Rather dull
Correct or Illusive,
REASONING POWER: Impaired somewhat
Ordinary Subjects, Fair
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Can talk but little English
Rambles from any subject
to another Shows feeble-mindedness

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Ordinarily quiet but
Exalted, When talking becomes
Depressed, quite excited
DELUSIONS: Seems to have
Systematized or Not, delusions
Special Subjects,
Transitory or Not,
HALLUCINATIONS: Hears voices
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Rather incoherent
Voluble or Reticent, Talks a good deal
in German

Personal and Medical History of Kate Bolz

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1 3/4 WEIGHT, 111 lbs NUTRITION, Good
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Causes Coatings, None Promptness Movement, Fair
PUPILS, Equality, Equal Size, Normal
Response Light, Normal Accommodation, Normal
SIGHT, Seems good
HEARING, Seems good
COORDINATION, Arms, Steady as far as can test
Legs, Seems good

Case No. 3413. Kate Bolz Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

[illegible] very prompt Slurred,
FACIAL EXPRESSION, Silly Somewhat that of imbecile
SENSIBILITY,
HEART, Irregular but no murmurs
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 80 drops a beat o RESP., reg. intervals 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 Kate Bolz

BARRY, PIDLAR & SHAMBERG, DAVENPORT, IOWA

Whole No. 3413.

Residence, 449 Forest Avenue, St. Paul

Date Admission, 14th July 1893

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

How Sent, John B. Oliver, Jof P., Ramsey County

Sex, Female

Age, 45 years

Civil Condition, married

Children, 6

Age Youngest Child, 6 years -

Occupation, Housewife (Father, weaver; husband, Laborer)

Degree Education, Limited

Profession Religion, Catholic

Habits, unknown; not intemperate

Nativity, Germany (Parents also born

Physicians Committing, E. A. Whitcomb & J. M.

Correspondents, George Bolz, 449 Forest Ave St. Paul

No. for Year, 325.

Insane Relatives, Father reported Insane

Cause Exciting, Compulsory marriage; religious mania

Cause Predisposing, not stated

Form, Dementia

Accompanying Bodily Disorder, none noted

Suicidal or Not, not

Date of this Attack, 15 years ago

Duration, some 15 years -

No. of Attack, 1st

No. of Admissions, 1

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Somewhat confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Uncertain but seemingly

Recent Events, quite good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Rather dull

Correct or Illusive,

REASONING POWER: Impaired somewhat

Ordinary Subjects, Fair

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Can talk but little English

Rambles from one subject

to another Shows feebleminedness

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Ordinarily quiet but

Exalted, When talking becomes

Depressed, quite excited

DELUSIONS: Seems to have

Systematized or Not, delusions

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Hears voices

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Rather incoherent

Voluble or Reticent, Talks a good deal

in German

Personal and Medical History of Kate Bolz

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1 3/4 WEIGHT, 111 lbs NUTRITION, Good

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Considerable Coatings, None Promptness Movement, Fair

PUPILS, Equality, Equal Size, Normal

Response Light, Normal Accommodation, Normal

SIGHT, Seems good

HEARING, Seems good

COORDINATION, Arms, Steady as far as can test

Legs, Seemed good

TREMORS, Hands, None Tongue, None

Facial Muscles, " General, None

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Fairly prompt Slurred,

FACIAL EXPRESSION, Silly Somewhat that of imbecile

SENSIBILITY,

HEART, Irregular but no murmurs

LUNGS, Seem in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 80 drops a beat a RESP., reg. intervals 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 Kate Bolz.

LORENZ, FICKLER & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy Sheriff Hawes, attended by Mrs Francoeur, with following history. There is no history of Consanguinity; Father, however, was reported as insane. This is 1st attack. Symptoms of it were manifested 15 years ago, by strange actions & violent temper. Dresian appears to be increasing; at no time is she entirely rational. Derangement is now manifested on religious subjects, acquaintance with all persons, and money matters. Has shown a disposition to injure others. Is not suicidal, or filthy, but, if enraged in the slightest degree, is destructive. Has not been subject to any severe disease &c or injury to head. Has not been restrained or confined. Supposed cause of disease is Compulsory marriage; religious mania; She has not been under treatment. On personal examination, Has a vacant expression of eyes & countenance; is wildly incoherent in talk; there is a restlessness & constant movement of the body: Speech irrational & entirely disconnected: was making constant, childish movements. Showed intense violent anger at slightest provocation & intense religious excitement, with delusions and hallucinations.

July/14 July/14/93. On admission, patient is found to be in fair condition. Has put on B² Was clean No lesions on her body Behavior good.
" 15 Appetite good Restless first part of the night Bowels moved Temp 99 3/5 Pulse 76. Resp 20.
" 16 Hawke came on the ball Behavior good Slept all night Appetite good Went out walking
" 17 Walks Pleasant part of the time Appetite good Temp axilla 97 2/5 Pulse 76. Resp 20. Went out walking with the other patients
" 18 Appetite good Seems very nice to the other patients Went walking Temp 97 3/5 Pulse 76. Resp 21.
" 19 Temp 97. Pulse 80. Resp 20. Appetite good.
" 20 Was violent and secluded Came Kicked a chair around the hall Appetite good Went out doors with the others Talked a little Appetite good Hawke came Temp 96 4/5. Pulse 80. Resp 22.
" 22 Appetite good Behavior well Temp 97. P 88. Resp 20.
" 26 Said she was going home
" 28 Worked in the Laundry today Behavior well
July 14 Rec'd onward July 29.93. Appetite good. Clean in habits. Talks a good deal. Works in laundry.
Aug. 8 Moved to D² Aug 29. " " " " Rests well at night. Does not talk any English. Works
Sept 29/31 in the laundry most of the time. Aug 31. 93 Attended the Fair. Sept. 29. 93 Appetite good
" 30 Tidy in habits; quiet on ward. Works in the laundry most of the time. Sept. 30. 93 Restless &
Oct 5/31 awake most of night. Slept 3 hrs. Oct 5. 93 Moved to D.W. Oct 31st 93 Rochange. —
Dec 31 1894 Dec 31/93. No change to note in past 2 months. Works a good deal of the time in the Laundry. —
Jan 31 Jan 31/94. Patient does not change any from month to month. Is quiet & well-behaved, never
Feb 15/93 Feb 15/94 No change in any way. Works in the Laundry. Feb 23/94. This patient had been committed here under the "Law of 1893", recently declared illegal. She was, today Taken out and Returned, under "new Commitment papers" from Olmsted County.

Personal and Medical History of Kate Bolz.

1894 April 16 Appetite good. Is quite noisy at times. Clean in habits. Works in laundry. Goes riding & walking. General health good. May 7. 94 No change in any way. Has been working steadily in the laundry for some time. Generally was quiet, but was easily excited. Husband took her home to day.

Grace Russell

1896 Aug. (From p. 116) Nurses Summary Notes by Dr. L.L. Phelps: Appetite good: bowels constipated: very untidy: very demented. Nov '96 no change: May '97 Very dull & demented: dirty: talks to herself at times: seems to realize very little: May '97 No change: Aug '97 Visited by mother & taken out by her to board near the Hospital for ten days: no special improvement: genl health good (cont'd by Dr. R. M. Phelps) Sept 1 '97 Taken out on trial by mother Sept. 13 '97 Rec'd: no change: Very dirty in habits: very demented: Dec. 3 '97 Recd a black eye from another patient: Oct. no '98 Visited by mother: most of time very stupid & demented: at times becomes excited & active: usually quiet however.
1899 Mar. 1 Sept. (Cont. by Dr. Bell) Appetite good: sleeps well: takes outdoor exercise: Is quiet the greater part of the time, stupid, sleepy & seems to rouse from this Stupor about once a month when she becomes more active & restless. Nov 1- Feb 28/1900 (Dr. Meyerdale) Appetite good: sleeps well: Bowels regular: takes outdoor exercise: untidy & dirty in habits: Stupid: Does not converse. Does not answer questions.
Mch 1 Aug 31/1900 (Dr. Linton) Stupid & restless: At times quite disturbed & inclined to be obstinate & troublesome: Does not talk much: General health fair: Appetite poor: Takes extra diet: does not sleep well but wanders about ward part of night: Takes out door exercise: July 25 Vaccinated. Sept 1- Nov. 30. No change except sleeps better: usually quiet: Nov 25 Wt 95 lbs. Dec 1- Feb 28/1901 Appetite fair - on extra diet: General health good: Does no work: Is stupid: Habits dirty. Mch 1 Wt. 92 lbs. Mar 1- June 1- 1901 Mental condition unchanged. Physically seems to be failing: expectorates a great deal. May 31 Wt. 97 lbs. June to Sept. No change. Sept. 3 Wt. 90 lbs.
Sept. 1 to Dec. Seems to be failing physically, quite maniacal, mentally unchanged. Nov. 30 Wt. 90 lbs.
to Feb. 1, 1903 General health poor: appetite poor: has special diet: sleeps well: does no work: takes exercise: dirty and careless: is very stupid and apathetic: takes no interest in surroundings: does not converse or answer questions. Dec 1 st Wt 93 lbs.

Personal and Medical History of Martina Mayer

LEBERT, PIGLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3415.
Residence, Corner Gorman Ave & Page St., St Paul
Date Admission, 15th July 1893.
Admitted by, S. Phelps Hour, 7 PM.
How Sent, John. B. Olivier Jof P. Ramsey County
Sex, Female.
Age, 30 years
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Housewife
Degree Education, none
Profession Religion, Catholic
Habits, Unknown.
Nativity, Germany (Parents also born there)—
Physicians Committing, Frank A. Fenton & Geo J. Hauley
Correspondents, Frank Walker, Page & Gorman Ave St Paul. Minn

No. for Year, 327.
Insane Relatives, not known
Cause Exciting, Derangement of Menstruation
Cause Predisposing, — —
Form, Acute Mania
Accompanying Bodily Disorder, deranged menstruation
Suicidal or Not, Not
Date of this Attack, monthly (continuous?)
Duration, 2 days each time
No. of Attack, probably many (light attack every month)—
No. of Admissions, 1
Age First Attack, (?)
Time of Leaving, Feb. 12th 1894
Time in Hospital, 6 mo. 28 ds.
Result, Rec,

Crossed off from Absence List, April 1st, 1894, because illegally committed.

Family Physician
F. A. Fenton, 118 S. Wabasha St. St Paul

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,

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.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
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 Martina Marxer.

EGBERT, PIDLAY & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy Sheriff Kinney, with the following history. Nothing known as to consanguinity or heredity. Patient has had light attacks every month, for some time; their duration being 4 days. Was never sent to Hospital. First symptoms of this attack were manifested by her being very religious for some time. Disease appears to be increasing, but is variable; intervals are not entirely rational; disease occurs in severe form after menstruation. Derangement is now manifested by religious hallucinations & by her being slightly destructive. Relatives are afraid she will injure the children. Is not suicidal. Is disposed to filthy & destructive habits. Has had no severe disease or injury to head; no headache been complained of or confined. Derangement of menstruation is supposed to be cause of attack. Patient has not been under treatment. On personal examination, it is found that she considers herself God; laughs scenes without cause; refuses to answer questions intelligibly. She says that "She was God"; constantly quotes Scripture; answers irrationally. Tore up her clothing & bedding. Appearance & manner were those of an insane person.

July 15 July 15/93. Patient, on admission, is in fair condition. Vaccination B²-

" 15 Very dirty and slight bruises below each knee.

" 16 Extremely noisy and destructive. In seclusion tries to escape. Black eye. Was struck by attendant. Patient talks very little english. Appetite good. Slept four hours. Was very noisy while awake. Singing and pounding the door. Destroyed the chair. Small sleeping case was given P. 76 - R. 18. Very noisy at times. In seclusion tries to escape. Untidy in habits. Noisy part of the night.

" 17 Very noisy and untidy in habits. Very destructive on the ward. Left under watch of nurse by day. Appetite good. Very restless. Singing and talking. Destroyed a pillow case.

" 18 Appetite good. Very noisy and ward. In seclusion for one hour. Requires constant care. Extremely noisy. Night watch struggled with her for an hour through the chamber at nurse. Has a sleeping case but it had no effect.

" 19 Slept 5½ hrs. Noisy most of the time while awake. Destroyed a pillow case. Must quiet on the ward.

" 20 Went riding. Seemed to enjoy being out. Gave her a German Bible and she read it. Was naughty to Dr today.

" 21 Very mischievous and destructive. Appetite good. Habits dirty. Very happy at times. While out walking ran away and climbed to top of the fire escape.

" 23 Noisy and destructive. Ran away while out walking and jumped into the basement thro. the window.

" 25 Very noisy and destructive. Habits clean during day.

" 27 Admitted on ward. July 21. 93. Removed to Ct. July 29. 93. Appetite good. Habits dirty. Is very mischievous & destructive, noisy at times, always trying to get away while out walking. Aug. 15. 93. More quiet & not as violent, but is very mischievous. Requires

Personal and Medical History of Martina Marxer

watching in lower bay. Complains of pain in right shoulder. Pain after eating. Eats ravenously. Aug 31 93 Patient's appetite good. Noisy some of the time. Requires constant watching. Dec 16. 93. Appetite good. Sleeps well. Works on the ward. Cares for herself. Bowels usually constipated. Transf to Inf. Dec 16 93. Transf to Ct. Dec 16 93. Starts with ward work, does knitting for herself. Bowels usually constipated. Needs nursing a good deal. Jany 16 94 Is menstruating. Aug 30/94 Complains of sore throat. Febry 2 94 Menstruating. Bowels constipated. Gave pills. Sick in bed to day. Febry 10 " Has a cold most of the time. Appetite good. Starts with ward work. Febry 22 94 Went home to day with her sister. Mental & physical condition both good. Very pleasant & grateful for all that was done for her.

Rika Berger

From p. 88

1898 Dec 31 Still in bed & very helpless: Jan 1 99 Is noticed to be having more difficulty in swallowing than usual: Temp. 100. Date 26 99 Transf to Inf. Feb 16 99 Visited by son. Is very helpless: Failing: Has bed sores: Feb 28 99 Has to be fed & helped in every way. Very helpless. Recent by Dr. R. A. Bates. Mar. 1899: Is bed. but sitting up part of time: Appetite quite good: inclined to be constipated: Ulcerations grown as needed: Has bed sores which are dressed daily:

1899 Mar. 13 T. 101⅘ P. 100 R. 30. Mar 15 99 Has swelling on right side of face possibly due to decayed teeth in lower jaw. Teeth extracted. Smiling not reduced. Deglutition became more & more difficult until she was unable to swallow: nutrient enemata given but unable to retain them: T. 100⅘ P. 150 R. 38. Continued about this: Has blisters on knuckles right hand: Hand & forearm: Mar 16: Pulse became rapid & weak: Hypodermics given: gradually failed during night: respiration became more difficult: unable to take nourishment: Died Mar. 17. 1899.

Died

Personal and Medical History of Honora Agnes Tate

GIBBART, PUGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3416.
Residence, 922 Minnehaha St., St Paul.
Date Admission, 15th July 1893.
Admitted by, Dr. Phelps Hour, 7. Pm.
How Sent, John B. Olivier, Jeff, Ramsey County.
Sex, Female
Age, 37
Civil Condition, married
Children, 4
Age Youngest Child, 3 years
Occupation, housewife (husband, Merchant)
Degree Education, Common School
Profession Religion, Catholic.
Habits, not intemperate
Nativity, Ireland (Parents born here also)
Physicians Committing, Wm Dinwoodie & E A Whitcomb
Correspondents, W. E. Tate, 922 Minnehaha St St Paul

No. for Year, 328.
Insane Relatives, none known.
Cause Exciting, not stated
Cause Predisposing, — .. —
Form, Acute Melancholia
Accompanying Bodily Disorder, none noted; anaemic.
Suicidal or Not, Not.
Date of this Attack, one year ago
Duration, one year.
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, about 36.
Time of Leaving,
Time in Hospital,
Result,

Family Physician Wm Dinwoodie 74 East 7th St St Paul.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Seems clear enough at subjects
Quick or Sluggish, Quick

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

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

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

GENERAL DESCRIPTIVE REMARKS:
Honora a good deal absent her children says her husband drinks that he keeps another woman

EMOTIONAL STATE:
Normal, Calm, Calm in actions but
Indifferent, worries a good deal
Exalted, absent her children
Depressed,

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

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Talks readily and
Voluble or Reticent, fairly well
Says she is not insane, thinks her husband sent her here to get rid of her Says neighbors told her not to live with her husband

Personal and Medical History of Honora Agnes Tate

at General term of Probate Court for County of Ramsey on Monday the 6th of July 1896 - at 10 o'clock am. the verified petition of William E. Tate for the appointment of a Guardian for Honora A. Tate, will be heard.
Dated June 6th 1896
(Seal) GD G. Wilbuch Jr
Judge

Case No. 3416. Honora A. Tate. File No. 9.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

ISSION.—(Continued.)

TICS.

NUTRITION, Fair

Promptness Movement, Normal
Normal
ion, Normal

TREMORS, Hands, None Tongue, None
Facial Muscles, None

HEART, Sounds are normal
LUNGS, Sound.
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Regular Constipated, Irregular,
APPETITE, Good, Medium, Poor, Always
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," Aunt Annt died of Consumption
Mother or Mat. Relations, Mother died at 68 Was healthy
Father or Pat. Relations, Father dead Was healthy
Brothers or Sisters,

Personal and Medical History of Nor

GEBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3416.

Residence, 922 Minnehaha St., St Paul.

Date Admission, 15th July 1893.

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

How Sent, John B. Olivier, Jeff. Ramsey County

Sex, Female

Age, 37

Civil Condition, Married

Children, 4

Age Youngest Child, 3 years

Occupation, Housewife (Husband, Merchant).

Degree Education, Common School

Profession Religion, Catholic.

Habits, not intemperate

Nativity, Ireland (Parents born there af

Physicians Committing, Wm Dinwoodie & E.

Correspondents, W. E. Tate, 922 Min

Family Physician Dr. Wm Dinwoodie 74 East 7th St St Paul

Duration,

No. of Attack, 1st

No. of Admissions, 1

Age First Attack, about 36.

Time of Leaving,

Time in Hospital,

EXAMINAT

MEN

MENTAL ACTIVITY:

Clear or Confused, Seems clear enough subject

Quick or Sluggish, Quick

MEMORY:

Past Events, Seems good

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, alert

Correct or Illusive, correct

REASONING POWER: Seems fair

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Harris a good deal about her children Says her husband drinks Neat he keeps another woman

EMOTIONAL STATE:

Normal, Calm, Calm in actions but

Indifferent, worries a good deal

Exalted, about her children

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Talks readily and

Voluble or Reticent, freely much,

Says she is not insane, thinks her husband sent her here to get rid of her Says neighbors told her not to live with her husband

Personal and Medical History of Nonora Agnes Tate

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2 3/4 in WEIGHT, 108 lbs NUTRITION, Fair

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, None Coatings, None Promptness Movement, Normal

PUPILS, Equality, Equal Size, Normal

Response Light, Normal Accommodation, Normal

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Normal

Legs, Normal

TREMORS, Hands, None Tongue, None

Facial Muscles, None General,

REFLEXES, Patellar, Rt - Left +

Other Reflexes,

ARTICULATION, Hesitating, Prompt Slurred,

FACIAL EXPRESSION, Normal

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Clear.

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean Careless,

BOWELS, Normal, Regular Constipated, Irregular,

APPETITE, Good, Medium, Poor, always

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," Aunt Aunt died of Consumption

Mother or Mat. Relations, Mother died at 68 Was healthy

Father or Pat. Relations, Father dead Was healthy

Brothers or Sisters,

Personal and Medical History of Honora Agnes Tate

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Deputy Sheriff Kinney, with the following history. Denies no history of consanguinity. Acts that of heredity, not known. This is first attack; Symptoms were manifested about one year ago, by religious mania. Disease appears increasing; it is variable; rational periods occur at irregular intervals. Derangement is now manifested by religious mania, with delusions & hallucinations. She has shown a disposition to injure others. Is not suicidal, however; nor filthy nor destructive; showed, previously, an irritability of temper. Has had no severe disease or head injury. Has not been restrained or confined. The supposed cause of the disease is not given. Patient has not been under treatment. On personal examination, is found to be Anaemic, melancholic; suffering from delusions. She stated a tale of gross immorality of husband & neighbors; claims she was excommunicated from the church; people upon the street spit upon her &c (all unsubstantiated). Has given to excessive & silly laughter; is boisterous. Her appearance & manner were variable. Has told others of visitations from God; hears voices;

July 15 July 15/93. Patient is in fair physical condition. Tongue on admission, pustular.
" 15 Pulse 80 Temp 100.4. Resp 19. Bodily condition clean. No injuries
" 16 Cried and warned a great deal. Talks quite sensibly. Appetite poor. Sleeps poorly. Bowels regular.
Temp 98.6. Pulse 80 - R. 18.
" 17 Ate very little. Cried at times.
" 18 Seems better contented - Appetite better.
" 20 Bowels constipated - Appetite poor. Very quiet and ladylike. Claims to be homesick and an that account can not eat. Very intelligent in appearance. Bowels constipated. Take pill mutton effect July 22. Bowels moved today. Appetite poor. Says can not sleep.
" 24 Was quiet all day. Cries at times to go home. Complains of headache.
" 29 Wrings and cries about being away from her children. Walks up and down the hall in a troubled way.
July 16/93 Appetite poor. Worries & cries a great deal, wants to go home. July 29. 93. Appetite poor. Clean in habits, behavior quiet most of the time, has crying spells occasionally, talks quite sensibly, sleeps but very little, complains some of headache & constipation.
Aug 31 Menstr. about the 6th. Aug 31 93. Appetite fair, behavior natural, occasionally has crying spells. Wants to go home. Menstr. about the 28th. Talks quite sensibly.
Sep 6/30 Does no work. Sept 6 93 Visited by husband. Sept 30 93 Appetite good. Habits clean. Behavior quite natural. Talks sensibly. Wants to go home. Menstruated about 16th & again 21st. Complains some of constipation. Oct. 30 93 Eats & sleeps well. Does not seem to worry as much as before. Would like to go home. Menstruated about 20th. Nov 29 93 Is now feeling real well. No complaints. Goes walking, riding & to entertainments. Does no work.
Dec 30 Dec 30/93. Appetite good. Prays & sings nearly all day. Is very contrary & disagreeable. Clean in habits. Does no work. Menstruated about 9th - lasted 9 days; had to be made get up.
1894
Jan 10/ Jan 10/94. Went back to bed today. Jan 27/94. Transferred to C. Jan 31/94. No material change to note.
Feb 1st 1st Feb 1/94. Is very quietly behaved. Prays and sings some, during the daytime. Habits are clean.
" 16 Feb 16/94. Is very quiet, most of the time. Shows some delusions. Otherwise, about as usual. —

Personal and Medical History of Honora Agnes Tate

1894

Feb 24 Feb 24/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. She was, today, taken out and Returned under "new Warrant" from Olmsted County.
March 1 94 Appetite good. Does no work. Sleeps well. Has delusions. Tidy in habits. Behavior quiet. At times singing & talking.
" 19 Menstruating. Quiet during period. April 2 94 Transf to Bc. April 6 94 Appetite good. Sleeps well. Behavior quiet.
Apr 18 Appetite good. Sleeps well. Behavior strange at times. Clean in habits. May 7 94. Appetite very good. Sleeps well. Tidy in appearance. Cares for her own room. May 22 94 Appetite good. Sleeps well. Neat in her personal appearance. Clean in habits. Behavior in quite natural. Cares for her room. Goes to school.
June 16 94 Very saucy & impudent to Dr Phelps today. June 27 94 Appetite good. Sleeps well. Helps some on the ward. Behavior is usually quiet. Always goes out walking. July 2 94 General health good. Clean in habits. Tidy in her personal appearance. Takes care of her own room. Appetite good. Sleeps well of late. Often speaks of wanting to go home. Aug 6 94 Has been very disagreeable of late. Removed to C. Aug 24 94 Has been quiet the past 2 weeks. Aug 27 94 Menstruating. Aug 31 94. Has been reading aloud to herself. Seems very indolent. Somewhat careless in her personal appearance. Sept 10 94 Appetite good. Does no work. Becoming untidy in habits. Talks sensibly. Seems indifferent about herself in every way. Saucy and impudent. Prays and sings in a loud manner for hours at a time. Menstruating. No change during period. Sept 24 94 Has silly delusions. Oct 4 94 Transf to Bc. Oct 12 94 Appetite good. Oct 31 94 Appetite good. Convalescing. Does no work. Talks sensibly. Goes walking.
Nov 1 94 Very saucy today. Appetite good. Nov 15 94 Transf to Ac & W. Nov 30 94 Is quiet and agreeable on ward. Stays in her room most of the time. Takes out door exercise. Does no work. Appetite good. Dec 28 94. Appears quite well. Appetite good. Occupies most of her time working for herself. Talks sensibly.
Jany 1 95 Menstr. Jany 30 95 Appetite good. Sleeps well. Occupies most of her time working for herself. Talks sensibly. Menstr. Feby 26 95 Nothing appears to be quite well both mentally & physically. Mar 2 95. Patient obstinate still about her husband & about going home.

24/105

Mrs. Tate.

Feb 12th, 1896.-- Writes about certain young men here whom she thinks in love with her. Tries to send letters to the male nurses. Three weeks ago wrote the last one and gave it to, Miss Sweeney. Wrote about Mr. James Sweeney saying the engagement to her sister must be broken off. Assumed that she and he were going to Europe, that she would take the children. Also abuses her husband.

self. Appetite good - sours sometimes. Sleeps well. Oct 4 Menstr. Nov 10 Neat & tidy in all respects. Talks sensibly. Appetite good at times. Goes walking & riding. Assists some with work on ward. Does needlework for herself. Sleeps well. Is very agreeable. Nov 27 No change in patient. Dec 29 Menstr. Is quite nervous. Has delusions & a great many silly ideas concerning male employees - thought one was going to Europe with her etc. Jan 14 & Feb 10 Menstr. Feb 28 No change. Appetite fair. Bowels regular. Sleeps well. General health good. Takes out door exercise. Works some at crocheting for herself. Does no work on ward. Quiet & agreeable. Neat in appearance. Talks sensibly on some subjects. Amuses herself reading & playing cards & games.

See Page 172

Personal and Medical History of Honora Agnes Tate

EABERT, FICKAS & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Deputy Sheriff Kinney, with the following history. There is no history of consanguinity. Acts that of heredity, not known. This is first attack; symptoms were manifested about one year ago, by religious mania. Disease appears increasing; it is variable; rational periods occur at irregular intervals. Derangement is now manifested by religious mania, with delusions & hallucinations. She has shown a disposition to injure others. Not suicidal, however; nor filthy nor destructive; showed, previously, an irritability of temper. Has had no severe disease or or has injury. Has not been restrained or confined. The supposed cause of the disease is not given. Patient has not been under treatment. On personal examination, is found to be Anaemic, melancholic; [illegible] ing from delusions. She stated a tale of gross immorality of husband & neighbors; claimed she was icated from the Church; people upon the Street spit upon her &c (all unsubstantial' cessive & silly laughter; then boisterous & Her appearance & manner were varia' itations from God; hear voices;

Exam A.

No insanity

Acute senseless

July 15 July 15/93. Patient is in fair flesh
" 15 Pulse 80 Temp 100.4.
" 16 Cried and [illegible] re
Appetite poor
Temp 98.6. Dem
" 17 Ate very little
" 18 Seems better contented.
" 20 Bowels constipated. Ap
Claims to be homesick and a
intelligent in appearance. Bar
of feet July 22 Bowels moved twice
" 24 Was quiet all day Cries at times to g
" 29 Talks and cries about being away
up and down the hall in a troubled m
July 16/94 Appetite poor. Worries & cries a great deal, wants to go home. C
Clean in habits, behavior quiet most of the time, has crying &
talks quite sensibly, sleeps but very little, complains some of hea
Aug 31 Menstr. about the 15th Aug 31 93. Appetite fair, behavior natural, c
has crying spells. Wants to go home. Menstr. about the 28th Talks quite
Sept 6/30 Does no work. Sept 6 93 Visited by husband. Sept 30 93 Appetite good. Habits a
Behavior quite natural. Talks sensibly. Wants to go home. Menstruated about 16th & again
Oct 30 21st. Complains some of constipation. Oct 30 93 Eats & sleeps well. Does not seem to worry
Nov 29 as much as before. Would like to go home. Menstruated about 20th. Nov 29 93 Is now
feeling real well. No complaints. Goes walking, riding & to entertainments. Does no work
Dec 30 Dec 30/93. Appetite good. Prays & sings nearly all day. Is very contrary & disagreeable. Clean in habits. Does
1894 no work. Menstruated about 9th - lasted 9 days; had to be made get up.
Jan 10/94 Jan 10/94 Went back to bed to day. Jan 27/94 Transferred to C. Jan 31/94 No material change to note.
Feb 15/94 Feb 1/94. Is very quietly behaved. Prays and sings some, during the daytime. Habits are clean.
" 16 Feb 16/94 Is very quiet, most of the time. Shows some delusions. Otherwise, about as usual. —

Personal and Medical History of Honora Agnes Tate

1894

Feb 2/94 Feb 2/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. She was, today, taken out and Returned under new Warrant from Olmsted County.

March 1/94 Appetite good. Does no work. Sleeps well. Has delusions. Tidy in habits. Behavior quiet. At times singing. Menstruating. Quiet during period. April 3/94 Transf to B2. April 6/94 Appetite good. Sleeps well. Behavior quiet.

" 19 Appetite good. Sleeps well. Behavior strange at times. Clean in habits. May 7/94 Appetite very good.

Apr 18 Sleeps well. Tidy in appearance. Cares for her own room. May 22/94 Appetite good. Sleeps well. Neat in her personal appearance. Clean in habits. Behavior is quite natural. Cares for her room. Goes to school.

June 4/94 Very saucy & impudent to Dr Phelps to day. June 27/94 Appetite good. Sleeps well. Helps some on the ward. Behavior is usually quiet. Always goes out walking. July 28/94 General health good. Clean in habits. Tidy in her personal appearance. Takes care of her own room. Appetite good. Sleeps well of late. Often speaks of wanting to go home. Aug 6/94 Has been very disagreeable of late. Removed to C. Aug 24/94 Has been quiet the past 2 weeks. Aug 27/94 Menstruating. Aug 31/94 Has been reading aloud to herself. Seems very indolent. Somewhat careless in her personal appearance. Sept 20/94 Appetite good. Does no work. Becoming untidy in habits. Talks sensibly. Seems indifferent about herself in every way. Saucy and impudent. Prays and sings in a loud manner for hours at a time. Menstruating. No change during period. Sept 24/94 Has silly delusions. Oct 4/94 Transf to B2. Oct 12/94 Appetite good. Oct 31/94 Appetite good. Bowels reg. Does no work. Talks sensibly. Goes walking.

Nov 10/94 Very saucy to day. Appetite good. Nov 15/94 Transf to Ward W. Nov 30/94 Is quiet and agreeable on ward. Stays in her room most of the time. Takes out door exercise. Does no work. Appetite good. Dec 28/94 Appears quite well. Appetite good. Occupies most of her time working for herself. Talks sensibly.

Jany 17/95 Mentr. Jany 30/95 Appetite good. Sleeps well. Occupies most of the time working for herself. Feby 4/95 Mentr. Feby 26/95 No change to note. Is to be quite well both mentally & physically. Apr 2/95. Patient obstinate still about her husband & about going home. Has ideas which are probably delusive about her husband. Otherwise much more lady like & rational about going home. Takes out door exercise, goes to entertainments, seems to be much more contented than was some time ago. Does no work. Apr 30/95. No change. May 3/95 Patient is menstruating. May 30/95 Delts.

May 31/95 There seems to be no change in her physical health is good.

June Menstr. June 28 Mental condition somewhat improved. Is now more contented & agreeable. Appetite good. Sleeps well. Does no work. July 12 Menstr. July 30 Not as well as usual for past week. Has strange ideas in mind. Prefers to stay in bed. Appetite fair. Refuses to go out doors.

Aug 30 Menstr. 26 Better again. Quiet in behavior. Sept 7 Menstr. Sept 25 Very quiet & agreeable in behavior. Clean in habits. Neat in personal appearance. Goes walking & riding. Does no work except needle work & crocheting for herself. Appetite good. Bowels regular. Sleeps well. Oct 4 Menstr. Nov 10 Neat & tidy in all respects. Talks sensibly. Appetite good at times. Goes walking & riding. Assists some with ward work. Does needle work for herself. Sleeps well. Is very agreeable. Nov 27 No change in patient. Dec 20 Menstr. Is quite nervous. Has delusions & a great many silly ideas concerning male employees. Thought one was going to Europe with her etc. Jan 14 & Feb 10 Menstr. Feb 28 No change. Appetite fair. Bowels regular. Sleeps well. General health good. Takes out door exercise. Works some at crocheting for herself. Does no work on ward. Quiet & agreeable. Neat in appearance. Talks sensibly on some subjects. Amuses herself reading & playing cards & games.

See Page 172

Personal and Medical History of Mrs Maria Johnson

ROBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3419.
Residence, South Park, Minn.
Date Admission, 18th July 1893.
Admitted by, Dr. Phelps Hour, 1.45 PM
How Sent, Thos. P. Moran Sof S, Dakota County
Sex, 30 years
X Age, Female.
Civil Condition, married
Children, 4
Age Youngest Child, 10 months
Occupation, Housewife (Husband, ornamental Painter)
Degree Education, Good
Profession Religion, Congregational
Habits, not stated; not intemperate —
Nativity, Aurora Ills (Parents, England). —
Physicians Committing, A VanBuck & Wm Adair.
Correspondents, R A Johnson / Mrs G. H. Murry
Treated by D. Real, Wabasha & Sibley St St Paul, Minn / South Park Minn / South Park Minn

No. for Year, 331.
Insane Relatives, None
Cause Exciting, Family trouble; tapeworm.
Cause Predisposing, not given
Form, Acute Melancholia
Accompanying Bodily Disorder, Hysterical Convulsions
Suicidal or Not, Suicidal
Date of this Attack, June 12th 1893
Duration, about 5 weeks —
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, 30 years
Time of Leaving, June 29. 1894
Time in Hospital, 11 month 11 Days
Result, Died.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Can not tell as
Quick or Sluggish, she will not
MEMORY: talk Only answers
Past Events, a very few question
Recent Events, by "yes" & "no"
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Sits gazing about in a listless manner — Confused when addressed —

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Confused In a dazed state
DELUSIONS:
Systematized or Not, Can not determine
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Will not talk
Voluble or Reticent,

Personal and Medical History of Mrs Maria Johnson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1 in WEIGHT, 98 lbs NUTRITION, Impaired
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Tremor Coatings, Slight Promptness Movement,
PUPILS, Equality, Equal Size, Dilated
Response Light, Sluggish Accommodation, Sluggish
SIGHT, Says good
HEARING, Appears good
COORDINATION, Arms, Seems good as far as can test
Legs, " " " " " "
TREMORS Hands

Case No. 3419. Maria Johnson. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

SENSIBILITY,
HEART, Quick but sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., 1st degree of prolapsus, lacerated perineum & cystocele
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 96.	RESP., 20	TEMP., 99 1/5

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 Mrs Maria Johnson

GIBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3119.
Residence, South Park, Minn.
Date Admission, 18th July 1893.
Admitted by, D. Phelps Hour, 1.45 PM.
How Sent, Thos. P. Moran Jof S, Dakota County
Sex, 30 years
Age, Female.
Civil Condition, married
Children, 4
Age Youngest Child, 10 months
Occupation, Housewife (husband, mas
Degree Education, Good
Profession Religion, Congregational
Habits, not stated; not intempe
Nativity, Aurora Ills / Parents, Engla
Physicians Committing, A. VanBuck & Wm Moore
Correspondents, R. A Johnson / Mrs G. A. Murry
Treated by D. Best, Wabash & Seabel Sts. St Paul Minn / South Park Minn / South Park Minn

No. for Year, 331.
Insane Relatives, None
Cause Exciting, Family trouble; tapeworm.
Cause Predisposing, not given
Form, Acute Melancholia
Accompanying Bodily Disorder, Hysterical Convulsions
Suicidal or Not, Suicidal
Date of this Attack, June 12th 1893
Duration, about 5 weeks.
No. of Attack, 1st
Admissions, 1

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Can not test as
Quick or Sluggish, she will not
MEMORY: talk Only answers
Past Events, a very few questions
Recent Events, by "yes" & "no"
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Sits gazing about in a listless manner - Confused when addressed.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Confused in a dazed state
DELUSIONS:
Systematized or Not, Can not determine
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Will not talk
Voluble or Reticent,

Personal and Medical History of Mrs Maria Johnson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1 in WEIGHT, 98 lbs NUTRITION, Impaired
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Coatings, Slight Promptness Movement,
PUPILS, Equality, Equal Size, Dilated
Response Light, Sluggish Accommodation, Sluggish
SIGHT, Says good
HEARING, Appears good
COORDINATION, Arms, Seems good as far as can test
Legs, " " " " " "
TREMORS, Hands, None Tongue, None
Facial Muscles, None General, None
REFLEXES, Patellar, Equal &
Other Reflexes,
ARTICULATION, Hesitating, Will not talk Slurred,
FACIAL EXPRESSION, Blank
SENSIBILITY,
HEART, Quick but sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., 1st degree of prolapsus, lacerated perineum & cystocele
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 96.	RESP., 20	TEMP., 99 ½

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 Mrs Maria Johnson.

HERBERT, FICKLIN & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Dr Lawler & attended by Mrs Murray, with the following history. There is no history of either consanguinity or heredity. This is 1st attack. Symptoms manifested June 12/93; disease seems stationary; no rational intervals; derangement is now manifested by mind being torpid; cataleptic conditions. Is not disposed to injure others. Has attempted suicide; tried to cut her throat with a table-knife; propensity not now active. Has neglected her person. Has been subject to hysterical convulsions, has had no injury to head. Has not been restrained or confined. Has probably been under medical treatment. Supposed cause of the disease is family trouble: is said to have had tapeworm. On personal examination Patient is found as above described; says nothing but "yes & no"; appearance & manner, depressed. Patient is reported to have been ill-treated & neglected.

July 18 July 18/93. Is in fair physical condition, as her admission. Temperature P.M.

" 19 Pulse 84. Temp. 98.4. R. 18. Clean in person. Rash on her chest. No bruises. Very quiet. Seems rather melancholy. Does not talk. Appetite poor. Will not feed herself. Slept five hours. Was quiet all night. Bowels constipated.

" 20 Very quiet. Went walking. Appetite poor. Slept only two hours.

" 21 Tidy in habits. Very quiet. Went out riding. Slept 6 hours. Quiet.

" 22 Slept but 3 hrs. asked quite restless while awake.

" 23 Tends herself to some extent. Appetite poor. Does not talk any. Restless and awake most of the night. Tidy in habits.

" 25 Does not talk at all.

" 26 Very quiet on ward. Appetite poor. Take medicine. Slept 3 hrs.

" 28 Slept well all night for first time.

" 30 Has slept well for the past two nights.

Aug 18 Admitted on ward July 26. 93. Appetite poor, put on tonic. July 31. 93 No change. Aug 7 93. Will neither dress no undress herself nor feed herself at any time. Tidy in habits. Does not talk any. Aug 21. 93. Untidy in habits. Aug 21. 93. Visited by husband & child. Rattled with the

Aug 26. Does not improve. Will not talk, sits in a dull manner on the hall from morning until

Sept 15 night. Manifests no interest in anything. Aug 29 93 No change. Sept. 15. 93 Not any change.

Oct 30. 93 Sits in a very dull manner on a bench in about the same manner place on the ward. Does not talk any. Does not look strong. Will not take tonic. Appetite only medium.

Oct 31. 93. Not any change. Nov 30. 93. Seems some brighter, makes 2 or 3 beds in the morning.

Nov 29 " Appetite good. Neat in habits. Very quiet in behavior. Does not talk any, will not even answer a question but is brighter in her actions. Does undresses herself. Rests well at night most of the time.

Dec 12 Dec 12/93. Appetite good. In appearance, seems brighter, but will not talk with Attendants, at any time. Very quiet. Habits clean.

" 31 Dec 31/93. No noticeable change in patients condition, at this date.

1894 Jan 15 Jan 15/94. Rests and sleeps well, at night. Appetite good. Still very reticent. Behavior about as above described.

" 31 Jan 31/94. About the same. Appetite good. Habits are clean. Very reticent & reserved.—

Feb 28 Feby 28/94. No material change in patients condition, except, at this date. Is on medicines.

Mar 5 March 5/94. Has continued quiet. Rests and sleeps well at night. Does not talk any. — Was,

Personal and Medical History of Mrs Maria Johnson

189[illegible] cont'd

Mar 8/94 transferred to 6[illegible] Ward. March 7/94. Patient was committed here under "Laws of 1893", recently declared unconstitutional. She was, today, ~~Taken out and~~ Returned under "new warrant" from Chestnut County.—

March 7 Was operated upon today for lacerated cervix, cystocele repair & perineum. Uterus was also curetted at same time. Took ether well and came out from influence of it without any bad symptoms. Put to bed and Ct Made a good recovery within two weeks. Mental condition does not improve. She rarely speaks at all. Sits in a dull listless manner on the ward never manifesting any interest in anything on Ct Ward from March 7 to March 12 94 For particulars see record book.

April 1st 94 Sitting up. Is very stupid. Will not dress or undress herself. Appetite not very good. Bowels regular. Is untidy in habits at times. Does not talk any. April 13 94 Transf to 15 April 19 94 One ounce of Appetite very poor. Put on tonic. April 23 94 Left ankles swollen. April 30 94 About the same.

May 18 94 Appetite poor. Has to be spoonfed. Very quiet. Does not talk any, lays on bed in hall. Very untidy in habits. Does not take any care of self. Seems very much depressed. May 31 94 No change.

June 2 94 In bed all afternoon. 2 P.M. T. 103[illegible] P. 100. R. 20. Drank one glass of milk for supper. June 3 94 9 A.M. T. 100 P. 99 R. 20 Drank glass of milk for breakfast. Examination of lungs show marked hyper resonance of upper lobes both lungs. Rales (small crepitant) in upper left lung. Signs consolidation in lower right lung. Signs of cavity in lower lobe left lung anteriorly. 6 P.M. T. 103[illegible] P. 122 R. 24 Drank egg nog. Drank ½ glass milk for supper. June 29 94. Died 2 em. For particulars see nurses record case.

Died, June 29th 1894.

Personal and Medical History of Grace Russell

EGBERT, FICLAN & CHAMBERS, DAVENPORT, IOWA



Whole No. 3421.
Residence, Mystic Ave. Burlington Ia.
Date Admission, 20th July 1893.
Admitted by, D. Phelps Hour, 7
How Sent, John. B. Olivier. Jof P. Co
Sex, Female
Age, 24 years
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, — Father a p
Degree Education, High School
Profession Religion, not a church member
Habits,
Nativity, Minnesota (Father, Pennsylvania; mother, New York).
Physicians Committing, Eugene Riggs & A.W. Dunning
Correspondents, Harvey G. Russell
Box 390. P.O. St Paul
Family Physician, Dr. Wellen Russell

No. for Year, 333.
Insane Relatives, None
Cause Exciting, Nervous exhaustion
Cause Predisposing, overwork + overstudy etc.
Form, Pubescent Insanity
Accompanying Bodily Disorder, has had diphtheria
Suicidal or Not, Suicidal
Date of this Attack, over 3 years ago
Duration, over 3 years
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, about 21.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined July 25 Dr L. Phelps

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

MEMORY:
Past Events, Will not talk
Recent Events,
Special Subjects,

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

REASONING POWER Very poor Almost
Ordinary Subjects, none
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Appears weak physically and mentally
Sits most of the time with her feet
drawn up under her & shoulders
and head bent over, looking down

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Indifferent and
Exalted, Sullen Resents a
Depressed, good deal

DELUSIONS:
Systematized or Not, Seems to have
Special Subjects, many
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Refuses to talk
Voluble or Reticent, at times speaks
in a very quick manner

Personal and Medical History of Grace Russell

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 1/4 WEIGHT, 101 1/2 lbs NUTRITION, Poor Very pale
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors; Well not Coatings, clean Promptness Movement,

Case No. 3421. Grace Russell. File No. 9.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

Facial Muscles, General, None
REFLEXES, Patellar, Equal about 4-
Other Reflexes,
ARTICULATION, Hesitating, Refuses to Slurred, talk
FACIAL EXPRESSION, Blank that of an imbecile
SENSIBILITY,
HEART Sounds are normal but quick
LUNGS, Seem in fair condition though very hollow chested
EXAM. URINE. good but scant

GYNAECOLOGICAL EXAM., Uterus normal Position
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Very dirty Clean, careless and Careless, indifferent
BOWELS, Normal, Normal Constipated, Irregular,
APPETITE, Good, Very voracious Medium, Poor,
SLEEP, Good, Poor, Irregular, Irregular
PULSE, 110 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, Brothers insane Was for time here

Personal and Medical History of Grace Russell

ROBERT, FICKAR & CRAWBERS, DAVENPORT, IOWA



Whole No. 3421. No. for Year, 333.

Residence, Mystic Ave. Burlington Ia. Insane Relatives, None

Date Admission, 20th July 1893. Cause Exciting, Nervous exhaustion

Admitted by, D. Phelps Hour, 7 Cause Predisposing, overwork + overstudy &c.

How Sent, John. B Olivier. Jof P. Form, Pubescent Dyspepsia

Sex, Female Accompanying Bodily Disorder, has had diphtheria

Age, 24 years

Civil Condition, single

Children, —

Age Youngest Child, —

Occupation, — Father a p

Degree Education, High School

Profession Religion, not a church member

Habits,

Nativity, Minnesota (Father, Pennsylvania; mother, Newfak).

Physicians Committing, Eugene Riggs + A.W. Dunning

Correspondents, Harvey Y. Russell

Box 390. P.O. St Paul

Family Physician Dr Wellen Russell

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined July 25 Dr L. Phelps

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Will not talk

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Illusive

REASONING POWER Very poor Almost

Ordinary Subjects, none

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Appears weak physically and mentally

Sits most of the time with her feet Her general appearance

drawn up under her + shoulders is that of an imbecile

and looks but over, looking down

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Indifferent and

Exalted, sometimes Resents a

Depressed, good deal

DELUSIONS:

Systematized or Not, Seems to have

Special Subjects, many

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Refuses to talk

Voluble or Reticent, at times speaks

in a very quick manner

Personal and Medical History of Grace Russell

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 1/4 WEIGHT, 101 1/2 lbs NUTRITION Poor Very pale

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors; Will not Coatings, Pale Promptness Movement,

PUPILS, Equality, Equal Size, Dilated

Response Light, Will not allow Accommodation, tested

SIGHT, Says good.

HEARING, Good

COORDINATION, Arms, Seems good though will not allow any

Legs, Special tests

TREMORS, Hands, None Tongue,

Facial Muscles, General, None

REFLEXES, Patellar, Equal About 4-

Other Reflexes,

ARTICULATION, Hesitating, Refuses to Slurred, talk

FACIAL EXPRESSION, Blank Look of an imbecile

SENSIBILITY,

HEART, Sounds are normal but quick

LUNGS, Seem in fair condition though very hollow chested

EXAM. URINE. and Bowels over-

GYNAECOLOGICAL EXAM., Uterus normal Position

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Very dirty Clean, careless and Careless, indifferent

BOWELS, Normal, Normal Constipated, Irregular,

APPETITE, Good, Very excessive Medium, Poor,

SLEEP, Good, Poor, Irregular, Irregular

PULSE, 110 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, Brother insane Was for time here

Personal and Medical History of **Grace Russell**

BARRETT, PIDLAR & CHAMBLER, DAVENPORT, IOWA

1893 Was brought here by Mr. H. Russell & attended by Mrs Russell, with the following history. There is no history of consanguinity or heredity. This, the 1st attack, occurred over 3 years ago, Symptoms manifested by wakefulness, associated with agitation. Ovariotomy was performed at her home three years ago, for this trouble. Disease appears to be increasing, (though in some respects there is improvement, more regular appetite, more irregularity of periods, good and bad, less severe headache, a little more family affection and understanding of what is read to her (F.E.R). There are partially rational intervals. These are not so regular as at first; capable of some delay. They were monthly for a long time, but go through a longer period now. There is also some increase of filthiness & destructiveness. Derangement is now shown by a refusal to talk with friends, destructiveness, (but not violence), filthy habits etc. (These things in the "bad time", which last 2 weeks or more. She lives in an imaginary world & needs to become interested in the real world; has been needing a change of environment. Is not disposed to injure others. She has attempted suicide but propensity is not now active. Previously, She had been very industrious, conscientious and self-denying; very bright & ambitious; religious naturally & interested in public work, as well as home duties. Neither parents or patient ever addicted to intemperance use of narcotics. Had the diphtheria a year before her break-down; it was largely nasal and left paralytic sequalae; old sight; inability to swallow liquid etc. She is sometimes locked in her room. A straight-jacket was used when She had suicidal impulses during "bad times" for a few months 4 years ago. Mother states cause of disease was nervous Exhaustion, as a result of long overstrain both physical & mental; also emotional; too long walks; hard study & anxiety over many cares of poverty etc; also a habit of under-eating. The above operation was without effect, or for the worse, if any. Hygienic measures have been used (She has seemed to need, above all things, a long recuperation). —

On personal examination, she is found to have illusions; is not talkative, only answers questions in monosyllables; simply sat staring out of the window, picking at clothes, refusing to look at examiners. Filthy in habits; tears up clothing, bedding etc. (She loves her own identity, but is better about that than she used to be; she never called me mother for about 2 years, but often does now, when at her best.). She has no judgment about work, except occasionally of late.

July 20 93. July 20 93. Patient is in fair condition. On admission, was put on B.P.

" " Temp 98.6 Pulse 84 Resp 18 Body clean and no bruise

" 21 Quiet on the ward Does not talk any Appetite fair and feeds herself Slept one hr. On bed and quiet last night Bowels move

Temp 98.6 P. 84 Resp 18 Untidy in her habits

" 23 Slept fair hours Singing and talking some while awake

" 24 Very untidy in her habits Her room was filthy awake all night

" 25 Very restless & out of bed part of night Talking when awake

" 26 Appetite good Almost ravenous Very quiet Sleeps well now

" 27 Slept fairly 6 hrs, Restless and talkative

" 28 Did not sleep talking and singing part of the time

Aug 1 Very restless all night Did not sleep Very noisy and in and out of bed part of the time Refuses nourishment Spits on herself and attempts Very untidy at table

Personal and Medical History of **Grace Russell**

July 20 93. Admitted on ward July 21. 93. Destroys her clothes. Very untidy in habits. Does not seem to realize much, that takes place & when out riding sits with her head down & does not notice anything. Aug. 1 93 Very untidy in habits in every sense of the word will not use knife or fork, when eating & sometimes will not use Spoon.

Aug 7 93. Very destructive in habits Aug 8 93 Moved to B2. Aug 21. 93. Appetite good Untidy in habits. Sits in one place most of the time Behavior good. Never talks. Goes out riding

Sept 29 & walking. Sept 29 93 Appetite good Dirty in habits usually. Behavior quiet Never

Oct 30 talks. Has had 7 or 8 electric treatments. Oct. 30 93 Appetite good. Dirty in habits.

Nov 27 Behavior quiet. Never talks. Has electrical treatment every other day this month. Nov 27 93 Appetite fair Usually dirty in habits Behavior quiet Has had 7 electric treatments

Dec 31 Dec 31/93. Appetite fair. Behavior, noisy at times. Talks & sings. Usually dirty in her habits; destructive.

1894 Jan 31 Jan 31/94. No material change to note, in patient's condition. Still dirty in her habits.

Feb 22 Feb 22/94. Appetite not very good. Is quietly behaved. Very seldom talks. Habits continue dirty.

" 23 Feb 23/94. This patient was committed here under the "Law of 1893", recently declared unconstitutional. She was today Taken out and Returned under new Commitment papers", from Olmsted County. March 30 94 Appetite very good Very dirty in habits Behavior very

May 28 94 destructive at times and violent, inclined to strike the ladies. Talk incoherent. Months about 27th. Appetite poor. Very mischievous in behavior & hard to watch Destructive at times. Habits dirty & untidy in appearance. Goes riding & walking. Menstruated 26th. June 29 94 Violent & destructive to clothing Requires close watching. June 30 94 Appetite poor. Untidy in appearance. Dirty in habits. Behavior very mischievous at times violent & patients. Goes walking. July 30 94 Appetite good Talks incoherently Aug 5 94 Much excited at times violent & destructive Sleep poor. Appetite good Aug 11 94 Visited by mother Patient very stupid, at times was coherent.

Aug 30 & Sept 24 94 Appetite good. Habits very untidy Quite noisy at times. Is destructive to clothing. Talks incoherently Goes walking & riding

Sept 24 94 Appetite poor at times Usually dirty in habits. Very restless at night Talks incoherently

Oct 26 94 Appetite fair Very untidy in personal appearance and dirty in habits. Talks incoherently

Goes walking & ridg. Nov 28 94 Appetite fair. Behavior very mischievous Talks incoherently

Usually dirty in habits, seldom ever talks any. Feb 28 95 Appetite good. Dirty in habits. Behavior very quiet.

Sleeps well Gen health good. May 29 95 Gen health good Has been quite active for a few days, but is more

quiet now. Destructive at times. Apr 28 95 Very restless & troublesome Gen health good Appetite good

Bowels reg: May 28 95 Is very stupid in behavior Gen health good

June 25 Very restless all the time. Appetite poor. June 29 More quiet. Appetite better

July 29 Restless & noisy. Out of bed during night. Appetite good. Bowels regular. Dirty in habits.

Aug 30 More quiet. Incoherent. Appetite good. Bowels regular. Sept 28 Gen. health good.

Quiet in behavior. Habits dirty Bowels regular. Talks incoherently. Oct 30. Mischievous in behavior. Gen'l health good. Nov 29 More quiet than usual. Appetite good

Bowels constipated Does not talk very much. Jan 14 Quite destructive. Feb 29 General health good. Very stupid does not realize anything. Talks incoherently: Habits very dirty. Appetite good

Sleeps quite well - Mar. 15 Very restless - Habits dirty. Appetite good. Bowels regular. Goes

walking & riding. May 5 Has a bad toothache. Face swollen considerably. Liniment applied

May 25 General health good - Dirty in habits - Takes out door exercise.

(See p. 100)

Personal and Medical History of Minnie Nelson

ALBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 31427.
Residence, Cor. St Anthony & Lexington Aves. St Paul
Date Admission, 20th July 1893.
Admitted by, Hour, 7 P.M.
How Sent, John B. Olivier Jof C, Ramsey County
Sex, Female
Age, 41 Years
Civil Condition, married
Children, None
Age Youngest Child,
Occupation, Washing (Husband, laborer)
Degree Education, very limited
Profession Religion, Lutheran
Habits, somewhat intemperate —
Nativity, Norway (Parents also born there) —
Physicians Committing, C. Marchand & O. A. Dliesberg
Correspondents, Andrew Nelson, Cor St Anthony & Lexington Aves.

No. for Year, 334
Insane Relatives, None
Cause Exciting, Disappointment in love affair
Cause Predisposing, not given
Form, Acute Melancholia
Accompanying Bodily Disorder, Unreported
Suicidal or Not, Not
Date of this Attack, About 3 weeks ago
Duration, about 3 weeks
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, 41 Years.
Time of Leaving, Sept 1st '93
Time in Hospital, 1 mo 10 ds.
Result, Recovered

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Fairly Clear
Quick or Sluggish, Sluggish
MEMORY: Good
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State, Says she is not "crazy"
Special Subjects,
GENERAL DESCRIPTIVE REMARKS,
Says she drank two glasses of beer that made her sick Strongly which was the cause of her losing control of herself

EMOTIONAL STATE:
Normal, Calm, Generally quiet but
Indifferent, became restless excited
Exalted, When she talks about
Depressed, the injustice of her being sent here
DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,
Talks very rapidly and mostly about her husband and the way he sent her here

Personal and Medical History of Minnie Nelson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 1/2 in. WEIGHT, 138 lbs NUTRITION, Good
WOUNDS OR ABNORMALITIES, Same deformity of sternum caused by fall 8 yrs ago Some scars on left side of neck. Caused by boils & Anemia girl
TONGUE, Tremors, Normal, Coatings, Whole tongue Prominence Movement, Normal
PUPILS, Equality, Equal Size, Normal
Response Light, Good Accommodation, Good
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, None Tongue, None
Facial Muscles, None General, None
REFLEXES, Patellar, Equal 5 on scale of ten
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Normal
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION, Says has not menstuated for nine weeks
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Normal Constipated, Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Slept well Poor, Irregular,
PULSE, 84 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, Always healthy
Father or Pat. Relations, Father died when Patient was nine yrs old
Brothers or Sisters, 1 Bro had Rheumatism Sisters healthy

Personal and Medical History of Minnie Nelson.

SEBERT, PIDLAR & EHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy Sheriff Courteau, attended by Mrs Francoeur, with following history. No history of either Consanguinity or heredity. This is 1st attack; first symptoms manifested about 3 weeks ago, by running away & having delusions of persecution. Disease appears increasing, but there will be irregular periods when she is fully rational. Derangement is now shown by thinking herself persecuted, has illusions of pregnancy; is seemingly well-balanced at times, however. Is neither disposed to injure others, nor suicidal. Is filthy & destructive to a certain extent. Is somewhat intemperate. Has had no severe disease or injury to head. Supposed cause is disappointment in a love affair. She has not been under medical treatment. On personal examination, is found somewhat flighty & uncertain in her replies; personal appearance is rather in her favor. The patient said that she is pregnant; has other imaginations, such as being persecuted &c. Did not act in any unusual manner; was quiet & orderly during examination. She has to be watched & will run away from home; will come back when intoxicated.

July 20 July 20 93. On admission, was put on A°. Semi fair physical condition.
" " Temp 98.6 Pulse 83 - R 17 Quite tidy in person Right arm is swollen Complains of having Rheumatism
" 21 Quiet in behavior Worked & talked on the ward Talks quite sensibly - Appetite good Slept well - Bowels constipated Right arm and leg swollen Temp 98.6 - Pulse 82 - R 16 -
" 22 Eats and sleeps well Quiet in behavior Bowels constipated Same class of talks
" 23 Worked in the dining room Same - Bowels moved
" 24 Complains of pain in left chest Same of neuralgic character
" 26 Appetite good Behavior quiet Works in the dining room
" 27 Sent out to laundry to work today Quiet and pleasant
" 28 Appetite good Sleeps well and keeps natural in behavior
" 29 Talks & acts dazed & dull about going home
" 31 Complains of pain in abdomen - Appetite good
Aug 2. Very irritable complains of headache
" 3 Was sick in bed today & menstruating Has same pain in abdomen Says is not drunk - July 29. 93. appetite good Behavior quiet. Works in the laundry. Habits clean. Talks quite sensibly. No complaints.
Aug 31 93 Appetite very good. Clean in habits. Works in the laundry. Wants to go home.

Personal and Medical History of Bridget Donohue.

Room 64

1894 cont'd
Feb 23 Was also vomiting during the afternoon and evening; has taken very little nourishment. 830 PM. Temp. 101.4.
" 24 Hypodermic of morphine given, as directed. Feb 24/94. 630 AM. Bowels moved. Slight hemorrhage of bowels also at 8 AM: then also vomiting: 9 AM was given hypodermic of morphine. Temp. normal; pulse weaker, and, at times, very irregular. She has taken but very little nourishment today. 2 PM. Patient moved to C2 — " — At supper. 7 PM. Is resting much more quietly. 8 PM. Given milk; Expectorates. Has been out of bed 3 times.
" 25 Feb 25/94. Slept about 3 hours during the night. 5 AM. Pulse 90 R 26 T 100. Is quite restless, at present. Visited by her sons today. 530 PM. Pulse 99 R 28 T 101. Drank a cup of tea for supper. — " —
" 26 Feb 26/94. Has been asleep all night. Was visited by her sons again, today. Drinks freely of boiled milk.
" 27 Feb 27/94. Was quite restless, nearly all last night; slept but one hour. Has had quite frequent hemorrhage of the bowels the past few days. Has also vomited some. Patient has taken quite freely of food, also of boiled milk, today. Feb 28/94. Slept quite well, last night. 5 AM. Pulse 94 R 20 T 99 2/5. Drinks quite freely of milk, and tea &c. (For more minute details see Nurse's Record) —
" 28 Feb 28/94. This patient was committed here under the 3rd Class of 1893 recently declared unconstitutional. She was, today, Taken Out and Returned under "new Warrant" from Olmsted Co.

Summary from Feb 7 '94. Appetite always very good - also slept well most of the time. Only complained of pains in the bowels and frequently had hemorrhages of the bowels. Was sitting up in room on Mch 5 94 but did not feel as well on Mch 7, seemed to be weak. Sat up on Mch 8 94. Visited by lady friend on Mch 9 Was up all day on Mch 12 94 removed to B1 (See more detailed case)

Mch 7 94 Sick in bed 7 days. Mch 10 94 Appetite good. Complains of being dizzy. Sits up most of the time.
Mch 12 94 Transf to B1. Mch 27 94. Appetite has been fairly good since the came on the ward. Slept well. Quiet. Sits in her room most of the time. Has delusions. Apr 4 94. Refused breakfast and dinner ate a light supper. Has delusions. Keeps quite well. Tidy in appearance. Apr 18 94. Appetite very poor. Complains of headache. Seems very irritable, sleeps quite well. Clean in habits. May 7 94. Generally eats very little at breakfast, usually eats good dinner and supper. Sits in her room most of the time. Has many delusions. May 21 94. Appetite fairly good. Sleeps well. Gen. health good. Has been quite noisy at times the past few days. Often gives trouble when asked to bathe. May 27 94 Visited by her daughters.

June 28 94 Appetite fairly good. Sleeps well. Is untidy at times. Has delusions. Has spells of crying. Wants to go home and see her children. Removed to C3 July 19 94.
July 25 Appetite fair. Behavior very quiet. Keeps in her room all day. Vomits frequently. Sleeps quite well. Talks sensibly. Aug 94 Behavior quite noisy. Has delusions. Aug 24 94 Had a crying spell today. Cried and prayed out loud all day. Aug 27 94 Behavior more quiet. Transf to C2 Aug 3 94. Appetite is good. Untidy at times. Bowels constipated. Sept 1 94 Appetite fairly good. Sleeps well. Has delusions. Has spells of crying. Wants to go home. Bowels usually constipated. Sept 21 94 Noisy all day. Fighting during night with Mrs Benston. Oct 4 94 Very resistive about being bathed. Very noisy at times. Had diarrhoea. Refused medicine. Oct 31 94 Noisy at times. Appetite good. Has delusions. Very resistive at times.
Nov 3 94. Very noisy all day. Singing and crying. Nov 10 94. Talking and singing most of the day. Nov 20 94 Quite noisy will not keep her stockings on. Nov 30 94 Quite noisy today, singing and talking very loud. Appetite good.
Dec 12 94 Transf to B. Dec 30 94. Extremely noisy at times. Also violent in behavior. Took off his shoe & struck at the Attdt. Appetite good. Bowels reg. Feb 28 95 Very noisy at times. Also violent in behavior. Appetite good. Bowels regular. General health apparently good. Mch 6 Transf to B2 Mch 19 95 Very noisy at times. Transf to B3 Apr 25 95. General health good. Quite noisy during day. May 20 95. Visited by friends. Became quiet excited. May 30 95. Gen health good. Is extremely noisy at times.

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Personal and Medical History of Hanna Nilson

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3423.

Residence, 429 York St. St. Paul. Minn

Date Admission, 21st July 1893.

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

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

Sex, Female

Age, 27

Civil Condition, Single

Children, one

Age Youngest Child, six years old

Occupation, Servant-girl

Degree Education, Fair -

Profession Religion, Lutheran -

Habits, not stated -

Nativity, Sweden (Parents also born there).

Physicians Committing, Olaf Ahlberg & O. A. Fluesberg

Correspondents, Celia Modini, 429 York Street

No. for Year, 335.

Insane Relatives, a Male Cousin

Cause Exciting, probably heredity, Longsickness & religion

Cause Predisposing, perhaps heredity

Form, Acut Melancholia

Accompanying Bodily Disorder, None noted

Suicidal or Not, Suicidal

Date of this Attack, 6 or 7 Years ago -

Duration, 6 or 7 Years -

No. of Attack, 2nd probably (1st at about 12 or 13) -

No. of Admissions, 1

Age First Attack, about 13 -

Time of Leaving, Aug. 20th '93

Time in Hospital, 1 mo. 9 ds.

Result, Imp.

Crossed off from Absentee List April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Good

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive,

REASONING POWER Impaired

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Sits and cries a good deal Says is home sick Want to go back to old Country So homesick that can not eat or sleep

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Depressed much

DELUSIONS:

Systematized or Not, None determined

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent - Talks

Voluble or Reticent, Freely Says thinks she was crazy but head is all right. Says has had other attacks over in Old country. Always had bad temper. Has not been well for the past year

Personal and Medical History of Hanna Nilson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft WEIGHT, 128 lbs NUTRITION Good - Fleshy

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Coatings, Slight Promptness Movement,

PUPILS, Equality, Equal Size, Normal

Response Light, Good Accommodation, Good

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Slight uncertainty in testing Finger to nose eyes shut

Legs, Seems good

TREMORS, Hands, None Tongue, None

Facial Muscles, None General, None

REFLEXES, Patellar, Impaired 3 on scale of 5

Other Reflexes,

ARTICULATION, Hesitating, Slow Slurred,

FACIAL EXPRESSION, Dull

SENSIBILITY,

HEART, Sounds as normal

LUNGS, Seem in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION, Irregular Not menstruated for 2 mos.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor, Poor
SLEEP, Good,	Poor, Poor	Irregular,
PULSE, 78	RESP., 19	TEMP., 99

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother healthy

Father or Pat. Relations, Father Dead

Brothers or Sisters, Had a Cousin in Asylum in old Country Says was crazy

Personal and Medical History of Hanna Nilson

EARLEY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Deputy - Sheriff Hawes & attended by Wm Winkelman with following history. There is no history of consanguinity, but some of heredity, a male cousin having been in hospital in Sweden, but recovered; this is probably 2nd attack; seems to have had melancholia before at age of 12 or 13 years; of short duration then; first symptoms of this attack were manifested 6 or 7 years ago; by depression (same as now): disease appears to be stationary; there are, however, rational intervals, not regular, but during days. Derangement is now shown by troubling herself about her salvation; she thinks she cannot be saved & worries about religious matters. Tried to hang herself but did not succeed. Has neither disposition to injure others, nor filthy nor destructive; has had no severe disease or injury to head; nor has she been restrained or confined, nor under medical treatment. Cause of disease is perhaps heredity; homesickness & religious impressions as well. —

On personal examination, she is very depressed, crying & always coming back to the idea of "going back to Sweden", and not realizing her condition. "She did not think she could be saved"; "was not sick"; cried passionately & begged to be helped so she would not be taken to the asylum of which she has great dread: appearance & manner were depressed & full of anguish. She is troubled with sleeplessness & worry; wanders about in an excited manner, but, when occupied, will sit still & peaceful. —

July 21 July 21/93. On admission, seemed very much excited & disturbed; continually crying, and appearing afraid. Transf. to B2. —

" " Body was in clean condition. No bruises or marks of injury

" 22 Certified most of the day. Very restless. Appetite poor. Bowels moved. Temp 98.6 - P 84 R 18. Slept 4½ hrs. Very restless, sitting up in bed part of the time.

" 23 Appetite poor. Very restless at night, crying some of the time; will awake 24th. Slept 5½ hrs. Restless and cried at times.

" 25 Appetite poor. Tidy in habits. Slept 4 hrs. Was quiet when awake.

" 26 Very restless. Asked for sleeping dose. Same was at 11 PM. Slept 6 hrs.

" 27 Somewhat more quiet. Tidy in her habits. Cries at times. Says she is homesick. Must quiet and restful at night.

" 28 More quiet on the ward. Appetite fair. Has improved. Awake most of the night.

Aug 1 - Very quiet and slept well all night.

" 3 Rested well during last night. Quiet on the ward. Neat and clean.

" 4 Wants to go home to her Mother in the Old Country. Talks very well. Pleasant and quiet. Neat and clean.

General Notes. July 21 93. Admitted on ward. July 31 93. Appetite somewhat improved, still only fair. More quiet on ward. Tidy in habits. Aug 5 93. Complains of constipation. Moved to Infirm.

Aug 12 93. Visited by friends. Aug 23. 93. Appetite poor. Health not very good. Complained of her stomach very often, was melancholy & cried part of the time. Seems a little unreasonable.

Aug 31 93. Past week has become more reasonable & contented. Friends came took her home Aug 31 93.

Discharged

from Page 60.

Personal and Medical History of Isabella M. Holt.

1894 July 22 Ind in from today. July 23 94 Transf to C4 Aug 2 94 Appetite good usually. Sleeps quite well. Habits tidy. Destructive evening. Bowels constipated. Goes riding & walking. Violent at times. Sept 27 94. Appetite good usually. Sleeps quite well. Habits tidy. Works on the ward occasionally. Goes riding and walking. Bowels regular. Oct 31 94 The same.

Nov 30 94 - Habits very untidy. Appetite good. Goes riding and walking. Bowels regular. Jany 31 95 Noisy at times - Appetite good. Habits tidy at times. Is destructive + violent. Bowels constipated. Febry 28 95 Sleeps well. Habits clean + the same as polite ward. March 30 95 Appetite good. Sleeps well. Violent at times. Goes riding & walking. Habits clean usually. April 27 95 About the same. May 22 95 Appetite good. Sleeps well. Goes riding & walking. Habits clean. Bowels constipated. June 30 Quiet most of time. Eats + sleeps well. Usually clean. Goes riding + walking.

July 23 No change. Trans to B 2. Aug 16 Violent. Fought on D R. Aug 17 Trans to C 4.

Aug 30 Eats + sleeps well. Habits clean. Goes riding + walking. Bowels regular. Sept 30 No change.

Oct 6 Sick in bed. Appetite poor. Sleeps quite well. Bowels constipated. Oct 7 Refuses to take medicine. Oct 8. Cathartic + enema given. Bowels moved freely.

Oct 11 Seems better. Sat up part of the day. Oct 15 Seems better. Sat up on ward all day. Appetite poor. Oct 30. Appetite quite good. Sleep well. Habits clean. Goes riding + walking. Bowels usually constipated. Nov 14 no change.

1895 Trans to B 2. Jan 1 Mutatis. Jan 18 Fought patients. Jan 20 Mutatis. - Appetite poor. Bowels usually regular. - Sleeps well. - Goes walking + riding.

Jan 28 Trans to C 4. Feb 27 Eats + sleeps quite well. - Bowels regular. - occasionally violent. Mar. 30 Appetite poor usually. Habits dirty: Is violent + destructive at times: Bowels constipated: Goes riding + walking: Apr 25 Mutatis. Very cross + violent: Bowels constipated.

July 2 Summary Nurse's Notes by Dr. E.L. Phelps: Quiet most of time: occasionally fights: Appetite usually good: Has delusions: goes riding + walking: Oct 96 Visited by friends: no special change. Jan 97 Quite pale + frail physical condition some what impaired: Appetite usually good: does not work: usually quiet but at times violent: very incoherent: May 97 No change: July 97 Habits clean: usually: works some on ward at times: eats + sleeps well. Reported by Dr. R.M. Phelps Sept. 18 97 Frail health fairly good: always rather dull + sullen in appearance, but very seldom becomes violent: July 24 98 Visited by mother + sister: Sept. 30. 98 Transferred to B 3: Feb. 24 99 Patient is stubborn: Several times has struck others + has tried to escape: For the most part, however, she is quiet + sullen.

1899 Mar. 1 (by Dr. Reed) Dr. Appetite fair: bowels regular: untidy in habits: fairly neat in appearance: takes out door exercise: usually quiet: inclined to be violent + sometimes attacks nurses + patients without slightest provocation: Has many delusions: will not converse but often talks + uses profane language. Sept. 1 - Feb 24 1900 Dec Expresses many delusions: Appetite good: Bowels regular: Today became violent: Knocked Mrs. Murphy to floor: pulled her hair + struck her. Trans. to C 3. Jan. 10 Quiet: Eats + sleeps well: Takes out door exercise. Jan 12. Had pain in side. Jan 13 Sick in bed: Temp 107°. Pulse 100: P.M. Temp 105°. Jan 14. Trans to Infirmary. Feb 8 Well again. Appetite good: Sleeps well: Seems rather depressed: Still in bed.

See Folio 150.

Personal and Medical History of Eva Lorbeski

BABBERT, PIOLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3424.
Residence, Winona, Minn.
Date Admission, 22nd July 1893.
Admitted by, Dr. Kilbourne Hour, 1
How Sent, A. L. Buck, Jof P.
Sex, Female
Age, 35 Years
Civil Condition, Married
Children, Six
Age Youngest Child, 8 months
Occupation, Housewife (Stu
Degree Education, Limited
Profession Religion, Catholic
Habits, Use some drink-Habit -
Nativity, Bohemia (Parents also born there) -
Physicians Committing, D/A. Stewart and L.A. Kelly
Correspondents, V. Lorbeski (Husband).
313 Chatfields St. Winona, Minn
Family Physician Dr A Stewart



No. for Year, 336.
Insane Relatives, None
Cause Exciting, Worry about her family -
Cause Predisposing, not given
Form, Acute Agitated Melancholia
Accompanying Bodily Disorder, none noted
Suicidal or Not, Suicidal
Date of this Attack, 14th May 1893.
Duration, about 10 weeks -
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, about 35
Time of Leaving, Feb. 8th '94
Time in Hospital, 6 mo. 17 ds.
Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused - and
Quick or Sluggish, very much agi-
MEMORY: tated
Past Events, Moaning constantly
Recent Events, Will not talk of
Special Subjects, answer any
PERCEPTIVITY: questions -
Alert or Dull, Resists all effort
Correct or Illusive, & do anything
REASONING POWER: with Gen
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Very much depressed
DELUSIONS: Is constantly suicidal
Systematized or Not, Swallows pins
Special Subjects, etc.
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Eva Lorbeski

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2 3/4 in WEIGHT, 95 NUTRITION, Somewhat impaired
WOUNDS OR ABNORMALITIES, Cut on right wrist where she tried to suicide
TONGUE, Tremors, Coatings, Considerable Promptness Movement,
PUPILS, Equality, Equal Size, Dilated
Response Light, Can not test Accommodation, Not tested
SIGHT, Seems good
HEARING, Seems good
COORDINATION, Arms, Seems good but will not stand special tests
Legs,
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Normal
Other Reflexes,
ARTICULATION, Hesitating, Will not Slurred, talk
FACIAL EXPRESSION, Distressed
SENSIBILITY,
HEART, Normal Rounds
LUNGS, Resp very shallow
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless, Careless
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Very Poor Irregular,
PULSE, 90 RESP., as high as 30 at times 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 Eva Lorbeski

EGBERT, FIDLAR & BYAMBERS, DAVENPORT, IOWA.

1893 Was brought here by deputy Sheriff J. D. Gay, attended by V. Lorbeski, husband & Mrs Gardener, with the following history. No history of ans augunity known; no insane relatives. This is first-attack; first symptoms manifesting themselves 14th May 1893, by fright, sleeplessness & spasms. Disease appears to be increasing; no rational intervals. Derangement now shown by desire & tries away and to injure herself (once did so with a butcher knife). Is suicidal; tried to cut her wrists; propensity is now active. Is not disposed to injure others. Tries to take off her clothes & gonaked. Has some filthy habit. Has not been subject to any severe disease or injury to head. Patient has been tied up in a room for about a month. Supposed cause of the disease is worry about her family. Has had no treatment, further than by sedatives & tonics. On personal examination, here is noticed great depression; a haggard look; a constant desire to go "somewhere". Is black & blued from falls & bruises. Will not talk; said "everyone let her get hurt". She did not know her age. Threw herself on the floor & tried to expose her person. Appearance & manner, depressed & restless.

July 22/93. On admission, is in very poor physical condition. Was put on B3.

Lidyer " " Pulse 84 R. 30 Quite dirty Bruises on back, head face and arms rabit most July 23 Has been quiet but difficult to keep in clothing on her Does not talk Appetite very poor Will not feed herself Slept 5 hrs during the night Rest of bed and restless when awake P84 R30 Tried to strangle herself

" 24 Temp 98.4 P86 R22 Slept two hrs Very restless while awake Held her in bed half an hour Tried to choke herself with a string

" 25 Appetite poor Will not feed herself Untidy in habits Will swallow pins or anything of the kind Tries to undress herself Slept 6½ hrs Restless while awake Held in bed ½ hr

" 27 Slept quietly in bed most of the night 28 Slept well

" 29 Very restless all day and at times she was very difficult to manage Was in bed and slept well all night.

" 30 Was visited by her husband, but would not talk to him Was up out of bed pounding on the door part of the night

Aug 1 Awake until 10 o'clock out of bed knocking on the door

" 2 In seclusion three hours In bed and slept most of the night

" 3 Very restless most of the time Has required constant watching and care Appetite is poor Bowels moved Slept about four hours

" 4 In bed and slept quietly all night.

" 11 Much more quiet Walks quietly around the hall Has a very distressed look Does not rest but always appears worried

General Notes: July 22.93. Admitted on ward. July 26.93. Visited by husband. July 30.93. Visited by husband, but would not talk to him. Does not seem to improve. Appetite very poor & will not feed herself & has to be held most of the time. July 28.93. Tried to strangle herself. Aug. 9.93 Slept 3 hrs, lying quietly in bed but did not sleep much during night. Aug. 10.93. Visited by husband & talked with him when he left was not satisfied to remain, wished to go home with him. Appetite good & feeds herself. Aug. 17 93 Visited by brother. Aug. 21.93. Seems to be improving, is somewhat brighter. Still very much depressed, talks but very little, standing most of the time on ward. Partly dressed herself this morning. Aug 23.93 Slept 2 hrs. quite noisy ½ hr while awake talking & pounding on the door. Aug 24 93 Visited by husband. Slept about 3 hrs this morning Noisy 1 hr. while awake. Aug 25. Slept 4 hrs. Very noisy for 2 hrs, talking & pounding on the door. Aug 26.93 Slept 3 hrs. Extremly noisy for 1 hour. Aug 27 93 Visited by husband. Aug. 29 93. Appetite fair, otherwise about the same. Sept 2 93 Visited by father & mother & friend. Talked to them. Sept. 3 93 Visited by husband. Very restless all night. Did not sleep any. Sept. 6 93 Very restless awake most of the night. Sept. 9 93 Very restless most of night, did not sleep any. Sept 30 93 Appetite good. Does not talk any, stands around most of the time in a rather a listless way. Oct. 6 93 Visited by brother. Oct. 10 93 Complains of headache Gave med as directed. Oct. 12 93 Improving. Gaining in flesh. Very quiet.

1893 Nov. 30 93 Visited by husband. Was very anxious to go home with him but as she still refuses to talk to us, she decided not to take her. Nov. 27 93 Does not seem quite so well & wants about home & is very anxious to go home. Nov. 29 93 Appetite good. Neat in habits. Does not talk very much. Will answer a question occasionally. Anxious to go home. Rests well at nights. Has gained in flesh. Dec. 12 93. Appetite good Very quiet in behavior. Very seldom that answers a question. Rests well at night. Dec. 31 93. About the same. Jany 31 94 Continues about the same. Very quiet. Feby 8 94 Visited by husband & seemed to enjoy his presence very much. Talked quite rationally to him, also talking during afternoon in ward with some of the ladies. Feb 8th 6 P.M. Returned home with husband. Had refused to talk up to this time, when she smiled and brightened up a good deal. Was very anxious to go home, she had gained in flesh. Looked much better but was quite not well mentally.

Personal and Medical History of Eva Lorbeski.

Personal and Medical History of Sarah Whalen

GIBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA



Whole No. 3425.
Residence, Winona, Minnesota
Date Admission, 22nd July 1893.
Admitted by, Dr. Kilbourne Hour, 11.
How Sent, A.S. Buck, Jail, Winona
Sex, Female
Age, 77
Civil Condition, Widowed
Children, Lost 4 children, all of the
Age Youngest Child,
Occupation, Housewife (husband
Degree Education, None
Profession Religion, Catholic
Habits, Not intemperate, so far as known.
Nativity, of herself & Parents, Ireland
Physicians Committing, Franklin Staples & Edward D. Keyes
Correspondents, Notify Sheriff if anything happens.

for Year, 337.
ne Relatives, Not known if any
se Exciting, Probably Central nervous degeneration
se Predisposing,
n, Senile Dementia
mpanying Bodily Disorder, Lost right eye from Cataract also has cataract in left eye.
idal or Not, Not, but has been closely watched.
e of this Attack, 2 years ago or earlier
ation, about 2 years.
of Attack, 1st
of Admissions, 1
First Attack, about 70.
Time of Leaving, Apr. 26, 1899
Time in Hospital, 5 yr. 9m. 4d.
Result, Died - Cancer of uterus.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Poor
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Poor
Correct or Illusive, Illusive
REASONING POWER:
Ordinary Subjects, Impaired
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Demented and weak minded

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Restless noisy at times
Depressed,
DELUSIONS:
Systematized or Not, Many
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Very talkative
Voluble or Reticent, and noisy
Incoherent Delusive ideas

Personal and Medical History of Sarah Whalen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft WEIGHT, 85 lbs NUTRITION, Poor
WOUNDS OR ABNORMALITIES, Some bruises on limbs and face
TONGUE, Tremors, [illegible] Coatings, Sluggish Promptness Movement,
PUPILS, Equality, Blind entirely in Size, right eye Cataract in left
Response Light, Accommodation,
SIGHT, Blind

Case No. 3425. Sarah Whalen. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

REFLEXES, Patellar, 2 to 3 — Equal
Other Reflexes,
ARTICULATION, Hesitating, Patter plurred Slurred,
FACIAL EXPRESSION, Normal aside from blindness
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Respiration
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Dirty Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 78 Atheroma of arteries 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 fever
Brothers or Sisters,

Personal and Medical History of Sarah Whalen

GEBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA.



Whole No. 3425.
Residence, Winona Minnesota
Date Admission, 22nd July 1893.
Admitted by, D. Kelbourne Hour, 11.
How Sent, N.S. Duct, Jef'S. Winona
Sex, Female
Age, 77
Civil Condition, Widowed
Children, Lost 4 Children, all of the
Age Youngest Child,
Occupation, Housewife (husband
Degree Education, None
Profession Religion, Catholic
Habits, Not intemperate so far as known.
Nativity, of herself & Parents, Ireland
Physicians Committing, Franklin Staples & Edward D. Keyes
Correspondents, Notify Sheriff of anything happens.

for Year, 33rd.
ne Relatives, Not known if any
se Exciting, probably Central nervous degeneration
se Predisposing,
n, Senile Dementia
Lost right Eye from Cataract
mpanying Bodily Disorder, also has cataract in left Eye.
idal or Not, Not; but has been closely watched.

Time of Leaving,
Time in Hospital, 5 yr. 9 m. 4 d.
Result, Died - Cancer of uterus.

EXAMINATION ON ADMISSION.
MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Poor
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Poor
Correct or Illusive, Illusive
REASONING POWER:
Ordinary Subjects, Impaired
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Demented and weak minded

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Rather noisy at times
Depressed,
DELUSIONS:
Systematized or Not, Many.
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Very talkative
Voluble or Reticent, and noisy
Incoherent Deluded ideas

Personal and Medical History of Sarah Whalen

EXAMINATION ON ADMISSION.—(Continued.)
PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft WEIGHT, 86 lbs NUTRITION, Poor
WOUNDS OR ABNORMALITIES, Some bruises on limbs and face
TONGUE, Tremors, [illegible] Coatings, Sluggish Promptness Movement,
PUPILS, Equality, Blind entirely in Size, right eye Cataract in left
Response Light, Accommodation,
SIGHT, Blind
HEARING, Impaired considerably
COORDINATION, Arms, Fairly good
Legs,
TREMORS, Hands, Slight Tongue,
Facial Muscles, General,
REFLEXES, Patellar, 2 to 3 — Equal
Other Reflexes,
ARTICULATION, Hesitating, Rather slurred Slurred,
FACIAL EXPRESSION, Normal, aside from blindness
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Respiration
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Dirty Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 78 Atheroma of arteries 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 fever
Brothers or Sisters,

Personal and Medical History of Sarah Whalen.

EARLEY, FIGLAN & CHAMBERS, DAVENPORT, IOWA

1893 Brought here by Deputy-Sheriff J. F. Gay, attended by Mr. Gardner, with following history of case. This is 1st attack; Chronic for 2 years or more; has been irritable & talkative & has had hallucinations. Disease is slowly increasing; is reasonable on sound subjects, but wanders off in imaginary conversation, and becomes excited & wild. Derangement now shown by the belief of imaginary wrongs from various people; being poisoned &c. Will throw chairs &c at imaginary people, when excited; has frequently done this. She not attempted suicide, but has been closely watched. Indulges food & filthy & destructive habits. Not known of she has any insane relations or not. Has had no severe disease &c. She has been confined in her room more & less closely & always watched for the past year. Probably central nervous degeneration the cause of the disease. Formerly was under treatment; no benefit. The past year, has had no treatment. On personal examination, it is found the lost right Eye from Cataract; also has Cataract in left Eye. She talked continually & incoherently with imaginary people: became excited; clenched her fist & very vehement. Appearance & manner, those of an old woman in rather feeble health, given up to "insane delusions".

July 22/93. On admission, put on B3. Patient is in poor physical condition.

July 23 Pulse 78 R 18. Very dirty. Bruise on left side of face & blind
" 23 Very quiet on the ward. Very thankful for the care given her
" 24 Appetite good. Feeds herself. After food is placed on her plate
Bowels not moved. Pulse 78 Temp 98.4 R 18. Very quiet. Was struck on the head by another patient. Moved to B3
" 25 Behavior quiet and good. Clean in habits. Slept well all night
" 26 Was talking a good deal during day. Did not want to go to bed. Said rather she was commit to for life
" 28 Was scalding a good deal. Did not like to get up this morning. Went to bed without any trouble.
" 29 Was scalding a good deal of the day. Ate no dinner
" 30 Was sick on bed all day. Had diarrhoea. Drank a glass of milk for her dinner. Was scalding most of the afternoon.
" 31 Was up all day. Walked about a good deal. Drank a glass of milk for her dinner and mutton for supper.
Aug 1st Was quiet most of the day. Went to bed without any trouble.
" 2 Was very noisy all day. Appetite poor.
" 3 Was scalding most of the day. Did not eat anything all day. Did not want to go to bed. Aug 4 Complains of being sick. Took a glass of milk for breakfast. Ate no dinner but ate supper.
" 5 Was scalding most of the day. Ate no breakfast nor dinner. Refused to go to bed. Very pale and delicate looking.
" 10 Fed by tube today. Noisy in talk.
" 11 Was pushed on full dinner on the floor fracturing her left hip. Sent to sick ward and put to bed.

General Notes July 22. 93. Admitted on Ward.

Personal and Medical History of Sarah Whalen.

July 24 93. Moved to B3. July 29 93. Appetite good. Clean in habits, almost blind, was struck on the head with shoe, scolds a great deal, talk incoherent, sick in bed 3 days. Moved to C 2 Aug. 12th. Oct 4 93. Sat up 4 hours. Very noisy. Appetite good. Oct 6 93. Sat up all day less noisy. In bed all the month of September. Oct 12 93. Is up part of the time, has good appetite. Is very noisy at times. She is quite helpless, can not walk without assistance. See nurses record over

Oct 14 93. From C3 to C3. Oct 30 93. Appetite good. Behavior quite noisy at times. Is very helpless and troublesome. Can not walk without assistance & will crawl all over. Has to put to bed and it is hard to do anything with her, as she tries to bite & snaps. Has a blood eye, hurt by another lady.

Nov 30 93. Appetite good. Behavior noisy. Very helpless and troublesome. Is very hard to dress & undress as she snaps & tries to bite.

Dec 31 Dec 31/93. No change to note in patients behavior or condition.

1894 Jan 31 Jany 31/94. Appetite good. Sleeps well, at night; by day, is very noisy, talking nearly all the time. Does not walk alone; has to be helped around. Is very resistive. Habits are clean.

Feb 15/94 Feby 15/94. No material change. Feb 27/94. Did not eat anything all day; has been very violent and noisy. Fell with chair and bruised her head. Is helpless & has to be assisted from one place to another. Sleeps fairly.

Mar 1 March 1/94. Appetite good. Is very noisy; talking & swearing most of the time. Strikes other patients. -

" 12 March 12/94. Patient was committed here under the "Law of 1893" recently declared unconstitutional; she was, today, Taken out and Returned, under "new warrant" from Olmsted County.

April 1894 Behavior quite noisy. Appetite fair. July 1 94. Behavior noisy at times. Appetite fair. Sleeps quite well. Has delusions. Habits clean. July 19 94. Fell off bed & bruised wrist. Aug 94. Behavior very noisy. Untidy at times. Appetite fair. Does not sleep very well. Sits in chair all day. Bowels regular. Complains of pain in head. Aug 21 94. Transft to B3.

Sept 18 94. Appetite good. Clean in habits. Extremely noisy during the day. Resists when put to bed.

Oct 10 94. Visited by friends, talked coherently and recognized them. Oct 26 94. Appetite good. Untidy in appearance. Clean in habits. In behavior quite noisy during the day, still resists when put to bed.

Nov 29. 94. Appetite fair. Usually dirty in habits. Very untidy in appearance. In behavior quite noisy at times. Will resist. Gen. health good. Dec 27. 94. Appetite fairly good. Is very noisy. Does not sleep well at times. Is occasionally dirty in habits. Talks incoherently. Jany 28. 95. General health good. Appetite good. Sleeps well. Bowels regular. Very noisy during the day & night. Feb 28. 95. Appetite good. ~~Is very noisy at times~~. Noisy at times. Gen. health good. Mch 29. 95. Extremely noisy during the day. Appetite good. Bowels reg. Apr 26. 95. Gen. health good. About the same in behavior.

May 30. 95. No change. June 27. Very noisy during day. Gen. health good. July 31. Appetite good. Bowels regular. Dirty in habits. Very noisy at times. Aug 29. Gen. health good. Appetite good. Dirty. Incoherent. Sept 30. Extremely noisy at times. Appetite fairly good. Dirty in habits. Talks incoherently. Oct 28. General health good. Quite restless during the day. Sleeps well. Nov 29. Eat & sleeps well. Very noisy at times. Bowels constipated.

1896 Jan 30. Awake nine hours. Talking all night. Feb 29. General health good. Appetite fair. Talks frequently & incoherently. Habits occasionally dirty. Very noisy & hard to manage.

Mar 28. Patient is old & feeble. Very noisy most of time. Appetite good. Bowels regular. Tidy in habits. Leaves for B4. No change. May 3. Noisy 7 hrs. during night. Slept 2 hrs.

April 28

June Summary Nurse's Notes by Dr. E. D. Cheeps:- Extremely noisy at times. Appetite fair. Bowels regular. Sept 9. No change. Jan 97. Very noisy at times, especially when disturbed. Very dull & demented. Does not seem to realize anything. Appetite variable. Sits with shawl over head, most of time.

(See p. 136)

Personal and Medical History of Susanna Owen

EBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3428.
Residence, 570 - 10th Street, St. Paul
Date Admission, 28th July 1893.
Admitted by, D. Phelps Hour, 7 P.M.
How Sent, John. B. Olivier Jof P. Ramsey County
Sex, Female
Age, 28
Civil Condition, married
Children, Six
Age Youngest Child, 2 mos.
Occupation, Housewife (Husband, blacksmith).
Degree Education, Fair -
Profession Religion, Catholic
Habits, not stated
Nativity, United States (father + mother in Pennsylvania)
Physicians Committing, Arthur Sweeny + Arthur B. Jucker
Correspondents, Husband (Uriah Owen, 570, 10th St. St Paul.
Family Physcn. D. Justus Ohage. St Paul.

No. for Year, 340.
Insane Relatives, None
Cause Exciting, Disturbance of breasts; caking of milk.
Cause Predisposing, not given
Form, Acuta Mania
Accompanying Bodily Disorder, none noted
Suicidal or Not, not
Date of this Attack, probably recent
Duration, probably short
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, 28 years
Time of Leaving, Aug. 14" 93.
Time in Hospital, 16 days.
Result, Recovered.

EXAMINATION ON ADMISSION.

Examined Aug 8-1893

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear mind but confused in appearance
Quick or Sluggish, Quick

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

PERCEPTIVITY:
Alert or Dull, Alert - Dull at first
Correct or Illusive, Correct

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

GENERAL DESCRIPTIVE REMARKS:
Very quiet and sensible in mind and says she had Typhoid Fever several yrs ago - Her mental trouble came on suddenly

EMOTIONAL STATE:
Normal, Calm, Normal
Indifferent,
Exalted, Exalted at first
Depressed,

DELUSIONS: Had many at first
Systematized or Not, but some now
Special Subjects,
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent now
Voluble or Reticent, but incoherent at first

Personal and Medical History of Susanna Owen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 1in WEIGHT, 130 lbs NUTRITION, Good
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors None Coatings Slight Promptness Movement, Normal
PUPILS, Equality, Equal Size, Normal
Response Light, Good Accommodation, Good
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, None Tongue, None
Facial Muscles, None General, None
REFLEXES, Patellar, Normal + Equal
Other Reflexes,
ARTICULATION, Hesitating, Normal Slurred,
FACIAL EXPRESSION, Good
SENSIBILITY,
HEART, Normal
LUNGS, Normal Condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Constipated, Tendency to Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Good Poor, Irregular,
PULSE, 74 RESP., 18 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 always healthy
Father or Pat. Relations, Father died Myself
Brothers or Sisters,

Personal and Medical History of Susanna Dwer

1893 Was brought here by Deputy-Sheriff Courteau attended by Mrs Francoeur, with following history. Recently sent to City & County Hospital, St Paul; this is first attack (probably recent); demanded things that were unreasonable & claims God demanded her to do so. Disease appears to be increasing; no rational intervals; derangement is now manifested by her talking incessantly, incoherently, in a religious strain; prays frequently; converses with imaginary people in the room; apparently sees objects not present. Her talk is entirely disconnected, rambling & incoherent. She will not answer questions. Refuses food at times and must be fed with nasal tube. Is not disposed to injure others, nor suicidal, nor filthy nor destructive. No insane relations. Has not been subject to any severe disease &c. Has been restrained by a wrist strap, to keep her in bed. Supposed cause of the disease is disturbance of breasts, caking of milk in both breasts; (T of 103⅗ on 26th; 99⅖ on 27th). Has been treated by Quieting mixture R. Cannal. 3xd & Bromide, milk & Sherry. On personal examination, patient talks, without intermission, in a very disconnected way on religious topics, apparently oblivious of her surroundings and absorbed in her conversation. Is exalted, sleepless & talking to imaginary people. Says that God commands her to do the things she does; that she wants Bill to come; screams occasionally. Sits upon bed, talking continuously in a loud voice upon all subjects, without connection. Excited, exalted, screaming & gesticulating. Patient was confined 2 months ago, and began to have trouble with breasts about a week ago.

July 28 July 28/93. Patient is in fair condition. On admission, was put on B².

" " Temp 98. P. 72 R 18 Quite deaf. No bruises or marks of injury

" 29 Noisy and violent part of forenoon. Restless and very hard to care for. asks to have the black spots removed from the wall. Appetite poor. Drank four glasses of milk. Slept 3 hrs. Talking quite loudly at times. Put her in bed several times but she would not stay. Temp 98.4. P. 72. R 18

" 30 Quiet on the ward most of the day. Ate dinner and supper. Sunny bright. Slept 3 hrs. Talked and moaned some.

" 31 Is brighter this morning and asked if this was a "crazy house" and how long she had been here. Appetite fair and fed herself. Helped some in the dining room. Rested well during the night.

Aug 2 Very quiet and slept well all night.

" 3 Very quiet on the ward. Seemed to realize that she had been very sick and that her mind had not been right. Feels very grateful that she is better. Appetite good. Bowels are constipated. Gave a dose of salts. Rested well.

" 13 Complained of headache today. Gave dose of sedanna.

" 14 Husband came and took her home. She appeared very well mentally. Was confined 2 months.

Personal and Medical History of Bessie McTagert.

1894 June 4 appearance at times. Bowels regular. June 9 94 Has been noisy all day. July 2d 94 Been sick in bed the past 2 days, but is up about the ward again. July 17 94 Has become more quiet. Talks very sensibly. Her general health seems good. July 27 94 Very irritable, trifle with the Nails. Received some scratches on face & neck. Aug 5 94 Transfd to B² Aug 31 94 Appetite good. Very disagreeable. Untidy in appearance; spits on floor. Talks very profanely at times. Sept 10 94 Appetite good. Walks up and down hall. Uses obscene language. Spits on floor. Transfd to B³ Sept 17 94 Appetite quite good. Sleeps well. Noisy at times. Goes riding & walking. Bowels regular. Oct 31 94 Appetite quite good. Noisy and quarrelsome at night. Complains of all do reading her letters. Nov 30 94 Appetite good. Noisy at times. Habits clean. Bowels regular.

Dec 31 94. Very noisy at times. Habits dirty occasionally. Appetite quite usually. Complains of pain in abdomen. Bowels constipated.

Jan 15 95. No change. Transfd to B² Jany 31 95 Has been quite noisy the past few days. Habits dirty. Appetite good.

Feb 24 95. Very noisy most of day. Uses obscene language. Feb 28 95 Transfd to Stone ✠. Mch 23 95 Is not feeling well. Complains of pain in her chest. Respiration rapid. Seems to have a bad cold. Mch 24 95 Is feeling some better. Appetite fair. Clean & tidy in habits. Has for some time been quite noisy but excited, till the last few days when she has been more quiet. Talks incoherently and has delusions. Gen. health fair.

June 24 Appetite good. Clean & tidy. Very noisy at times. Talks incoherently & has delusions. Gen. health fairly good. Will not go sitting or walking. June 25 Went to bed this P. M. Complains of severe pain in stomach. Visited by nephew. June 26 Much better but still in bed. June 27 Up on ward today.

July 22 Taken sick during night with severe pain in stomach & nausea. July 24 Much better but still in bed.

July 28 Up on ward today. July 29 No change. July 30 Trans. to Fergus Falls.

Sarah Whalen

1897 (From p. 132)

Mar. No change: July 97 Eats & sleeps well: no mental change. (Cont'd by Dr. R M. Phelps)

Sept 15 Sits in chair most of time. Dresses herself: noisy but at times is quiet: General health not at all good: Mar. 5 98 Extremely noisy, sometimes obstinate: Oct 4 98 In bed: discharge of blood from uterus: Nov 29 Discharge still continues at times: Does not, however, appear to be suffering in general health. Behavior about as usual: Dec. 17 99 Raw upon Infirmary. General health not at all good altho' lies quietly in bed, & does not seem to fail in any way. Discharge still continues at times. (Cont. by Dr. A. W. Bell)

Mar. 7 1900 To Asy: Remains in bed: appetite very poor: bowels constipated: requires laxatives: Is weak & gradually failing, becoming sallow and emaciated

Apr. 7 1900 Died at 4:40 P.M.

Died

Personal and Medical History of Hannah Joice

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3429
Residence, St Paul, Minnesota
Date Admission, 28th July 1893.
Admitted by, Dr Phelps Hour, 7 PM.
How Sent, John. B. Olivier, Sof C. Ramsey County.
Sex, Female
Age, 29
Civil Condition, married
Children, 3 living
Age Youngest Child, 3 months old
Occupation, Housework; (husband a teamster).
Degree Education, Common public school
Profession Religion, Catholic
Habits, not stated
Nativity, Wisconsin (Parents, Ireland).
Physicians Committing, John. E. Sawyer & Alex. Donald
Correspondents, (Friend) Mrs Dond. 1116 Reaney St
Family Physcn. Alex. Donald. M. D. St Paul. - St Paul

No. for Year, 341.
Insane Relatives, None
Cause Exciting, overwork & bearing children
Cause Predisposing, not given
Form, Acute Mania
Accompanying Bodily Disorder, had typhoid fever 4 yrs ago
Suicidal or Not, not
Date of this Attack, July 24th 1893.
Duration, 3 or 4 days
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, 29.
Time of Leaving, Aug. 9th '93.
Time in Hospital, 11 ds.
Result, Recovered.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examnd Aug 8-1893 S.R. Phelps

MENTAL ACTIVITY:
Clear or Confused, Clear now but was confused at first
Quick or Sluggish,

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

PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct but was illusive

REASONING POWER:
Ordinary Subjects, Poor at first but good
Own Mental State, now
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Says has not had good health for the past six years had Typhoid Fever 4 yrs ago and has had several attacks since

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent,
Exalted, Was exalted
Depressed,

DELUSIONS: Had many at first after can
Systematized or Not,
Special Subjects, now remember
Transitory or Not, and left all about

HALLUCINATIONS Thinks Everything runs

ILLUSIONS: Clear now

CONVERSATION:
Coherent or Incoherent, Talks coherently now
Voluble or Reticent, but was incoherent and excitable at first

Personal and Medical History of Hannah Joice

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 1/2 in WEIGHT, 123 lbs Formerly 136 NUTRITION, Fair
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, None Coatings, None Promptness Movement, Normal
PUPILS, Equality, Left more dilated Size,
Response Light, Normal Accommodation, Normal
SIGHT, Impaired slightly
HEARING, Impaired at times slightly
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, Very slight Tongue, None
Facial Muscles, None General, None
REFLEXES, Patellar, Equal
Other Reflexes,
ARTICULATION, Hesitating, Normal Slurred,
FACIAL EXPRESSION, Somewhat
SENSIBILITY,
HEART, Quick Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Normal Constipated, Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Good Poor, Irregular,
PULSE, 96 RESP., 22 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, Mother healthy and strong
Father or Pat. Relations, Father living and healthy
Brothers or Sisters, 2 Bros & 1 Sister all healthy

Personal and Medical History of Hannah Joyce

HERBERT, VICKAS & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy-Sheriff Courtean, attended by Mr. Joyce, with the following history. There is no history of consanguinity or heredity. This is the 1st attack, Symptoms appearing July 24th 1893, by belief that she is a Spiritual guide for the Earth. Disease appears increasing; very few rational intervals; do not occur at regular periods. Derangement now manifested in that she feels as if her life was mis-spent, and wants to reform herself & family. She does not pay much attention to house-work. Is not disposed to injure others, nor suicidal. But has filthy habits. Patient had Typhoid fever 4 years ago. She has not been restrained or confined. Supposed cause of the Disease is overwork & bearing Children. Internal medicines & tonics have been administered; no improvement. On personal Examination, it is found that she thinks she is a "Guiding Star"; will not bear to be crossed, becomes very angry on questioning & partially refuses to answer questions. She said "she was a Guiding Star" to keep the world along; she was not going to sin any more, nor let any one else sin." Refused to see the Examiners; wanted them put out; "had no business there"; would not answer questions. Patient was wild & delirious.

July 28 1893 Patient on admission, is found to be in fair physical condition. Was put on B2.

" " Temp 99.2. P. 84 R 18. Very dirty. Had bruises over right eye and on left leg. Right breast blood shed she complained of its being sore.

" 29 Very restless and noisy at times. Violent and in delusion for a part of the night. Temp 97. P 78 R 18

" 30 Seems brighter. Very quiet most of the day. After dinner and supper. Tidy in habits. Quiet and slept well most of the night.

" 31 Very quiet and made many intelligent remarks to Nurse when she was and how she came here. Asked to get the keys to get out to go home. Appetite fair. Bowels moved this morning. Slept well.

Aug 1 Slept quietly all night. Complains of feeling sore all over. Feels very grateful for the care she has had here.

" 2 Appetite poor. Quiet on train. Aug 4. Visited by her sister.

" 9 Visited by husband and sister. Went home with her sister. Very much improved in her mental condition though a little excitable. Was quite noisy for an hour this morning but was quiet and well behaved at time of leaving.

from page 96

Personal and Medical History of Almira Welch.

1895 Mch 16 Appetite poor. Clean & tidy in habits. Talks incoherently and has delusions. Is quite noisy at times. Gen. health poor. Transf. to Inf. Ward. Mch 19. 95 Seems some. Transf. from Inf. Ward Apr 6 95 Appetite & general health better. No other change. Apr 20. 95. Has been working in laundry for some time. No other change.

May

July 11 Appetite good. Clean. Quite noisy. Incoherent & has delusions. Works in laundry. Gen. health good. Goes riding & walking. Aug 1st Has complained of not feeling well of late. Has not been to laundry.

Sept 30 Appetite good. Clean & tidy in habits. Extremely noisy at times. Talks incoherently & has delusions. Works in laundry. General health good. Goes riding & walking.

Nov 4 Appetite good. Tidy in appearance. Very noisy at times. Has delusions. Complains of headache. Works in laundry. Leave to C. Z. Nov 30. Appetite quite good. Complains of headache. no change. Dec 1 Complains of headache continually. Behavior quite noisy at times. Feb 29 Bowels constipated. Appetite good. Sleeps well. Very noisy at times. Helps in dining room. Goes riding & walking.

May 10 Appetite good. Bowels regular. Tidy in personal appearance. Has illusions. General health good. Works in laundry. May 11 Leave to Annex.

Summary Nurse's Notes by Dr. L. L. Phelps:- Appetite good: clean: noisy most of time on ward: cries a good deal: has many delusions works in laundry part of time: gen'l health good: Nov 96 Noisy & incoherent a good deal of time: works in laundry.

1896 Jan Scolds a good deal in a very demented way: May '97 No change: Aug '97 Lungs & heart examined: Resp. to expansion impaired: percussion note dull: breath sounds spasmodic in character: respiration shortened: rales heard over right lung anteriorly & posteriorly: Heart sounds are weak: pulse 84: weak. Month by Dr. R. M. Phelps

1897 Nov. 98 General health good: talks incoherently & in a rambling way: At times is very silly: works some in laundry: Dec 9 '98 Weight 153 lbs.: Sept 26 '98 Was transferred to her home in Michigan by the State Board, having been proven a resident of that State: Condition essentially unchanged in every respect.

Personal and Medical History of Matilda Klug

DEGEST, FIELAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3432.
Residence, Morristown, Minn. Township of Shieldsville, Rice Co.
Date Admission, 1st August 1893.
Admitted by, D. Phelps Hour, 4 PM.
How Sent, R. A. Mott, Jof C, Rice County
Sex, Female
Age, 29
Civil Condition, married
Children, 2
Age Youngest Child, six months
Occupation, Housewife (Husband, farmer).
Degree Education, Common School
Profession Religion, Lutheran
Habits, Not stated, (not intemperate)
Nativity, Germany (Parents also born there)
Physicians Committing, D. M. Cook & H. A. Lang
Correspondents, "none given in Papers"

No. for Year, 2.
Insane Relatives, None
Cause Exciting, Religious excitement
Cause Predisposing, not stated
Form,
Accompanying Bodily Disorder, none stated
Suicidal or Not, No
Date of this Attack, July 25th 1893
Duration, about a week
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, 29 -
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined Aug 9-1893 S. R. Phelps

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Can not test as she
Recent Events, will not talk
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,
REASONING POWER: Impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Very dull Resists and refuses to answer questions

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Indifferent
Exalted,
Depressed,
DELUSIONS: Can not determine
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Will not talk
Voluble or Reticent,

Personal and Medical History of Matilda Klug

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in WEIGHT, 118 lbs NUTRITION, Not very good
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Will not show Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Normal Accommodation, Normal
SIGHT, Seems Good
HEARING, Seems good
COORDINATION,

Case No. 3432. Matilda Klug File No. 9.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

Other Reflexes,
ARTICULATION, Hesitating, Will not talk Slurred,
FACIAL EXPRESSION, Dull Hangs head
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM. Some laceration of cervix Normal position
MENSTRUATION,
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 Matilda Klug

SEGERT, POLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3432.

Residence, Morristown Minn Township of Shieldsville, Rice Co.

Date Admission, 7th August 1893.

Admitted by, D. Phelps Hour, 4 PM.

How Sent, R A Mott, Sheriff, Rice County

Sex, Female

Age, 29

Civil Condition, married

Children, 2

Age Youngest Child, six months

Occupation, Housewife (Farm[illegible])

Degree Education, Common School

Profession Religion, Lutheran

Habits, Not stated, (work citizen)

Nativity, Germany (Parents also born

Physicians Committing, D M. Cook & Hemenway

Correspondents, [illegible]

No. for Year, 2.

Insane Relatives, None

Cause Exciting, Religious excitement

Cause Predisposing, not stated

Form,

Accompanying Bodily Disorder, None stated

Suicidal or Not, Not

Date of this Attack, July 25th 1893

Duration, about a week

No. of Attack, 1st

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined Aug 9 1893 D. S. Phelps

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Can not test as she

Recent Events, will not talk

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive,

REASONING POWER: Impaired

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Very dull Resists and refuses to answer questions

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Indifferent

Exalted,

Depressed,

DELUSIONS: Can not determine

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Will not talk

Voluble or Reticent,

Personal and Medical History of Matilda Klug

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in WEIGHT, 118 lbs NUTRITION, Nutrition good

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Will not show Coatings, Promptness Movement,

PUPILS, Equality, Equal Size, Normal

Response Light, Normal Accommodation, Normal

SIGHT, Seems good

HEARING, Seems good

COORDINATION, Arms, Seems good

Legs, Seems good

TREMORS, Hands, None Tongue,

Facial Muscles, None General,

REFLEXES, Patellar, Equal

Other Reflexes,

ARTICULATION, Hesitating, Will not talk Slurred,

FACIAL EXPRESSION, Dull - Hangs head

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Seem in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM. Some laceration of cervix Normal position

MENSTRUATION,

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 Matilda Klug

LEIGHT, FOGLER & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Sheriff Stewart, attended by John Klug & Emma Dahlke, with the following history. There is no history of consanguinity or heredity. This is first attack, first symptoms appearing July 25th; "did not know her own child"; runs away from home. Disease appears to be increasing; no rational intervals. Derangement is now shown as religious matters; repeating passages of Bible; advising others to be good. Is disposed to injure others; and also to filthy and destructive habits. Is not suicidal. Has been under constant watch for a week. Supposed Cause of the disease is religious excitement; partook of the has been under treatment. On personal Examination, Complains of headache & ringing in ears, and "says she is sick in the head"; answered some questions Correctly, while others, equally simple, she would not or could not answer. She frequently tried to leave the room or office, and had to be restrained. Appearance & manner quiet.

Aug 1 Aug 1/93. On admission, found in fair physical condition. Respiration B[r]

" " Temp 98.4. Pulse 84 & R 18. Very dirty. No injuries

" 2 Runs and noisy and violent part of the time. Tries to get the keys. Appetite poor. Slept six hours last night. Noisy and restless while awake. Sleeping dress was required. Temp 98.4 P 84 R 18.

" 3 Quiet and slept most of the night

" 4 Quiet most of the day. Untidy in habits. Will not feed herself. Slept 6 hrs. Out of bed and talking part of the time

" 5 Was quiet and slept well all night

" 7 Slept about 5½ hrs. Restless while awake. Came out on the hall once. Quiet most this morning. Sang for half an hour

" 10 Very quiet most of the day. Dresses & talking. Untidy in habits. Appetite poor. Eats butter and fat times. Feeds herself. Will not dress herself nor undress at bed time. Very restless 3 hrs during night

" 13 Restless 2 hrs. Out of bed and singing part of the time

" 14 During the day & early quiet. At night slept most of the time

General Notes: Aug 1 93. Admitted on ward. Aug 17 93. Fighting & also destroying & tearing clothing. Aug 19 93 Fighting. Aug 21. 93. Fighting & destructive. Aug 22 93. Fighting & destroying clothing. Aug 29. Does not seem to improve very much, at times very noisy & destructive, has to be kept in the lower bay all the time. Aug 30 & 31. 93. Fighting & extremely noisy. In seclusion 10 hrs. Aug 31. 93. Very noisy, gave sleeping dose. Sept 2 93 Fighting & in seclusion. Has to be fed in dining room & she throws dishes when in the dining room. Sept 3. 93 Sleeping 4 hrs, quite noisy ½ hr. while awake. Sept. 6 93 Very much disturbed & fighting. Gave quieting dose as dir. & was quiet shortly after. Sept 22 93 More quiet on ward. Does not fight so very often.

Sept. 30. 93 Appetite good but does not eat in the dining room as she throws dishes & it is not safe for the other ladies. Very untidy about herself in appearance & very destructive at times. In seclusion 3 hrs.

Oct. 10 93 Appetite good, but seems to be failing. Put on tonic. Visited by friend. Oct 31 93 Appetite good. Takes med at times without any trouble. Not very tidy about self. In seclusion 21 hrs during month.

Nov. 7 93. Visited by friend Nov 16 93 Fighting. Nov 19 93 Fighting. Nov 29 93 Appetite good most of the time. At times very noisy & fighting. Has to be watched all the time. Very destructive to

Personal and Medical History of Mathilda Klug.

1893 clothing, when not watched & destroys things on ward if not kept in lower bay. Gets her room very untidy, will not keep her hair in order at any time. Rests well at nights. Does not talk English talks German only. In seclusion 36 hrs during month. Jany 14 94 Received on C[2]. Appetite very poor, sleeps well, bowels moved freely, stool was of a dark greenish color sometimes was very much better on the 19th inst. & on the 12th of January 94 was upon ward (See nurses record book)

Dec 14 Appetite fair, at times. Continues very noisy; also, at times very untidy and destructive; has to be kept in lower bay & watched all the time. Was out of bed several times last night and getting into bed with Wm Neuston. -

" 13 Slept none during the night. Dec 13/93. Rested quite well last night. Was crying for ½ an hour, this morning.

" 16/93 Dec 16/93. Awake, out of bed frequently and lying on the floor; slept none last night. Dec 19/93. Was out of bed 3 times, during the night and was awake from 2 A.M. Dec 21/93. Out of bed & very restless most of the night; slept but 2 hours. Dec 22/93. Was up, out of bed last night, pounding the door and quite noisy, talking 4½ hours, restless till 10.30 P.M. Was also out of bed from 4 A.M. & noisy; screaming, at times. Dec 29/93. Was today visited by sisters; would not talk with them. Was restless about 4 hours, during the night; also noisy.

" 31 Dec 31/93. Was restless & out of bed 3 hours, last night; slightly noisy for about ½ an hour. Was put in seclusion for 4 hours, today.

1894 Jan 7 Jan 7/94. Slept but 2 hours, the first part of last night; was out of bed several times during the night.

" 8 Complains today of bowels troubling her - medicine given as directed. Jan 8/94. Bowels in about the same condition. Was out of bed several times, and standing at the heater, quite noisy for an hour at 3 A.M.

" 11 Jan 11/94. Was out of bed for an hour or so last night, about 3.30 A.M. Was thus restless until morning.

" 13 Jan 13/94. Seemed quite feeble today. Bowels about the same. Medicine given as directed. Circulation very poor - Was put to bed. Was given dose of brandy, and hot water also hot sand bag applied. Pulse very weak. T. 102 4/5. (Was out of bed once, at 1 A.M. last night; very restless, latter part of night; slept but 4 hours; medicine as directed - Pulse 68. T 100 -) Jan 14/94. Was, today, transferred to C[2] and put to bed. Jan 20/94. During past week or so, patient has been suffering from an attack of dysentery - Has improved & was today moved back to B[1]. Jan 31/94. Appetite fair. In other respects, about as usual. Was in seclusion 2 hours, today.

Feb 14 Feby 14/94. Was today visited by her husband, and, by him, taken home.

Feb 16 Feb 16/94. Was, today, returned by her husband, he finding it impossible to manage her at home. She therefore comes back this afternoon under new "Commitment papers".

Feby 16. 94 Rec'd on ward. Feby 19. 94 Filthy in habits. Feby 21 94 Restless from 9 - 11.30 P.M. Untidy in habits. Feby 23 94 Restless 11.30 P.M. Awake at 4 A.M. out of bed twice. Feby 25 94 Out of bed 9 P.M. Restless & noisy till 10.30 P.M. Feby 26 94 Appetite good. Very destructive to clothing at times. Very filthy in habits most of the time. Does not talk English. Seems to be gaining in flesh. Feby 27 94 Restless & out of Bed. Destructive to clothing & very filthy. Feby 28. 94. Awake at 2 A.M. & quite noisy. Mch 2 94 Awake at 4 A.M. out of bed quite noisy singing. March 4 94 Restless out of bed. Filthy in habits & habits. Mch 7 94 Restless & out of bed 11 P.M. Filthy in habits. Mch 13 94 Restless quite noisy 9.30 P.M. Talking. Very untidy. Mch 13 94 Fighting. Mch 15. Ditto. Mch 16 94 Awake, slightly noisy, singing part of 3 A.M. Mch 29 94 No change. Mch 31 94. Out of bed & noisy from 9.30 till 11 P.M. April 1 94 Out of Bed Restless from 3 A.M. Habits untidy. April 9 94 Violent. April 13 94 Restless since 3 A.M. out of bed & quite noisy ½ hr. April 15 94 Out of bed & quite noisy 1 hr. 9 P.M. April 17 94 Fighting. Put in seclusion. April 23 94 Out of bed & quite noisy 1 hr. Sleeping dose 10.15 P.M. Rested well since 11.30 P.M. April 24 94 Threw a Cup in dining room & cut Mrs Standish slightly on forehead. May 3 94

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Personal and Medical History of Mary Griese

HERBERT, FISLER & CHAMBERS, DAVENPORT, IOWA



Whole No. 3435.
Residence, Muscatine, Minn
Date Admission, 5th August
Admitted by, P. Kilbourne Hour, 1
How Sent, H. L. Buck, Jof P. [illegible]
Sex, female
Age, 51 Years
Civil Condition, married
Children, Six
Age Youngest Child, Eleven years
Occupation, Housewife
Degree Education, good (in Ge[illegible]
Profession Religion, not a church member
Habits, not intemperate
Nativity, Germany (parents also born there)
Physicians Committing, G. L. Gates & Thos. A. Purce
Correspondents (Husband) August Griese
417 - East King Street

No. for Year, 5
Insane Relatives, none
Cause Exciting, not known
Cause Predisposing, previous attack
Form,
Accompanying Bodily Disorder, passing change of life
Suicidal or Not, not
Date of this Attack, 3 months since
Duration, about 2 months
No. of Attack, 2nd (probably) -
No. of Admissions, 2nd
Age First Attack, 44 years.
Time of Leaving, Feb. 23rd '94
Time in Hospital, 5 mos. 18 ds.
Result, Imp.

Discharged from the asylum April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Examined Aug 9- 1893 S. L. Philpot

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Seems fair
Recent Events,
Special Subjects,

PERCEPTIVITY Fairly good
Alert or Dull,
Correct or Illusive,

REASONING POWER Impaired
Ordinary Subjects,
Own Mental State, Does not realize that
Special Subjects, is anything the matter

GENERAL DESCRIPTIVE REMARKS:
Sits quietly on a bench and says nothing unless addressed. Rather dull Looks natural

EMOTIONAL STATE:
Normal, Calm, Calm and somewhat
Indifferent, indifferent
Exalted,
Depressed,

DELUSIONS: None determined
Systematized or Not,
Special Subjects,
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Talks coherently
Coherent or Incoherent, When addressed
Voluble or Reticent,

Personal and Medical History of Mary Griese

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 4½ in WEIGHT, 152 lbs NUTRITION, Good
WOUNDS OR ABNORMALITIES Face very dark almost a jaundice hue
TONGUE, Tremors, None Coatings, Pale Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Normal Accommodation, Normal
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, None Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Equal about 5
Other Reflexes,
ARTICULATION, Hesitating Hesitating Slurred,
FACIAL EXPRESSION, Dull
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., Nov 25 '95. Uterus in position. Some laceration. Hyperaemia of vaginal walls & cervix. Bleeds on touch. Endometritis & foul discharge
MENSTRUATION, ceased
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, clean Careless,
BOWELS, Normal, Normal Constipated, Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Good Poor, Irregular,
PULSE, 74 RESP., 20 TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 2 mos 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 Mary Griese

EBERT, FIGLAR & SCHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Sheriff Fay, attended by her Son, Robert Griese, with following history. There is no history of consanguinity or heredity. This is 2nd attack, (was in this (Rochester) Hospital for 1 year & 3 months, 1886-7). First symptoms of this attack were manifested 2 months ago, by trouble with neighbors. Disease appears to be stationery, but there are rational intervals, at irregular periods. Derangement is now shown by dislike to certain neighbors, the sight of whom makes her intensely excited. Is disposed to injure others. Is neither suicidal nor filthy nor destructive. Has shown violent temper, at times. Neither she nor her parents ever addicted to intemperance. Patient is now passing the change of life. Supposed cause of the disease is not known. —

On personal examination, she appears sane in every subject except those referring to her neighbors. — Says that one of her neighbors wrongs her & she wants to go to the Asylum at Rochester. Was perfectly quiet during examination. Appearance normal, except an excited look in the eyes. This subject, at times, is an uncontrolable temper & at times, violent; throws stones & thinks Jesuits. She threw a stone at an infant.

Aug 5 Aug 5/93. On admission, is found to be in good physical condition (apparently). Was put on T3rd — Patient was here before (See Vol 7. No 1165) from May 18/86 to Sept 6/87. During her stay, at that time, she was, as a rule, quiet & well-behaved, though subject to short periods of excitement; was very deluded. Worked well in the kitchen, for a while, & afterward in the sewing room, daily. Was improved, on leaving. On admission today, pulse 78. R 18. Te) 98+. Bodily condition very dirty. No bruises or peculiarities are noticed. Appetite good; feeds herself; bowels moved. Very quiet. Talks but little, as she does not understand English.

" 6 P.M. Pulse 78. R 18. Te) 98+. Aug 6/93. Rested & slept well, last night. Conduct & behavior, as yesterday.

" 11 Aug 11/93. Quiet and sleeping well, each night. Quiet also & well-behaved by day. Appetite good, and

" 18 bowels apparently normal. Aug 18/93. During this, the second week of her stay, patient has continued to sleep well at night; to be quiet and well-behaved by day. Inclined to be reticent. Is tidy in habits; goes out walking with the rest. Does no work. General Notes. Aug 5. 93. Admitted on ward

" 21 Very quiet on ward, does not talk any English, goes out walking & to chapel. Appears seems about the same as when admitted. Moved to A' East. Aug 31. 93. Appetite good. Behavior quiet. Talks very little but sensibly. Works a little on ward. Tidy in habits.

30 Appetite fair. Clean in habits. Behavior quiet most of the time. Occasionally has silly talking & laughing fits.

Oct 5. 93. Removed to Insane. Febry 9. 94. Appetite good. Is very quiet. Seldom speaks. Goes riding & walking. Neat and clean in habits. Gen. health good. Febry 23. 94. Went home. Mental condition not entirely recovered. Rather demented.

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Personal and Medical History of Matilda Klug

Mch 30 94 Continues about the same. Inclined to be noisy. May 6 94 Transferred to C 4. May 27 94. Noisy at times very often. Strikes the attendants occasionally. Appetite good. Sleeps well. Habits dirty usually. June 30 94. Appetite good. Sleeps well. Noisy at times. Habits dirty usually. Violent at times.

Sept 27 94 Appetite good. Sleeps quite well. Habits dirty usually. Noisy at times. Is violent. Goes riding & walking.

Oct 31. 94 Appetite good. Noisy at times, also violent. Habits dirty. Goes riding & walking. Bowels quite regular ~~constipated~~.

Nov 30 94 Noisy and violent. Habits untidy. Goes riding & walking. Appetite good. Bowels regular.

Dec 30 94. Noisy at times, also violent & destructive. Appetite good. Habits dirty occasionally. Bowels regular. Mch 31 95 Noisy & destructive & violent at times. Habits dirty usually. Appetite good. Sleeps well. Bowels usually constipated. Mch 30 95 Noisy & destructive. Violent at times. Appetite good. Habits dirty. Bowels reg. Apr 30. 95 No change. May 27 95. Appetite good. Sleeps well. Violent & destructive at times. Habits dirty. Bowels constipated. June 30. 95 Appetite good. Eats & sleeps well. Violent & destructive at times. Goes riding & walking. Habits dirty. Bowels constipated. July 25

Aug 25 95 No change. Left Oct & Nov. Appetite good. Sleeps well. Violent at times. Habits dirty. Goes riding & walking. Bowels regular.

Dec 30 Noisy at times also violent. Eats & sleeps well. Habits dirty. Bowels regular. Goes riding & walking. Mar. 30 Violent & destructive. Habits dirty; Eats & sleeps well; Goes

1896 riding & walking; Bowels constipated.

July Summary Nurse's Notes by Dr. S.L. Phelps:- Violent & destructive: appetite usually good:

1897 bowels constipated: Nov 97 no change: Jan 98 Appetite fair: bowels usually constipated.

June Dull but at times violent: Does not talk: May 99 no change: Aug. Violent & destructive

no mental change. Report by Dr. R.M. Phelps) Sept 28 General health good, is rather dirty, destructive & restless. Mar 28 99 Somewhat violent: Dec 28 99

Intervening notes show patient to be about the same: keeps fair amount quiet, but inclined to be restless: untidy & demented. (Report by Dr R.M. Phelps)

1899 Mar 1 to Sept Appetite good. Bowels regular = usually sleeps well: is untidy in habits: sometimes takes out door exercise - sometimes refuses to do so. Is destructive & violent at times: May 2: Struck on head by Mollie Gross: slight injury. Sept 1- Feb 28 1900 (Dr Weyerdale). Appetite good: habits dirty: sleeps well: Very violent & destructive: at times; strikes other patients & nurses frequently. Jan. 17- Wt. 135 #. Mch 1- Aug 31 1900 (Dr Linton) Habits dirty. Very violent & disagreeable & destructive most of time: Generally kept in restraint muff. General health & appetite good. Usually sleeps & eats well: Bowels regular: Refuses exercise. July 17 Vaccinated. July 10 Attacked patient & when nurse attempted to separate them struck nurse on head & pulled hair. Sept 1- Nov 30 (Dr Weyerdale) Menstruates regularly: Oct 21 & 22 Fought nurses: Secluded. Dec 1- Feb 28 1901 Feb 15- Wt. 127 #. General health good: No change-

Mar. to June 1901. No change in general health. May 30 Wt. 127#. June to Sept. Patients mental and physical condition unchanged. Aug. 25 Wt. 124#.

Sept. to Dec. General health good, eats and sleeps well, at times is violent, Kept in bed, takes out door exercise Nov. 23. Wt. 123#. Dec 31-01 No change Wt 117#

Mar. to Aug 23-02 No change Wt 121# Left to Dec Genl health fair: eats & sleeps well: takes out door exercise: unoccupied: dirty in habits: usually quiet: always more or less restless: at times violent. Hard to manage.

Personal and Medical History of Sophia H. Rees.

BARRETT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3441.

No. for Year, 11.

Residence, St Paul, Minn

Date Admission, 11th August 1893.

Admitted by, D. Luiton - Phelps Hour, 7 Pm.

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

Sex, Female

Age, 33

Civil Condition, married

Children, one

Age Youngest Child, 5 years

Occupation, Housekeeper (Husband, Conductor)

Degree Education, Commonschool

Profession Religion, Methodist

Habits, not definitely stated

Nativity, Penn. (Father Newyork; mother, Penn).

Physicians Committing, C. Eugene Riggs + P. Marchand

Correspondents, (Husband) J.W. Rees, 430 Edmund St St Paul

Family Physician H.H. Kirkvale M.D. Minneapolis. Minn.

Insane Relatives, None

Cause Exciting, Mills' Meeting (Religious)

Cause Predisposing, previous attack

Form,

Accompanying Bodily Disorder, Suffered from fracture of skull when young

Suicidal or Not, not

Date of this Attack, Last May

Duration, 2 or 3 months

No. of Attack, 2nd probably (had one, 4 years ago)

No. of Admissions, 1

Age First Attack, about 29

Time of Leaving, Oct. 5th '93

Time in Hospital, 1 mo 25 ds.

Result, Impr.

Crossed off from Discontinued List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Quick

MEMORY: Seems good

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Illusive

REASONING POWER: Very much impaired

Ordinary Subjects,

Own Mental State, Does not realize she is sick at all

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has a self satisfied manner Thinks she has great influence over the other patients on the ward.

EMOTIONAL STATE:

Normal, Calm, Calm at times

Indifferent, Over joyful

Exalted,

Depressed,

DELUSIONS: Many and

Systematized or Not, System atized

Special Subjects, Thinks she has been

Transitory or Not, called by God to do

HALLUCINATIONS, ent and work-

ILLUSIONS: Says left the world at once but came back

CONVERSATION: to save the Catholics

Coherent or Incoherent, Called to the World's Fair

Voluble or Reticent, and after that is to go to the White House to take Mrs Cleveland's place Then she will be its Queen Seems very happy and well contented

Personal and Medical History of Sophia H. Rees

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in WEIGHT, 112 lbs NUTRITION, Good

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, None Coatings, Slight Promptness Movement,

PUPILS, Equality, Equal Size, Dilated

Response Light, Sluggish Accommodation, Sluggish

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Good

Legs, Good seemingly

TREMORS, Hands, Very slight Tongue, None

Facial Muscles, None General, None noted

REFLEXES, Patellar, Equal about 7

Other Reflexes,

ARTICULATION, Hesitating, Good Slurred,

FACIAL EXPRESSION, Pleasant

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Seem in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean Careless,

BOWELS, Normal, Normal Constipated, Irregular,

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, Good Poor, Irregular,

PULSE, 80 RESP., Normal TEMP., 98.8

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother neurotic

Father or Pat. Relations, Says Father was Converted life himself + has been healthy

Brothers or Sisters, Sister ill

EBERT, FOLEY & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Deputy-Sheriff Hawes, attended by J. H. Rees (husband) with following history. No history of consanguinity or heredity. This is, probably, 2nd attack; one occurred 4 years ago lasted 6 weeks. First symptoms of this present attack were manifested last May by religious exaltation. Suicide appears to be increasing. She is excited at times; never free from the delusions. Derangement is now shown by mania religiosa. Thinks she is to be the Savior of the World, and is, finally, to reign as Queen at the White House. Is neither disposed to injure others nor suicidal. Before accession of the disease, was easily excited. Patient suffered from fracture of skull, when young. Has not been restrained or confined; simply good watch-care has been employed. Supposed cause of the disease is the Mills-Meeting (religious). On personal Examination, she was in a State of religious exaltation. Said she had a mission to convert the Catholics & was to be Savior of the World. Has a delusion that, by swiftly shaking hands with a person, she can convert them. Her appearance and manner were those of exaltation.

Aug 11 Aug 11/93. On admission, is found to be in good physical condition. Was put on A1 East

" 12 Quiet and lady-like. Appearance is bright and cheerful. Talks ordinarily quite sensibly. Appetite good. Bowels regular. Temp 98.6 Pulse 71. R 20.

" 13 Quiet. Eats well. Does not complain. Seems quite contented.

" 14 Moved to A2. Quiet and cheerful. Thinks it was right that she came here.

" 16 Appetite good. Sleeps well. Bowels regular. Talks very willingly but soon branches off into her delusive ideas. Her behavior is quiet and lady-like. Very neat and clean in her appearance.

" 16 Appetite good. Sleeps well. Talks quite sensibly at times. Has many delusions with regard to religion.

" 17 Appetite is good. Sleeps well. Bowels regular. Makes no complaints. Does not talk as much of late.

" 18 Appetite good. Sleeps well. Quiet and lady-like. Cried some during the day, saying she wanted to go home.

" 19 Behavior very quiet. Talked very little. Appetite good.

" 20 Does not often speak of her delusions. Looks a little sleepy well. Appetite good. Quiet in behavior.

" 21 Behavior always quiet. Appetite good. Talks quite sensibly now.

" 22 Appetite good. Most of the time cheerful but life spells of depression. Cries at times.

" 23 Still holds her delusive ideas but not so ready to speak of them. Appetite good. Sleeps well. Quiet as usual.

" 24 Began menstruating today. Behavior quiet. No change.

" 27 In bed today. Still menstruating and complains of pain. She said she thought her husband & folks sent her here to get rid of her. Says she is well. Does not realize

1893 her condition. Says she wants to go home but that finally she is to go to the White House and be Queen. Does not speak of her delusions so readily but still holds to them. Rec'd to A2 Aug 14th 93. Aug 31. 93. Appetite good. Sleep good. Orderly habits. Behavior quiet & lady-like. Has an idea that she is going to Washington to be made a queen. Talks sensibly on other subjects. Menstr: about the 24th Sept 2 93. Appetite good until the last 2 days when she refuses to eat. Sleep: good. Behavior: quiet. Talk: Controlled more or less by delusions. Complains of headache at times. Menstr. about the 22nd Sept 27 93. Moved to B1 W. Sept 28 93. Appetite good, has taken her meals twice. She came on the ward. Went home Oct 5. 93. Taken by father. Was not well. Her ideas were somewhat suppressed, but still held that she had not been insane, that she was to come here first before going to Washington.

Isabella M. Holt. Born 74

Mch. Nov 30, 1900 Mch 8. Sick in bed with Pleurisy on right side. In bed from Jan 15 to Mch 8th. At times had considerable pain in side, but at no time very sick. Recovered without any untoward results. May. Quiet & stupid. Seldom speaks. Takes no interest in surroundings. Is inactive. Fairly neat in habits. Appetite good. Bowels moved by cathartics. Trans to C3. May 30 Takes outdoor exercise. Menstruates regularly. July 21 Vaccinated. Appetite very poor. Takes tonics. Very irritable. Nov. 20 Improved somewhat in health. Takes outdoor exercise. Wt. 114½#. Appetite fair. Sleeps well.

Dec. Feb 28 1901. Dr Meyerdale. Pulse 87. Complained of being sick. Put to bed for several days up on the 11th. Feb 27. 122#. No change mentally.

Mar. to June 1901. Attends amusements and chapel services, talks quite intelligently. May 30 Wt. 125#.

June to Sept. Aug. 14 visited by lady friends. No change in general condition. Aug. 30 Wt. 116#.

Sept. to Dec. Patient in good physical health, takes out door exercise, has delusions and is incoherent in her speach, does not converse very much. Nov. 25 Wt. 118½#.

Dec. 31st '01. Visited by friends: genl health fairly good: takes out door exercise.

March to May 29 02 Wt 117#. No change. Tube 1st Patient failing slightly, coughs & expectorates: is tubercular. June 16th visited by two friends. Aug. 30th patient visited by mother. Sept 1st Wt 90#. Patient confined to bed: coughs & expectorates a great deal: growing gradually weaker: is delusional and rather disagreeable.

Personal and Medical History of Pauline Deters

SIBLEY, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3444.
Residence, Rochester, Minn.
Date Admission, 16th August 1893.-
Admitted by, D. Phelps Hour, 11 AM
How Sent, Thos. Fraser, Jof C, Olmsted County.
Sex, female
Age, 23
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Dress-maker; (Father a farmer).
Degree Education, Common-School
Profession Religion, Evangelical Church
Habits, not stated; not intemperate
Nativity, Minnesota; parents born in Prussia.
Physicians Committing, Chas J Granger & H.H. Witherstine
Correspondents, no names given in papers
Family Phys^cn D. Witherstine, Rochester, Minn

No. for Year 14
Insane Relatives, none
Cause Exciting, not known
Cause Predisposing, not known
Form,
Accompanying Bodily Disorder, uterine disease
Suicidal or Not, not
Date of this Attack, a few weeks ago
Duration, a few weeks
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 23 years.
Time of Leaving, Dec. 13th '93
Time in Hospital, 3 mos 27 dys.
Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Cannot list as she
Recent Events, will not talk
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Seems weak and tired-
Will not talk

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Indifferent and
Exalted, refuses to talk
Depressed,
DELUSIONS: cannot determine
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Pauline Deters

Mrs. Barney Deters Citizen Houston Co
(Father) Minn.
Telegraph Office
New Albin Iowa.
Aug 17/93 (This address given by sister).

J.—(Continued.)

NUTRITION, Good
can't left eye Back broken
use of a hand
tness Movement,
al
mal
er question

HEARING, Seems good
COORDINATION, Arms, Seems weak
Legs, Walks as if very weak
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Equal and normal
Other Reflexes,
ARTICULATION, Hesitating, Will not talk Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Respiration sharsh and quick and Whistling rales in upper
EXAM. URINE: lobe of right lung.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 120 Irregular RESP., 20 TEMP., 99-2
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 Pauline Deters

SEBERT, VIOLAS & CHAMBERS, DAVENPORT, IOWA

Whole No. 31444.
Residence, Rochester, Minn.
Date Admission, 16th August 1893.-
Admitted by, D. Phelps Hour, 11 Am.
How Sent, Thos. Fraser, Jof C, Olmsted Co
Sex, female
Age, 23
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Dress-maker; (Father a farmer).
Degree Education, Common-School
Profession Religion, Evangelical Church
Habits, not stated; not intemperate
Nativity, Minnesota; parents born in Prussia.
Physicians Committing, Chas J Granger & H.H. Witherstine
Correspondents, no names given in papers
Family Phys^cn D. Witherstine, Rochester. Minn

Duration, a few weeks
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 23 years.
Time of Leaving, Dec. 13th '93
Time in Hospital, 3 mos 2 dys.
Result, Impr.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Cannot test as she
Recent Events, will not talk
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Seems weak and tired-
Will not talk

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Indifferent and
Exalted, refuses to talk
Depressed,
DELUSIONS: Cannot determine
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Pauline Deters

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 4in WEIGHT, 104 lbs NUTRITION, Good
WOUNDS OR ABNORMALITIES, Small mark on left kidney Back broken not and one scar had appearance of a boil
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Normal Accommodation, Normal
SIGHT, Seems good Will not answer questions
HEARING, Seems good
COORDINATION, Arms, Seems weak
Legs, Walks as if very weak
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Equal and normal
Other Reflexes,
ARTICULATION, Hesitating, Will not talk Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Respiration sharp and quick and Whistling rales in upper
EXAM. URINE: lobe of right lung.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 120 Irregular RESP., 22 TEMP., 99-2
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,

LUDLEY, FIGLAR & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Sheriff Stewart, and was accompanied by her sister & father, with following history. There is no history of either consanguinity or heredity. This is first attack; Symptoms manifested a few weeks ago, by simple derangement. Disease appears to be stationary; no rational intervals. Derangement is now shown by her destructing everybody; thinks she is going to be poisoned. Is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Has some uterine disease. Has not been restrained or confined. Has been under medical treatment. Cause of disease is not known.

Aug 16 Aug 16/93. On admission, was put on B^r. Bodily condition clean. Very restless and noisy. Ate neither dinner nor supper. Did not talk any

" 17 Very restless all night. Friendly noisy and tr. Pounding on the door. Taught this morning. Refuses to dress. Dressed with difficult. Gave Pills. Bromide suspended. Early this evening. Temp 99. Puls 96. Resp 18.

" 18 Rested well most of last night. More quiet on the hall. Appetite poor. Put on tonic. Bromide mand.

" 19 Restless until one o'clock A.M. Very noisy & tr. while awake. Very untidy. Required bathing twice during night.

" 20 Slept about 6 hrs. Quite noisy 1/2 hour while awake.

" 21 Restless on the hall. Appetite poor. Bromide mand. Slept about 6 hrs. Quiet while awake.

" 22 Very restless and resisting. Very untidy. Appetite poor. Refused tonic. Slept about 5 1/2 hrs. Out of bed and noisy one half hour while awake.

" 23 Rested well all night.

" 24 More quiet on the hall. Appetite some better. Very restless during the night. Out of bed part of the time.

" 28 Quiet on the ward. Appetite improving somewhat. Slept about 6 hours. Has restless while awake. Out of bed. Knocking on the door.

General Notes. Aug 16 93. Admitted on ward. Aug 17. 93. Visited by sister & talked but very little with her. Aug 18. Appetite poor, put on tonic. Aug 20. 93. Visited by sisters, talked but very little with them. Aug 21. Menstruated. Aug 21. 93. Visited by sister, also on 22d. Aug 26 93. Visited by friends, but did not talk with them. Aug 29. 93. Appetite fair very difficult to keep her clothing on her, as she keeps undressing herself any chance she can get, has to be kept on the locked ward where she can be watched all the time.

Sept 3 93. 6 a.m. Fit. Sept. 4. 93. Visited by friends. Sept 9. 93. Visited by friends. Sept 25 93. Appetite good & very much improved. Neat & tidy in habits. Oct 1. 93. Quite sick for a short time this morning caused by heart trouble. Face was very red, almost a purple, lost consciousness for a few minutes. Pulse very weak & irregular. Oct 1. 93. Visited by sister. Oct 12. 93. Talks sensibly. Very quiet. Seems weak. When she exerts herself in the least it seems to tire her & resp. rises. Oct 15 93. Visited by sister. Oct 18. 93. Menstrating. Oct 31 93. Appetite good. General health improved. Tidy about herself at times. Helps some in dining room.

Nov 3. 93. Visited by sister & returned with the same for a visit. Nov 4. 93. Returned

from her visit with sister down town. Nov. 8. 93. Not so well. Has had 3 fits today.

Nov 16. 93. Visited by friend. Nov 20. 93. Complains of headache & is menstrating. Dose med. as directed. Nov 29. 93. Appetite good but not very strong. Has gained in flesh. Talks very rationally on every subject. Tidy about herself. Rests well at nights most of the time. Nov 30. 93. Visited by sister. Dec 2. 93. Had quite a hard fit, came near falling on the heater. Dec 3 93. Transf. to C^2. Dec 8 93. Had fit during the night. Dec 9. 93. Had 2 very hard fits this a.m. Did not fall but seemed to lose consciousness for about a minute.

Patient has been improving in every way. Has been having uterine treatments for several weeks. Has had treatment one day and but double the next. Has gained in flesh & is anxious to go home. Dec 13. 93. Was allowed to go & her picture in So. Dakota today.

Personal and Medical History of Ann Treacy

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3448.
Residence, 596 Farquire St. St. Paul.
Date Admission, 23rd August 1893
Admitted by, D. Phelps Hour, 7 PM.
How Sent, Jno. P. Oliver Jof C. Ramsey County
Sex, Female
Age, - 56 -
Civil Condition, married
Children, Eight
Age Youngest Child, - 20 -
Occupation, House-Keeper (Husband, laborer).
Degree Education, very limited
Profession Religion, Roman Catholic
Habits, Has been drinking for many years.
Nativity, Ireland (Parents also born there).
Physicians Committing, L. Robillard & J. M. A. Gravel.
Correspondents, (no name given) - 715 Sims St.
Family Physcn, D. L. Robillard. 576 Payne Ave.

No. for Year, 18
Insane Relatives, None
Cause Exciting, Alcoholism
Cause Predisposing, previous attack
Form,
Accompanying Bodily Disorder, Deaf.
Suicidal or Not, not
Date of this Attack, about a week ago.
Duration, about a week.
No. of Attack, Several
No. of Admissions, 3rd
Age First Attack, 45 Years.
Time of Leaving, Nov. 17th '93
Time in Hospital, 2 mos 25 dys.
Result, Rec.

Crossed off from Parole List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Good
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Seems correct
REASONING POWER:
Ordinary Subjects, Fair paired
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None determined
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,
Talks coherently but rather weak minded

Personal and Medical History of Ann Treacy

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 143 lbs NUTRITION, Good
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, None Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Accommodation,
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, None Tongue, None
Facial Muscles, Normal General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Prompt Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds and normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, 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 Ann Treacy

EGELST, FISCHER & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by deputy-Sheriff Hawes, attended by her husband, with following history of case. She has had several attacks; drinking for many years. Cause of this present attack is alcoholism; first symptoms of it were manifested about a week ago, by begging, failing, selling goods of the house. Disease appears to be increasing. Derangement now shown by being uncontrolable, violent, exposed to dangers, drunk for a week &c. Is not suicidal. Is disposed to injure others, filthy & destructive. There is a family history of intemperance. No treatment can be employed as patient will not mind anybody. On personal examination, is found crying, talking incoherently & completely out-of-her mind. Appeared intoxicated by liquor. She cannot hear, & will not be controlled, unless under proper treatment.

Note. Patient has been at this Hospital twice before; from Sept 25/86 to Dec 2/86, the first time, (see Vol 7. p 154. No 123 H and the second time, from May 28/91 to Sept 3/91, (Vol 16. p 317. No 2718.)

Aug 23 — Aug 23/93. On admission, was in a haggard & weak condition. Was put upon B's - Pulse 86 R 22 T. Not taken. Bodily condition, seen at bath, very dirty. There are noticed bruises on legs, below the knee, a small bruise on the back and one on the left arm. Aug 24/93. Slept very poorly, last night. Ate. Pulse 88. R 20. Has eaten very little to-day. Bowels are regular; no cough noticed. Is very nervous; begged for something to drink. Complained, while in bed, of being sick at her stomach. Aug 25/93. Again passed a very poor night; rest being much broken. Appetite is good; has been up & to-and-fro ward, all day. Is very quiet. Went out walking in the afternoon. - " 25/ Aug 26/93. Quiet & well-behaved, all day. Talks sensibly & acts quite naturally. Aug 27/93. Spent a " 28 portion of the day in reading. Does not complain. Is apparently contented. Aug 28/93. Continues to " 29 rest well at night. Quiet & well-behaved by day. Appetite good. Aug 29/93. Has felt quite well " 30 today. Attended the Fair this afternoon. Aug 30/93. Crying this morning - Says "she is homesick."

Sep 6 — Sep 6/93. During this second week of patients stay, rest & sleep at night have been good. She has also continued quiet and well-behaved by day; causing no trouble; talks very little but, apparently, quite sensibly; also acts quite naturally. Helps with work in dining-rooms. Seems quite contented here. - Appetite has continued good & bowels have been normal. Goes out walking & sometimes riding with the rest.

General Notes. Aug 28 93. Appetite good. Sleep good. behavior quite natural. Clean in habits. Seems to have no delusions.

From Page 92.

Personal and Medical History of Clara J. Traaseth

Mch 14 95. Appetite good. Does no work. Sleeps well. Dirty in habits. Bowels reg. Behavior noisy, at times violent. Menstruating. Adm 12-95. Menstruating. Very mischievous during period. Adm 29 95. Has been very noisy for a day past.

May 7. Is becoming very untidy. May 22 95. There is a rather improvement in her habits, that she is becoming cleaner in every way, and also more tidy in dress, although she has been very violent of late. May 31 95. No change worthy of note.

June 5 — Appetite good. Does no work. Behavior noisy & mischievous. Has been neat & clean for past two weeks.

June 19 — Trans to Annex. July 5 Menstr. July 10 Has destroyed some of her clothing - no other change.

Aug 1 — Appetite good. Clean. Noisy in behavior. Gen. health good. Goes riding & walking.

Sept 16 — Menstr. Sept. 30 Appetite good. Clean in habits but untidy in appearances. Noisy. Talks & laughs a good deal. Is violent. Talks incoherently. General health good. Goes riding & walking. Nov. 30 Menstr. Dec 30 Very dirty in habits - Quiet at present. Jan 21 - Feb 17 Menstr. Feb 21 - Appetite good. Dirty & untidy in habits. Noisy in behavior. Occasionally violent. Talks incoherently. General health good. Takes out door exercise. Apr. 9 Appetite good. Dirty & untidy in habits. Noisy. Talks incoherently. Violent & very obstinate. General health good. Takes out door exercise. May 12 Menstruation regularly.

1896 June 15 — Summary Nurse's Notes by Dr. E. L. Phelps:- Is not feeling well coughs. Some & is losing flesh: put upon tonic: Aug 5 Pulse 100. P. 30: Gen. health poor: Nov 30 Appetite fair. Untidy: limbs seem to be weak: Jan 97 Quite demented: does no work: physical condition failing: Apr 97 Coughs & expectorates a good deal: T. 102. P. 112: R. 40. Transf. to Inf. Apr 25 T. 101. 8: P. 98 R. 26. coughs & expectorates: Put to bed and daily sick record kept: Alcohol baths given: May 1 97: Has been steadily in bed since last note: pulse very weak: coughs & expectorates a good deal: Complains of pain in lungs: takes tonic: Appetite fair: May 31 Temp. ranges from 101 to 103. Pulse 108. Resp. 30 to 40. coughs & expectorates a good deal: Has been constantly in bed: June 10 97 Has been failing gradually since last note: pulse very weak: has coughed & expectorated a great deal: Died at 1:15 A. M.

Died

Personal and Medical History of Mary Wood Hough
Mrs. G. H. Hough

GIBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3452.
No. for Year, 22.
Residence, Atwood, Minn.
Insane Relatives, None
Date Admission, 28th August 1890
Cause Exciting, not known
Admitted by, Dr Shelps Hour, 7 PM
Cause Predisposing, not known
How Sent, A. L. Buck J of P, Atwood County
Form,
Sex, Female
Accompanying Bodily Disorder, None noted
Age, 38
Suicidal or Not, not
Civil Condition, married
Date of this Attack, about 3 years ago
Children, none
Duration, about 3 years
Age Youngest Child,
No. of Attack, 1st
Occupation, Housewife (husband, producedealer)
No. of Admissions, 1
Degree Education, High School
Age First Attack, about 35.
Profession Religion, None
Time of Leaving, Aug. 2nd '93
Habits, Probably good
Time in Hospital, 1 mo. 5 ds.
Nativity, New York (Parents also born there)
Result, Rec.
Physicians Committing, J. A. Pierce & H B McGaughey
Crossed off from Absentee List, April 1st, 1891, because illegally committed.
Correspondents, G. H. Hough (Husband)
Family Physician Dr. J. A. Pierce. Atwood Minn

EXAMINATION ON ADMISSION.
MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, At first confused but beginning upon clear
Quick or Sluggish,

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

PERCEPTIVITY:
Alert or Dull, Rather dull
Correct or Illusive,

REASONING POWER: Not good
Ordinary Subjects,
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Rather confused and dazed in manner

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

DELUSIONS:
Systematized or Not, Had many at
Special Subjects, first
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Incoherent at first
Voluble or Reticent, but now more coherent

Personal and Medical History of Mary Wood Hough

EXAMINATION ON ADMISSION.—(Continued.)
PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Poor
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, None Coatings, Irritable Promptness Movement,
PUPILS, Equality, Left somewhat Size, larger
Response Light, Normal Accommodation, Normal
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, None Tongue, None
Facial Muscles, General,
REFLEXES, Patellar, Equal + on scale of 10
Other Reflexes,
ARTICULATION, Hesitating, Hesitating Slurred,
FACIAL EXPRESSION, Impaired
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., Uterus normal Speculum Says has prolapsus of the rectum at times
MENSTRUATION, Regular
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, //	Careless,
BOWELS, Normal,	Constipated, ✓	Irregular,
APPETITE, Good,	Medium, ✓	Poor,
SLEEP, Good, //	Poor,	Irregular,
PULSE, 76	RESP., 18	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother always had Rheumatism
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Mary Wood Hough

EARLEY, FOLAN & BUSHNELL, DAVENPORT, IOWA

1893 Was brought here by Sheriff Gay & accompanied by her husband, with following history. There is no history of Consanguinity or heredity. Patient was never sent to hospital. this is 1st attack, symptoms appearing about 3 years ago. She had many false impressions; very religious; incoherent in conversation. Disease seems increasing; is variable; rational intervals occurring at irregular periods. Derangement is now shown by the belief that all matters pertaining to the religious and political world have been submitted to her. Is constantly discussing the prospects & expressing fears that she may not conduct them properly. She is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Patient previously showed profound religious impressions. Neither She nor her parents have ever been addicted to intemperance, nor has she been subject to any severe disease or head-injury. nor under restraint or confinement, or medical treatment. Cause of disease is not known. On personal examination, it is found that she suffers from insomnia; walks the floor, a great deal of the time. Expresses regrets that she cannot perfectly adjust religious and political matters. She stated that, owing to loss of links, she is at a loss to know what to do in controlling religious & political matters. She walked the floor constantly; talked incessantly upon religious and political subjects. Has excited & restless in manner. She requires constant attention to prevent her from leaving her residence.

Augst Aug 28/93. On admission, patient is found to be in fair physical condition. Manner was restless and
" 29 excited. Has spent no B.M. Bodily condition clean; no bruises or injuries noted. Aug 29/93. Slept fairly
well, last night. Refused to allow taking of pulse & temperature. Appetite is poor. Is very restless & nervous, today;
" 30 walking the hall & lying on floor, most of the day. Would not talk. Aug 30/93. Rested well, last night;
" 31 sleeping most of the night. Conduct & behavior about as yesterday. Refused her medicine. Aug 31/93. Slept
well, last night, until about 4. Am. twice which time she was restless, talking some. Ate very little, today,
at breakfast & dinner; took no supper; will not take her tonic. very reticent.

Sep 1 Sep 1/93. Did not sleep any last night; talking for about an hour; feel, once, out of bed on to the floor. Is very
restless today. Shows hallucinations of hearing"; thinks, at times, she is conversing with her mother; and,
again, is hysterical; will close her eyes, & if not closely watched, will fall on the floor, or wherever she is
" 2 standing. Sep 2/93. Rested better than usual, last night; slept well all the night. Ate quite fairly,
" 3 today; is more quiet onward. Sep 3/93. Quiet & rested well all night. Appetite has improved some;
but she still refuses her medicine. very quiet & well behaved onward; was asking about home and her
" 4 husband, this evening. Sep 4/93. Again passed a quiet & restful night, last night. Is quiet onward;
mental condition seems somewhat improved. Went out walking this morning but was quite tired when she
" 5 returned. Sept 5/93. Was quite restless & nervous for about an hour, last night. Got up & was out in the
" 6 hall, once; slept, however, about 6 hours. Seems to be improving in every respect. Sep 6/93. Rested well,
most of last night. Complains, today, of constipation. Laxatives given, with good effects. In other respects
" 11 keeps about as usual. Sep 11/93. Has continued to rest and sleep well, at night. Has been quiet and
well behaved by day. Personal habits are good. Has done some little work on hall, and seems
anxious to help at it. Appetite is good & bowels becoming more normal. Take her medicine, now,
without urging, and, on the whole, shows some improvement in her condition. Sept 15.93 Very
much improved in every respect. Sept 18 93 Mrs Stoutsberg

Personal and Medical History of Mary Wood Hough

Sept 18.93. Visited by husband & Enjoyed his coming very much
" 25. Very nice on ward. Neat about herself. Tidy in habits. Sept. 27 93 Visited by
husband. Sept 30.93 Appetite good. seems to be quite well in every respect.
Oct 2 1893. Visited by husband & returned home with same.

Personal and Medical History of Anna J. Rowen Vol 18-223

HERBERT, PUTNAM & CRANDERS, DAVENPORT, IOWA

Whole No. 3453.
Residence, St Paul, Minnesota
Date Admission, 29th August 1893.
Admitted by, Dr Lilbourne Hour, 7 P.M.
How Sent, John B. Olivier, Jeff'n County
Sex, Female
Age, 36 years –
Civil Condition, married
Children, one
Age Youngest Child, 4 years
Occupation, Housework (Husband, Engineer).
Degree Education, Common School.
Profession Religion, Presbyterian
Habits, Not intemperate
Nativity, Ireland (that of parents also).
Physicians Committing, R. S. Bole & L. L. Bacon
Correspondents, H. G. Rowen, 189 Fuller St St Paul; Geo. Kennedy
Family Physcn D. A. Pool. St Paul } c/o Schmemann & Evans St Paul }

No. for Year, 23.
Insane Relatives, Brother, 18 or 20 years ago.
Cause Exciting, unknown
Cause Predisposing, heredity & previous attacks
Form,
Accompanying Bodily Disorder, none noted
Suicidal or Not, Yes; with knife
Date of this Attack, August 27th 1893
Duration, 2 days or so
No. of Attack, 11 (one in Jany '92 & 10 since).
No. of Admissions, 2nd
Age First Attack, 35 about
Time of Leaving, July 4. 94
Time in Hospital, 10 mos 5 days.
Result, Improved

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS. See Vol 18-223

Exam. Dr L Bolles.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Quick
MEMORY: Seems good
Past Events,
Recent Events, Good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Illusive.
REASONING POWER:
Ordinary Subjects, Much impaired
Own Mental State, Impaired.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Says she is King George's daughter, that she came here in the interest of her Majesty the Queen. Says she was not sick. Has many delusions.

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS: Many
Systematized or Not, Systemized
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, most the time incoherent
Voluble or Reticent, Talks readily

Personal and Medical History of Anna J. Rowen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 120 lbs NUTRITION, Fair
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Slight Coatings, Promptness Movement, Deviates toward right side
PUPILS, Equality, Equal Size, normal
Response Light, Good Accommodation, Good

Case No. 3453. Anna J. Rowen. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

Facial Muscles, General, none.
REFLEXES, Patellar, Eq/ 7 on scale 10.
Other Reflexes,
ARTICULATION, Hesitating, Prompt. Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds are normal.
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal, normal	Constipated,	Irregular,
APPETITE, Good, Good	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 78	RESP., 18.	TEMP., ~~98~~

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 Anna. J. Rowen Vol 18-223

Whole No. 3453.
Residence, St Paul, Minnesota
Date Admission, 29th August 1893.
Admitted by, Dr Kilbourne Hour, 7 PM.
How Sent, John B. Olivier, Jeff, Ramsey County
Sex, Female
Age, 36 years –
Civil Condition, married
Children, one
Age Youngest Child, 4 years
Occupation, Housework (Husband, Eng
Degree Education, Common School.
Profession Religion, Presbyterian
Habits, Not intemperate
Nativity, Ireland (that of Parents also).
Physicians Committing, R. I. Bole & L. L. Bacon
Correspondents, H G Rowen, 189 Fuller St St Paul. Geo. Kennedy
Family Physcn D. A. Pool. St Paul } to Schmeman & Rowe St Paul }

No. for Year, 23.
Insane Relatives, Mother, 18 or 20 years ago.
Cause Exciting, Unknown
Cause Predisposing, Heredity & previous attack
Form,
Accompanying Bodily Disorder, None noted
Suicidal or Not, Yes; with knife

Time in Hospital, 10 mos 5 days.
Result, Improved

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS. See Vol 18-223

Exam D. L. Phelps.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Quick
MEMORY: Seems good
Past Events,
Recent Events, Good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Illusive.
REASONING POWER:
Ordinary Subjects, Much impaired
Own Mental State, Impaired.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS: Many
Systematized or Not, Systemized
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Most the time incoherent
Voluble or Reticent, Talks readily

Says she is King George's daughter that she came here in the interest of her Majesty the Queen. Says she was not sick. Has many delusions.

Personal and Medical History of Anna. J. Rowen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 120 lbs NUTRITION, Fair
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Slight Coatings, Promptness Movement, Deviates toward right side
PUPILS, Equality, Equal Size, normal
Response Light, Good Accommodation, Good
SIGHT, Good.
HEARING, Good.
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, none Tongue, very slight.
Facial Muscles, General, none.
REFLEXES, Patellar, Eq/ 7 on scale 10.
Other Reflexes,
ARTICULATION, Hesitating, Prompt. Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds are normal.
LUNGS, Seem in good Condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, normal Constipated, Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 78 RESP., 18. TEMP., ~~18~~
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,

SEIBEL, FUCAS & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy-Sheriff D. L. Courteau, attended by Wm Wenter, with the following history. There is no history of convulsions, but there is found of heredity, her mother having been insane 18 or 20 years ago. Had 1st attack in January 1892 & 10 since; duration of same from 2 days to a month. First symptoms of this present attack were manifested Aug 27/93 (2 days ago); when attending church, became greatly excited. Disease seems stationary. Is variable; rational intervals more apt to occur near menstrual periods. Derangement is now shown by delusions on every possible subject. Is not disposed to injure others. But is suicidal. Attempted suicide with a knife; propensity not now active, however. Is not filthy or destructive. Patient has not been subject to any severe disease, nor injury to head. Cause of disease is unknown. She has been operated on for laceration of cervix uteri. On personal examination, the following points noted. She is actively insane, and somewhat violent & has many delusions. All her talk was incoherent. She raised herself in bed & covered Examiner out of the house; appearance & manner, those of intense excitement. During intervals of excitement, patient is melancholy.

Aug 29 Aug 29/93. On admission, patient is found to be in good physical condition. Was put on B's. Note. Patient was there before from January 11/92 to April 23/92. After being here 3 weeks or so, was taken out by her husband on trial; the last time, by her brother. (see Vol 18 page 223. No 2913). Bodily condition, was, on

" 30 admission, very dirty; fought & resisted while being bathed. No bruises or injuries noticed. Aug 30/93. Apparently rested & slept well, last night. Ate. Resisted so strenuously that pulse. R & T, could not be taken. Appetite is fairly good; no coughs noticed. Was pugnacious & put in seclusion 3 hours, this morning. Fought when dressed & also at supper. Talks and acts in a very silly manner. Aug 31/93. Seems to have again rested

" 31 well, last night. Appetite is good. Has been acting strangely today, jumping up & down, part of the time. Fought the Attendants. Talks very silly. Shows delusions. Thinks she is the queen & that all are her

Sep 1/ servants. Sept 1/93. Has not been so noisy as yesterday. Fought, when going to supper. Sep 2/93. Has

" 3 been more quiet today; was only noisy, after dinner. Is very sarcastic. Sep 3/93. Resisted when bed-time

" 4 came; otherwise has been quite well-behaved today, causing but little trouble. Sep 4/93. Was quite noisy for a while, after dinner, today; Jumping & singing - Fought & resisted the attendants at supper-time.

" 5/6 Sep 5/93. Has been quiet all day; fairly well-behaved. Sept 6/93. Conduct & behavior today, also, have

" 7 been quite good. Went out for a walk, this afternoon. Sep 7/93. Appetite has continued good. Is quiet and well-behaved. Cares for herself. Goes walking & riding. Speaks when spoken to. Seems improving.

" 11 Sep 11/93. No report to the contrary, has apparently rested & slept well, all night, ever since her admission. Room being badly behaved, fighting, resisting attendants &c, she has now quieted down and has become quiet & well-behaved. Caring for her own person. Goes out walking, also out for a drive, occasionally.

" 29 Quiet most of the time. Violent at times. Appetite good. Cares for herself usually.

Oct 30 93. Walks around the ward some. Talks to herself. Was visited by husband. Made several complaints against attds said they broke her thumb. Appetite good. Sleeps quite well. Nov 29 93 Somewhat quieter. Appetite good Cares for herself. Has delusions, has been visited by husband & brother several times of late, but does not care to talk much with them. Dec 23 93 Appetite good Sleeps well quite most of the time. has been doing some knitting for her little girl, went on a visit with her husband today. (Patient has been committed here under the "Law of '93" recently declared unconstitutional) —

1894

March 20/94 Patient was returned today, under a "new Warrant", in care of Deputy Sheriff M. R. Goss, attended by Miss Hoisey. This time, insanity is manifested in regard to the English Government, the Queen of England; she owns Minnesota and dreams her relatives. Is sometimes quite violent to defend England and the Queen. On admission, last evening, was very much excited, and loudly talkative, keeping this up nearly all the time while in office. Put in C.t.

March 20 Resisted & fought when bathed. Very noisy. Mch 21 94 Fought at Attds & received bruise on forehead by striking her head against the wall. Mch 24/94. Patient gains. Appetite good. Sleeps well. Habits clean.

April 3/94 Quiet. Cares for herself. Appetite good. Sleeps well. Habits clean. Transf'd to C. April 6/94 Visited by her husband. Been quiet. Behavior April 7th 94. Visited by husband. April 10 94. Dito. Menstruating.

April 17/94 Visited by husband. April 28 94 Dito. April 30 94 Patient is very silly. Quiet. Has very silly delusions.

May 21 Transf'd to 2 Visited by husband. May 3 94 Has been quiet all the time. Seldom speaks to anyone. Whispers to self. Crochets. Does not go out of doors. (Crochets) Sat by piano and Crocheted most of the time. Never spoke a word to any one and never went off the ward. Became very angry if any one spoke to her and would bow so that her nose would nearly touch the floor and would say: "Do you know who I am? I am the Queen" &c. Appetite was good, bowels regular. Last Evening on ward boxed Miss May Hodgson's ears as she was passing by her, also fought quite considerably when being removed to C.t. Does not menstruate regularly. June 3 94 Appetite good. Sleeps well. Cares for herself, works for ward most of the time. Habits clean. July 4 94 Went home.

Discharged Nov 9. 94

Personal and Medical History of Rose Marsland

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3457.
Residence, Virginia, Minn.
Date Admission, 31st August 1893. —
Admitted by, D. Phelps Hour, 12 M.
How Sent, H. L. Buck, J of P. Virginia County.
Sex, Female
Age, 27
Civil Condition, married
Children, None (had one who is ; it died at age of 5 mos)
Age Youngest Child, ——
Occupation, Housewife (husband, mill-hand)-
Degree Education, common school-
Profession Religion, Catholic
Habits, probably good
Nativity, Bohemia (that of Parents also).
Physicians Committing, Franklin Staples & E.D. Keyes
Correspondents, husband + Mrs Mary McGill (sister) Virginia Minn
Family Physician Edward D. Keys Virginia, Minn.

No. for Year, 27.
Insane Relatives, none
Cause Exciting, Not known
Cause Predisposing, previous attack
Form,
Accompanying Bodily Disorder, Extreme nervousness
Suicidal or Not, not
Date of this Attack, 2 weeks ago
Duration, 2 weeks
No. of Attack, probably 2nd (1st in Jany 1893) -
No. of Admissions, 1st
Age First Attack, about 27
Time of Leaving, Oct. 31 '93
Time in Hospital, 1 mo 19 da.
Result, Improved.

Crossed from Chronic List, April 1st, 1894, because illegally committed

EXAMINATION ON ADMISSION.

Exd by D. Phelps. Sep 6/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish,
MEMORY:
Past Events, Fair
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Felt "blue" + discouraged. Nervsick, she says; and this the reason they brought her here —

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Depressed.
DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: voices talking to her
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Rose Marsland

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2¼ in. WEIGHT, NUTRITION, Good
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, none Coatings, slight Promptness Movement, ✓
PUPILS, Equality, Normal Size, Normal
Response Light, Normal Accommodation, ✓
SIGHT, Good
HEARING, Good
COORDINATION, Arms, } Good
Legs, } Good ✓
TREMORS, Hands, slight Tongue, none
Facial Muscles, General,
REFLEXES, Patellar, equal; normal; about 5.
Other Reflexes,
ARTICULATION, Hesitating, Normal Slurred,
FACIAL EXPRESSION, rather dull + depressed.
SENSIBILITY,
HEART, Sounds are normal
LUNGS, " "
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION, Menst.
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Normal Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, well. Poor, Irregular,
PULSE, 86 RESP., 20 TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother ~~or Mat. Relations~~, Tumor; always sick
Father or Pat. Relations, Healthy
Brothers or Sisters, 2 Brothers; 2 sisters; healthy.

Personal and Medical History of Rose Marsland.

EGBERT, FULLAS & KNABURG, DAVENPORT, IOWA.

1893 Was brought here by Sheriff J. F. Gay and, attended by her sister & husband, with the following history of case. There is no history of consanguinity or heredity. This is probably 2nd attack; she had one in January 1893, lasting 2 weeks; acute; has never been entirely sound since: has not been in hospital. First symptoms of this present attack manifested 2 weeks ago, by hallucinations, mostly religious. Disease appears to be intermittent; but these are intervals, not entirely rational, at irregular periods. Derangement is now shown by almost entirely religious hallucinations; is very talkative. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Showed no peculiarities previously, except by being somewhat simple. No history of intemperance, nor of any severe disease or injury to head. Has not been restrained or confined, but has been controlled at home, at times of acute excitement. Cause of disease is not known. Has been given sedatives at times of acute mania. On personal examination, She talked continually in disconnected sentences, on religious subjects &, at times, filthy subjects. — Laid on her back in bed & talked & sang; appearance & manner, flushed & excited. During last few months, has neglected household; sits brooding, from morning till night; walks the floor at night, and prays &c. ——

Aug 31 Aug 31/93. Is in fair physical condition. Was on admission, put on B3 — Bodily condition quite clean. Two
Sep 1 small bruises noticed on her arm. Sept 1/93. Last night, was very restless; did not sleep any; out of bed several times, in early part of night. — Flu. Pulse 90. R 18 T(a) 98 4. Appetite has been poor since admission. Did not eat any dinner, and took very little supper — At times is quiet & well-behaved; at others, crying.
" 2 Thinks her husband has deserted her". Sept 2/93. Quiet, and rested well, last night. Ate quite well today.
" 3 Is quiet on hall. Out walking this afternoon. Sept 3/93 — Quiet, sleeping most of the night. Quiet on ward.
" 6 Attended services in Chapel today. Sept 6/93. Quiet, both by night & day. Sleeps well. Appetite good.
" 13 Manifests hallucinations "of hearing". Sept 13/93. Uniformly rests & sleeps well at night; only on one night, during past week, being reported as restless, sleeping, however, 5 hours. Has continued quiet, and well-behaved by Day. Habits are clean. Attends Chapel-services regularly. Assists with hand-work. Was visited by husband on 6th inst & conversed quite freely with him. Menstruated on 4th inst. — —
" 18 Sept 18/93. Appetite goods. Patient seems very much depressed. Has hallucinations "of hearing".
" 20 Sept 20/93. Was today, visited by her husband and by him taken home on trial.

Personal and Medical History of Honora Agnes Tate.

May 8 Is menstruating. nervous & irritable: Appetite poor: Desires to come into ward. Neat in appearance. Tidy in habits: Bowels regular: Has delusions.

May 8 Appetite poor: Sleeps well: Bowels irregular: Takes out door exercise. Has delusions. Summary Nurse's Notes by Dr. S. L. Phelps — July 96 Neat in habits & personal appearance: appetite quite poor: bowels usually constipated: Sleeps quite well: assists some with work: Nov 96 Menstr. regular. bowels regular: Appetite quite poor: Takes out door exercise Jan 97 A little brighter & more cheerful of late: rarely speaks of or shows her delusions: letters written by her, however, are full of delusion ideas: Health has failed somewhat of late. May 97 no special change: Aug 97 Very quiet & agreeable on ward: appetite poor: bowels regular: seems to have a great many delusions: Does no work. (cont'd by Dr. R. M. Phelps) Sept 97 Usually polite & fairly agreeable: Rather dull. Has a good many delusions, although answers ordinary questions sensibly. Dec 97 Weight 120 lbs. Sits in her room a good deal: Reads & prays.
1898 Jan 15 Somewhat stubborn at times: Lies in bed during day: Feb 9 99 Intervening notes show no especial change: Is a little more talkative lately & a little less reserved & moody (cont by Dr. P. A. Bliss) Mar 99 Sept 99 Appetite good: bowels regular. habits clean: once in a long while takes out door exercise Usually refuses to do so: usually quiet: sometimes quarrelsome: remains in her room most of time; reading & praying: conversation largely on religious subjects: takes tonic Sept 1 — Feb 28 1900 Oct 6. Trans. to B3. Nov. Neat & tidy: Appetite fair: Quiet & agreeable: Prays a good deal of time: Dec 1 Menstruates regularly: Jan 19. Wt. 125 lbs. Feb 26 Quiet & agreeable: Sleeps well. Appetite good. Mch 1. Nov 30 1900. Very quiet & neat. Appetite rather poor: Bowels regular. Sleeps well: Talks very little: Has peculiar religious ideas: May 3 Refuses out door exercise of any kind: Menstruates regularly: Lies on bed a good deal during day: July 17 Vaccinated successfully. Oct 4 Sick in bed. Complained of bowels being very loose: Oct 5 Still in bed & very weak. Has diarrhoea: Temp. 103 4. Trans. to B primary. Oct 9 Much improved. Trans. to A. Nov. 24 125 lbs. Dec 1 — Feb 28 1901. No change: Neat: Refuses out door exercise Appetite fair: Expresses religious delusions: Feb 28 Wt. 124 lbs.

Mar. to June 1901. No change in general condition May 30th. Wt. 125 lbs. June to Sept. Patient shows no change in either mental or physical condition, Aug 31. Wt 124 lbs.

Sept. to Dec. Nov. 28 visited by friend, neat in habits and appearance, conversation quite intelligent, is unoccupied. Nov. 29 Wt. 131 lbs.

To Feb. 1, 1903. Appetite good: bowels regular: sleeps well: assists with the work: clean in habits: neat in appearance: rather indolent: inclined to lie in bed a great deal: talks a great deal to the patients: causes disturbance: incites them to idleness and insubordination: sometimes uses profane language: expresses many delusions of persecution: is at times stubborn and resistive: Dec 1st. Wt. 132 lbs. Menstruates regularly: attends amusements

Personal and Medical History of Annie M. Frosberg

Whole No. 3458.
Residence, 60 or Mendota St. St Paul
Date Admission, 1st September 1893.
Admitted by, Dr Phelps Hour, 7 PM
How Sent, John. B. Olivier, Jof P. Ramsey County
Sex, Female
Age, 51.
Civil Condition, married
Children, four
Age Youngest Child, 22 years
Occupation, Housekeeper (Husband, Minister).
Degree Education, very good.
Profession Religion, Methodist
Habits, probably good.
Nativity, Sweden (that of parents also).
Physicians Committing, L. J. O'Brien & Arthur Sweeny
Correspondents, Husband C. G. Frosberg, 60 or Mendota St.
Family Physcn. Arthur Sweeny St Paul. — St Paul

No. for Year, 28
Insane Relatives, unknown
Cause Exciting, unknown
Cause Predisposing, not given
Form,
Accompanying Bodily Disorder, no history of any.
Suicidal or Not, Yes; attempted 3 times.
Date of this Attack, November 1892.
Duration, about 10 months.
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, about 50.
Time of Leaving, Dec 19-94 — relief + Apt Feb 19 '95
Time in Hospital, 1 yr 5 m 19 d.
Result, Imp.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exam. Oct 13. 93. by Dr PM. v Dr. Phelps

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Sluggish.
MEMORY: Seems good.
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER: much impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Depressed.
DELUSIONS: about her health.
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: Says she can not live
ILLUSIONS: Thinks family will burn up.
CONVERSATION: always complaining
Coherent or Incoherent,
Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS: Would lie in bed all the time if allowed. Very untidy, Hypochondriacal - Sits in a chair & makes believe she can not walk when no one is around, often walks readily any where she wishes.

Personal and Medical History of Annie M. Frosberg

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, Cannot obtain WEIGHT, 97 NUTRITION, Pale, but in good flesh
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Flabby Promptness Movement, Inactive.
PUPILS, Equality, Size, Contracted somewhat
Response Light, Accommodation,
SIGHT,
HEARING, Good
COORDINATION, Arms, Probably good. Cannot test.

Case No. 3458. Annie M. Frosberg. Vol. 24.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

ARTICULATION, Hesitating, Normal. Slurred,
FACIAL EXPRESSION, Dull.
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, dirty. Clean, Careless,
BOWELS, Normal, Constipated, 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 Annie M. Frosberg

HERBERT, TICKAS & CHANDLER, DAVENPORT, IOWA

Whole No. 3458.

Residence, 60 r Mendota St. St Paul

Date Admission, 1st September 1893.

Admitted by, Dr Phelps Hour, 7 PM

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

Sex, Female

Age, 51.

Civil Condition, married

Children, four

Age Youngest Child, 22 years

Occupation, Housewife (Husband, [illegible]

Degree Education, Very Good.

Profession Religion, Methodist

Habits, Probably Good.

Nativity, Sweden (that of parents also).

Physicians Committing, L. J. O'Brien & Arthur Sweeny

Correspondents, Husband C. G. Frosberg, 60r Mendota St

Family Physician, Arthur Sweeny St Paul. — St Paul

No. for Year, 28

Insane Relatives, unknown

Cause Exciting, unknown

Cause Predisposing, not given

Form,

Accompanying Bodily Disorder, no history of any

Suicidal or Not, Yes; attempted 3 times.

Date of this Attack, November 1892.

Duration, about 10 months.

No. of Attack, 1st

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exam. Oct 13. 93. 4.50 P.M. by Dr. Phelps

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Sluggish.

MEMORY: Seems good.

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER: Much impaired

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Depressed.

DELUSIONS: about her health.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Says she can not live

ILLUSIONS: Thinks family will burn up.

CONVERSATION: always complaining

Coherent or Incoherent,

Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS: Would lie in bed all the time if allowed. Very untidy. Hypochondriacal - Sits in a chair & makes believe she can not walk when no one is around, often walks readily any where she wishes.

Personal and Medical History of Annie M. Frosberg

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, Cannot obtain WEIGHT, [illegible] NUTRITION, Pale, but in good flesh

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Coatings, Flabby Promptness Movement, Inactive.

PUPILS, Equality, Size, Contracted somewhat

Response Light, Accommodation,

SIGHT,

HEARING, Good

COORDINATION, Arms, Probably good. Cannot test.

Legs,

TREMORS, Hands, none. Tongue,

Facial Muscles, General, None

REFLEXES, Patellar, 8 to 9.

Other Reflexes, 8 to 9

ARTICULATION, Hesitating, Normal. Slurred,

FACIAL EXPRESSION, Dull.

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Seem in good Condition

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, dirty. Clean, Careless,

BOWELS, Normal, Constipated, 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 Annie. M. Frosberg

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here, in due form, by a Sheriff's deputy, with the following history. Nothing known regard history of Consanguinity or heredity. This is the 1st attack, first symptoms appearing in November 1892; she began to be melancholy and fearful of danger, and had delusions of persecution; - occasionally, at first, would become excited & suicidal. Disease seems to be stationary; no rational intervals. She is, now, profoundly melancholy, lying in bed, refusing to talk, muttering occasionally in an unintelligible way. Derangement now shown by the belief that she is hopelessly sick; no hope for her; that she is dead; that she is being starved & that she is in constant danger from poisons &c. Lies in profound, stuporous, melancholy state, moaning & sighing. Is not disposed to injure others. Has attempted suicide, by cutting arteries of wrist & leg; tried to throw herself from the window, and threw herself down stairs. Has recently become more suicidal. Is of filthy & destructive habits. There is no history of intemperance, nor of any severe disease or head-injury. She has not been restrained or confined. Cause of the disease is unknown. Has been given nourishing food, tonics & sedatives; her nutrition much improved over the early months of her sickness. On personal examination, face is found to be typically melancholic; she lies in bed, moaning, complaining she is dead or hopelessly sick, refusing to answer questions and absorbed in her own thoughts. Talk was incoherent & unintelligible. Appearance & manner, exceedingly depressed and sad. She has been in this condition 10 months, without intermission. —

Sep 1 Sep 1/93. On admission, was put on B². Pulse 78. R 18. Bruises noticed on right arm and side. When
" 2 carried to ward was under the influence of morphine & slept for 2 hours after. Sep 2/93. Slept but 3 hours,
last night; was very restless; out of bed frequently; pounding at door & noisily talkative. 7 Am. Pulse 96. R 20
T 100. Is quite sick & in bed all day today. Seems to be from effects of morphine, previously taken. Was
" 3 vomiting; gave milk often & a very little at a time & it was retained. Bowels moved very freely. -
5 P.M. Pulse 120; T 103.2. Sep 3/93. Lay quietly in bed, all night. Bowels moved. Given medicines.
Pulse 88. R 18. 6 Am. Pulse 120. R 22. T 99. 6 P.M. R 22. T 100.2. Again in bed today & is quite
" 4 ill. Bowels moved a number of times. Medicine given as directed; also hypodermic of morphine
for bowels. Has taken milk in small quantities & has retained same. Sep 4/93. Rested quite well,
all last night. Drank 1 glass of milk. During the night Pulse 84 R 19 T 99.4. Am. Pulse 96
R 18. T 99.4. Seems somewhat better today; has taken freely of milk & has retained same. Is quiet.
" 5 Sep 5/93. Quiet, resting well, last night. Took 1 glass of milk. Continues to improve some.
" 6 Sep 6/93. Rested well, most of the night. Today, is restless, at times, complaining of pain in chest.
Did not pass the urine; catheter used; does not take any solid food, but takes plenty of milk. -
" 7 Sep 7/93. Laid quietly in bed last night, but did not sleep much, if any. Has had retention for 2 days.
Required catheterizing this morning. Acts as if in pain. Talks in a plaintive manner. Bowels are
Constipated; given laxative; this afternoon, bowels seemed very full & patient was bloated. Enema
given; bowels afterward moved, but not very freely. Is in bed, all of today. Ate quite well at
" 8 dinner & drank freely of milk, the rest of the day. Sep 8/93. Rested quite well, most of last night.
" 9 Bowels moved once. Seems somewhat better today. Ate her supper this evening. Sep 9/93. Last night
" 10 was passed quite restfully. About the same today. Bowels moved. Sep 10/93. Quiet, but slept only about
" 11 2 hours, last night. Urinated. Takes no food, except milk. Sep 11/93. Rested well, last night. Took 1
" 12 glass of milk, during the night. About the same, today. Bowels moved twice. Sep 12/93. Was restless

Personal and Medical History of Annie. M. Frosberg

1893

Sep 12 (Contd) for an hour or so, last night. Was given a glass of milk; she then rested & slept well until morning.
" 13 Is very noisy and somewhat pugnacious today. Ate no supper. Sep 13/93. Last night, was restless
" 14 for 2 hours. Was given 2 glasses of milk during night; then went to sleep & slept well till morning. Is very
noisy today. Bowels moved once. Sep 14/93. Was restless 1 hour or so last night. Milk given with effect
" 15 of producing good rest & sleep. Passed urine once, during night. Is sitting up most of today. Seems some-
-what better. Passed urine & bowels moved. Ate quite well, but did not feed herself. Sep 15/93. Awake at
" 16 1 Am. Drank a glass of milk. Lay quietly in bed: bowels moved once. Continues to improve.
Sept 22 93 Complained of bowels. Gave dose of salts. Very untidy in habits most of the time.
" 27 Bowels constipated. Gave pills as dir. Appetite poor. Put on tonic Sept. 30-93 Appetite poor
" 30 Very untidy at times. Rests fairly at night. Will not help herself any. Have to dress and undress her & care for
Oct 7 her in every sense of the word. Oct 7 93 Bowels are very constipated & takes med. for the same
" 10 Every day. Oct 10-93 Very difficult to get her clothes on her as she resists & fought to day so that it
" 12 took the combined effort of 3 attdts to dress her and bring her out of the room. Oct 12 93 Hypodon-
dracal. Complains a great deal. Nurse up on ward. Would lie in bed all the time, if allowed
" 15 Requires several to get her up in the morning. Has gained in flesh. Oct 15 93 Extremly noisy
" 31 most of the day & very destructive to her own clothing & in seclusion. Oct 31 93 Appetite good.
Nov 29 Tidy in habits, but will not dress herself, nor help herself in any way. Nov 29 93 Appetite good
Very difficult to care for as she thinks she cannot help herself in any way, but when she gets
Excited she can walk as straight as any one in good health and can scream as loud as any one
but if not excited will talk so low to be scarcely understood. Neat in habits most of the time,
if kept out of bed, during daytimes, rests well at nights.

Dec 13 Dec 13/93. Appetite fair. Will not help herself in any way. Untidy in habits most of the time. —
" 26 Dec 26/93. Was visited by daughter, today. Dec 29/93. Visited, today, by sister & husband. Dec 31/93. Appetite
" 31 fair, but declines to help herself & resists waiting upon: complains of everything that is done for her. Always
whining & complaining of being sick. Resists being dressed. If kept up during the day, rests well, at
night. At times, is very untidy in her habits. —

1894
Jan 1 Jan 1/94. Was visited by brother, today. Jan 5/94. Today, visited by daughter. Jan 30/94. Today, Commenced
" 31 to give her treatment by Electricity & massage. Jan 31/94. Conduct & behavior do not change any. She
is very difficult to take care off as she resists so much. At times very untidy in habits. General health quite good.
Feb 3/ Feb 3/94. The last mentioned treatment has been continued, each day. Feb 4/94. Patient dressed herself, today,
" 23 for the first time, since her admission. Feb 23/94. Resists being brought down to treatment room, yet
is carried down, almost daily & treatment given her. She still continues to dress herself, mornings, but,
otherwise, will not help herself. She rests well, at night. Within the past few days, has walked down
-stairs, with the help of an attendant. Still very untidy in habits, at times. — — — — — —
" 24 Feb 24/94. This patient was committed here under the "law of 1893", recently declared unconstitutional. She was to day Taken out and Returned under "New Warrant" from Olmsted County.
Mch 1 94 Very determined not to go down stairs. Threw herself from chair also attempted to throw herself out of chair
when being carried down stairs for treatment. Mch 6 94 Treatment. Mch 11 94 Refused to get up had
to be dressed and undressed. Untidy about self. Mch 29 94 Appetite good. Habits very untidy
most of the time. Has to be dressed & undressed. Will not try to help herself April 18 94.

over 780 (180)

Personal and Medical History of Rose Mularkey

EARLEY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3467

Residence, 879 Juno St. St Paul, Minn

Date Admission, 8th September 1893.

Admitted by, Dr Phelps Hour, 7 Pm

How Sent, Jno. B. Oliver, Sh'ff, Ramsey County

Sex, Female

Age, 70 -

Civil Condition, married

Children, 4 living (3 dead)

Age Youngest Child, 32 years

Occupation, Housewife (husband laborer)

Degree Education, Fair only

Profession Religion, Roman Catholic

Habits, Not intemperate

Nativity, Ireland (that of parents also)

Physicians Committing, Arthur Ducker & D.C. Jones

Correspondents, Hugh Mularky, 879 Juno St St Paul

Family Physician, W. Ducker, St Paul.

No. for Year, 37

Insane Relatives, None

Cause Exciting, Senile dementia

Cause Predisposing, not stated

Form,

Accompanying Bodily Disorder, None noted

Suicidal or Not, not

Date of this Attack, One year ago

Duration, about one year

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 69.

Time of Leaving, Oct. 10th '93

Time in Hospital, 1 mo 2 ds.

Result, Rec.

Crossed off from discharge list, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Exam Oct. 9. 93 MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Quick

MEMORY:

Past Events, Good

Recent Events, impaired

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive,

REASONING POWER: Fair

Ordinary Subjects,

Own Mental State, Good

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Afraid she could not Had Rheumatism years ago Thinks she must have been "out of her head" the room they brought her down here, but says she is alright

EMOTIONAL STATE:

Normal, Calm, Calm

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, coherent

Voluble or Reticent, Talks rather reticently, answers all questions.

Personal and Medical History of Rose Mularkey

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2½" WEIGHT, 158 NUTRITION, Good

WOUNDS OR ABNORMALITIES, none.

TONGUE, Tremors, None Coatings, Promptness Movement, Normal

PUPILS, Equality, E. Size,

Response Light, ~~xxxxx~~ sluggish. Accommodation, Sluggish.

SIGHT, Uses glasses

HEARING, Good

COORDINATION, Arms, Good

Legs,

TREMORS, Hands, None Tongue, None

Facial Muscles, None. General, None

REFLEXES, Patellar, Eq. 3.

Other Reflexes,

ARTICULATION, Hesitating, Good Slurred,

FACIAL EXPRESSION, Good

SENSIBILITY,

HEART, Sounds are normal.

LUNGS, Seem in good condition.

EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal condition

MENSTRUATION, Ceased

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, clean Careless,

BOWELS, Normal, normal Constipated, Irregular,

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, ✓ Poor, Irregular,

PULSE, 80 strong RESP., normal TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, 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 Rose Mularkey

CARGET, FIDLAR & BRAMBERG, DAVENPORT, IOWA.

1893 Was brought here by Deputy Sheriff P.C. Haas, attended by Mrs Rancoeur, with the following history. There is no history of consanguinity, or heredity. She has been in present condition for last year. This, the first attack occurred about one year ago; commenced to wander about the streets in an aimless manner. Desire seems increasing, but is variable, at times are rational periods at irregular intervals. Derangement is now shown in her evidently suffering from senile Dementia (as shown by her wandering about as above stated). Last Monday Morning (Sept 1) at 2 Am, she was found in a barn, putting in some combustible material, for purpose of setting fire. She has no provocation for the deed. Barn was property of very near friend. Has shown no disposition to injure others except in matter of setting fire. Is neither suicidal nor has she filthy or destructive habits. Neither she nor her parents have been addicted to intemperance. Nor has she been subject to any severe disease or injury to head, nor been frightened or confined. Supposed cause of disease is Senile Dementia. On personal examination, she is found to be fairly nourished. Claims to know nothing about the firing of barn & the wanderings, stated above. She said she has no desire to any body harm & knew nothing about setting barn on fire.

Sep 8 Sep 8/93. Patient is in fair physical condition. Was, on admission, frust m B'. Pulse 70. R 20. Temperature normal.
" 9 Bodily condition clean. No injuries or peculiarities noticed. Sep 9/93. Slept well last night. Is very quiet to-day; behavior, seemingly, quite natural; talks quite sensibly. Appetite good; bowels regular; no cough noticed. No complaints or injuries to note. Sep 10/93. Again rested well, last night. Appetite is good.
" 11 Talks very little, but quite sensibly. So far, seems to have no delusions. Sep 11/93. Nothing new to note in
" 12 regard to patient's condition. Went out walking today. Sep 12/93. General health seems good. Goes out
" 14/ walking daily. Sep 14/93. No change, from day to day. Sep 16/93. Troubled today with diarrhoea.
" 17/ Sep 17/93. Seems quite well today. Does not complain of any ill-feeling. Sep 22/93. Patient has, from
m the first, rested & slept well at night. Has been quiet & well-behaved by day; tidy & clean in her habits. Goes out walking regularly, each day. No delusions detected. So far. Physical health has improved.
23 Appetite good. Sleeps well. Clean in habits. Is quiet in behavior. Does not seem to have any delusions
28 Removed to Dt 2.
Oct 10 Went home. Was very well behaved, quiet and ladylike in manner. Neat and clean. Worked daily on the ward. Was anxious to go home. Husband came and took them both. Seemed in good mental condition. Gave her own account. Described being out of his head that night but of not having the slightest remembrance of any of the happenings.

from page 176.

Personal and Medical History of Annie M. Fosberg

April 10/94 Visited by daughter. April 8/94 No any change. May 1.94. The same. May 27 94 Refused to walk
Also to go to dining room. Very hard to do anything will throw herself on floor. Will not walk
June 8 94. Refused to go to dining room. Has to be taken in. Is very hard to do anything with her, does not want to bathe.
June 11 Still refuses to walk to dining room. June 16.94 Bowels constipated. Refused medicine. June 28.94 Taken out on lawn
in wheel chair. Had to be carried down stairs. June 30 94 Taken out on lawn. Struggled very hard. Did not want to go.
July 3.94 Taken out on lawn. Says she expectorates blood. July 5th 7.94 Taken out on lawn. July 9.94 Complaining all the time. Wants to go
to bed. Has to be spoon fed and is very hard to make her eating. July 10 94 In bed all day. No complaint but wants to stay in bed.
July 11.94 Taken up and dressed but wants to stay in bed, threw herself on floor, had to be held afterwards, reseated in chair, wanted a great deal.
Very hard to make her drink or eat. July 14 94 Taken out on lawn. July 17.94 Visited by daughter. July 18.94 Taken out on lawn. July 20
July 20. 94. Out riding. July 21 94 Out riding. Wants to stay in bed all the time. July 25 94 Would not sit in chair, threw herself on floor, had to
be held in chair. Tore her dress when taken to dining room. Threw her dishes on floor, broke a sauce plate. Aug 3.94 Taken out on lawn.
Aug 8 94. Weak riding. Wants to stay in bed. Has to be held on bed. Has to be spoon fed. Does not want to eat. Refused medicine. Aug 11 94 Out on lawn.
Aug 30 94 Out for a ride. Aug 30 94 Out on lawn. Visited by daughter. Aug 31 94 Does not eat very much solid food but drinks
plenty of milk. Very restless at times, wants to stay in bed. Bowels constipated. Takes medicine. Dec 12 94. Appetite
good. Bowels constipated. Will not walk, has to be taken to dining room in chair. Dec 18 94 Visited
by daughter. Dec 19 94 Went home with daughter very little improved
Dec 28 94. Patient received on ward. Dec 29 94 From 6 C' Jany 3 95 From 6 B2 Jany 10 95. Bowels poor. Bowels
constipated. Insists about going to dining room, also about eating. Jany 15 95 Refuses to go to dining room also will not eat. Fed
with tube. Takes wine and tonic. Gave pills for bowels. Bowels moved quite freely. Jany 22 95 Powder given for bowels. Fed
with tube. Feb 5 95 In bed complains of sore throat. T 101 1/5 P 95. Bowels constipated. Powder given for bowels. Takes wine
Appetite poor. Feb 8 95 Gave med. for bowels. Bowels moved Feb 10 95 Sitting up, very restless about going to dining room
Feb 15 95. Does not eat well. Refused wine. Feb 19 / 95 Taken home.

Discharged.

Personal and Medical History of Rosina Dragisch

SEBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3477.
Residence, Stillwater Town; Washington Co.ty Minn.
Date Admission, 11th September 1893.
Admitted by, Dr. Kilbourne Hour, 7 P.M.
How Sent, Rudolph Schmick, Jof P. Washington Co.ty
Sex, Female
Age, 37
Civil Condition, Widowed
Children, one
Age Youngest Child, 10 years old
Occupation, Housewife
Degree Education, Common school.
Profession Religion, Catholic
Habits, Not intemperate
Nativity, Missouri (parents born in Germany).—
Physicians Committing, W. H. Ratt & G. E. Clark
Correspondents, Brother lives in Gaspen
Family Physician Dr. C. B. Marshall.

No. for Year, 47.
Insane Relatives, None
Cause Exciting, Death of husband
Cause Predisposing, not stated
Form,
Accompanying Bodily Disorder, None stated in history
Suicidal or Not, Not
Date of this Attack, August 1893
Duration, about 13 months.
No. of Attack, 2nd probably
No. of Admissions, 1st (here); has in private Hospital -
Age First Attack, about 36 years.
Time of Leaving, Sept 25-93
Time in Hospital, 14 days
Result, Died

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY: Very low when
Clear or Confused, admitted but to
Quick or Sluggish, bed and did not
MEMORY: get up again.
Past Events, No general Physical
Recent Events, Examination could
Special Subjects, be made S.L. Hulfish
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 Rosina Dragisch

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.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
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 Rosina Deragisch.

SARGENT, FIELD & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by C. L. Deragisch & his wife, with the following history. No history given of consanguinity or heredity. This is probably 2nd attack. She was in a private Hospital in St. Louis, Mo. for ½ months; a slight improvement made. First symptoms of this attack were manifested in August 1892, by melancholy, following death of husband. Disease seems increasing; is variable; but no rational intervals. Derangement is more shown, first about her husband; latterly, about her child. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Neither she, nor her parents, have been addicted to intemperance, nor has she been subject to any severe disease or injury to head. Supposed cause of disease is death of husband; — has been treated by several physicians. On personal examination, very little can be ascertained. She will not talk; sits quietly, with hands in motion. Appearance & manner, anaemic, very sad. Manner quiet. She will not eat. Says she cannot eat, or take medicine"; thinks she is dead & that every one else is dead. Does not sleep well.

Sep 11 Sept 11/93. On admission, was put on 6s.

" " Pulse 120 — Resp 33 — Quite clean. No bowels. Did not resent upon bathing. Regurgitating by steam. Did not sleep any during the night. Was catheterized. Rectal enema. Bowels moved twice.

" 13 Pulse 112 R 28 — Undressed herself several times during the day. Untidy in her habits. Eats quite well but regurgitating.

" 14 Urinated twice. Undressed herself four times during the day. Talks and swears most of the time. Regurgitating.

" 16 Was quite most of the day. Very untidy in her habits.

" 17 Very troublesome. Undressed herself often. Regurgitating. Sleeping most of the day.

" 18 Bit and struck ladies on the hand. Sick in bed. Appetite very poor. Will not eat unless fed. Very trouble some.

" 19 Still Sick. Ward Temp 100 ¾. P 120 — R 20. Pulse irregular. Drank a cup of tea. 7 — P M Temp 100 ¾. Pulse 120 — R 20. Pulse irregular.

" 20 8 — A M. Temp 102 — P 110 — R 18. Catheterized 9 — 9 M. Pulse irregular and weak. Gave enema and bowels moved freely. 11.45 A. M. Temp 103.4. Pulse 120. 1 P M Temp 1036 — Pulse 120. Seems unable to swallow. Vomited. 5 P.M. Temp 104 — Pulse 120 — R 34. 7. P.M. Temp 103.4. Pulse 120. R 38.

6 A.M. " 21 Temp 103 — Pulse 120 R 42 — Catheterized. Very weak. Seems unable to swallow.

6 A.M. " 23 Temp 103 — Pulse 120 R 44. Sponge bath given. Resisted during bath.

8 — P.M. Temp 103.8 Pulse 120 R 50. Takes no nourishment.

" 23 9 A. M. Temp 104 — Pulse 120. R 50. Brandy given every 2 hrs. 11.30 P.M. Moaning and tossing. Noisy the most part of the night.

" 24 Temp 100. Pulse 120 R 64. 1 P.M. unable to swallow. 3 P.M. died.

Fan temp chart on letter file.

Died

Personal and Medical History of Amir Louise Brown

From Page 296.

Sept to Dec. No change in condition, Nov. 30 Wt. 119#.

to Feb. 1, 1903 General health good: appetite good: bowels regular: sleeps well: takes out door exercise: does no work: is at times noisy and talks loudly to herself: expresses delusions: is at times quite obstinate: habits neat and clean. Dec. 1st. Wt. 120#.

Personal and Medical History of Lizzie Casey

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3473.
Residence, Fairbault, Minn
Date Admission, 13th September 1893.
Admitted by, D. Kilbourne Hour, 3 P.M.
How Sent, R.R. Mott. Jof P. Rice County
Sex, Female
Age, 24
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Dress-maker (Father a farmer).
Degree Education, very limited
Profession Religion, not a church member
Habits, very bad & low. (A streetwalker)—
Nativity, Minnesota (Parents born in Ireland)
Physicians Committing, H. A. Lang & C. A. Wagner
Correspondents, none given in papers
Family Physician Dr. A. Dunn & Hoffelm of Faribo

No. for Year, 43.
Insane Relatives, cannot be ascertained
Cause Exciting, Sickness in 1891.
Cause Predisposing, previous attacks.
Form,
Accompanying Bodily Disorder, not given in history
Suicidal or Not, not; but threatens others.
Date of this Attack, in 1891
Duration, 2 years or so.
No. of Attack, probably 3d (1st in 1891)—
No. of Admissions, 1 here (twice in St. Peters).
Age First Attack, about 27 years
Time of Leaving, Feb. 17th '94
Time in Hospital, 5 mo. 4 da.
Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Rather quick
MEMORY: Seems to be good
Past Events, Denies hearing ever
Recent Events, being put in Hospital
Special Subjects, before
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Seems correct
REASONING POWER:
Ordinary Subjects, Imp. and
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Sits quietly and looks at one as if think of something in an absent minded way— Rather critical in manner at times

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS: None determined
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Talks coherently
Voluble or Reticent,
Says has nervous head ache about time of menstruation. Back ache and trouble with her eyes. Says cause hard for head ache sometimes.

Personal and Medical History of Lizzie Casey

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 3/4 in WEIGHT, 130 lbs NUTRITION, ~~Fair~~ Pale
WOUNDS OR ABNORMALITIES, Large burn on right arm & several small ones on body
TONGUE, Tremors, None Coatings, Pale Promptness Movement,
PUPILS, Equality, Equal Size,
Response Light, Normal Accommodation, Normal
SIGHT, Imp. and
HEARING, Good
COORDINATION, Arms, Good
Legs,
TREMORS, Hands, None Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Equal 6—
Other Reflexes,
ARTICULATION, Hesitating, Normal Slurred,
FACIAL EXPRESSION, Has a an intelligent look
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM. Uterus low & displaced slightly backward—Vaginitis & some eruption
MENSTRUATION, Regular but painful
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Neat in appearance Clean, ance Careless,
BOWELS, Normal, Constipated, Cannot state Irregular,
APPETITE, Good, Medium, Medium Poor,
SLEEP, Good, Fair Poor, Irregular,
PULSE, 70 RESP., 22 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 dead
Father or Pat. Relations, Father dead
Brothers or Sisters, None

Personal and Medical History of Lizzie Casey

COBURT, BOLAU & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Sheriff C. N. Stewart, attended by Wm C. N. Stewart, with following history. There is none of Cons anguinity; + as to heredity, cannot be ascertained. This is probably 3° attack, the first occurring in 1891; She has never been right since 1st attack of "Grippe" then. Has been at St Peter twice; seemed improved by the treatment. Disease seems increasing, but is variable. Derangement is now shown by her manner + actions; throws low, obscene epithets at all her relatives + acquaintances. Threatens others + has tried to get dangerous weapons. Has not attempted suicide; No filthy + destructive habits. There is no history of intemperance, + think there is none of any severe disease or head injury. Cause of disease is the Sickness in 1891. On personal examination, is loquacious, obscene, accusing everybody of wanting to have connection with her. Said the Sheriff + officers of the Law have sought sexual intercourse with her since she was a little girl. She kept up a continual abuse of the officers of the Law. Was talkative + animated. She is heard to use threats, abusive language; attempts to purchase weapons; is a street walker.

Sep 13 Sep 13/93. Patient is in fair physical condition. On admission, was put on B 3.
Temp 98.4. Pulse 72. R 18 Very quiet during the day Says she was unjustly brought here. Appetite good. Bowels constipated. Complains of pain in the stomach. Slept well last night
" 14 Has been quiet through the day and rested well at night
" 15 Causes no special trouble on the ward. Went to chapel today
" 23 Has rested well each night. Will behaved on the ward.
" 26 Appetite good. Tidy in habits. Helps some in the dining room
" " Says she was sent here to be treated for local trouble - Probably has some pelvic trouble. Put her upon L. Potion 3 ss tid. Complains of headache and pain in the eyes

Oct 12 93. Very impudent and saucy. Says didn't come here to work. Inclines to pick at and make trouble with the other patients. Complains of headache very often. Has complained of pustules. Put under treatment of I. of pot: vivo. Externally ol. ac. carbolic. Receives gynaecological treatment every other day Bi. Chloride douche on following day after treatment. Says she came here for local treatment
Oct 19 93. Moved to B 1 Oct 31 93 Appetite good. Sleeps well. Is very sarcastic, calls the attds. hard names talks obscenely. Menstr. about 25th Nov 4 93. Removed to C 3 Nov 8 93 Appetite good. Sleeps well. Complains a great deal. Quarrels with other ladies. Menstr. about 24th Talks much
Dec 16 93 Appetite good. Talks to ladies and tells them not to work. Also uses obscene language to ladies. Sleeps well. Clean in habit. Removed to Annex Dec 16 93. Febry 6 94 Works a little some times on sleeping flat. Is rather quiet. Habits clean. February 17th 1894. Went home.

Personal and Medical History of

Personal and Medical History of Amanda Drenckhahn

HERBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3479.
Residence, 305 Ewing St. Winona, Minn
Date Admission, 18th September 1893. —
Admitted by, Dr. Eby — Hour, 6 45 P.M.
How Sent, H. A. Allen, Court House Winona Co.
Sex, Female
Age, 21 years
Civil Condition, single
Children,
Age Youngest Child, —
Occupation, Housework
Degree Education, Common School
Profession Religion, not a Church member
Habits, not intemperate
Nativity, Minnesota (Parents born in Germany).
Physicians Committing, H. S. Wahl & J. B. McGaughey.
Correspondents, none given in papers.
Family Physician C. N. Clark, Charles Minn

No. for Year, 49.
Insane Relatives, none
Cause Exciting, not known
Cause Predisposing, not known
Form,
Accompanying Bodily Disorder, none noted in history
Suicidal or Not, not
Date of this Attack, 3 weeks ago
Duration, 3 weeks
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 21 years
Time of Leaving, died Sept 24 93
Time in Hospital, 6 days
Result, died.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY: Put to bed on admission very rest-
Clear or Confused, less taxing self
Quick or Sluggish, about four days
MEMORY: side of the bed to
Past Events, the other and raving
Recent Events, until she died
Special Subjects, PERCEPTIVITY No general physical
Alert or Dull, examination could
Correct or Illusive, be made
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 Amanda Drenckhahn

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.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
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 Amanda Dreuckhahn

ROBERT, FICKE & CRAMBLER, DAVENPORT, IOWA.

1893

Was brought here by Sheriff John Gay, attended by sister, Minnie Dreuckhahn, with following history. There is no history of consanguinity, or heredity. This is 1st attack; symptoms appearing 3 weeks ago, by hiding & crying; said she would not stay in the room on account of electricity. The disease seems to be increasing; is not variable; no rational intervals. Derangement is now shown by crying, draws her face, moves her extremeties constantly, and still sees snakes. Is neither disposed to injure others nor suicidal. Is filthy in her habits. Before accession of disease, was more obstinate and irritable. Neither she, nor her parents, have been addicted to intemperance. Had scarlet fever 12 years ago. She has not been restrained or confined. Cause of the disease, not known. Has been treated by anodynes. Temporary rest secured; no good effects. On personal examination, face is found drawn; there is restlessness. She will say nothing to examiners. Moves the muscles of face, extremities & has the appearance of being frightened. Is wild & excited; crying much of the time. She still believes that she is spurned by snakes & tries to leave the house.

Sept 18 Sept 1893. On admission, was in a very nervous excited condition; is found to be in quite poor physical condition. Had to be carried up to ward. Was put on Ct.

" 19 Bodily condition dirty on admission. Rested a good deal at bath. Very restless. Throws herself on the floor. Talks to herself in an indistinct manner. Will not eat. Bowels constipated. Coughs, some complains of sore throat. Temp 99 1/5.

" 20 Was put to bed. Very restless, tossing about all the time. Refused to get out of bed. Refuses to eat. Bowels constipated.

" 21 Drank about half cup of milk. Restless, tossing about. Requires to be held in bed most of the time. Strike her eye against bed stead. Caused to turn black.

" 22 Put in restraint. Drank a little milk. Sent to sick ward.

" 23 In restraint. Hypodermic given. Slept until 12. Noisy and restless after that time. Temp 105.2. Pulse 112. R 24. Visited by husband and sister. During the night was in constant motion. Removed part of the time. Injured herself a good deal by throwing herself around, striking against bed etc.

" 24 Temp 105.4. Sponge bath given. Mouth very foul and bad. Ice water put to head. Drank half cup of milk at 8 00 A.M. 4 30 P.M. Sponge bath, ice to head. Drank 1/2 cup milk.

9 P.M. Very restless. Tossing and struggling at intervals. Kept in cloths to head all night. Drank 2 1/2 cups of milk during the night. 2 30 Temp 106.4 at 4 30 Temp 104.6. at 6 00 died.

Died

Personal and Medical History of

Personal and Medical History of Juliane Braun

BERRY, FOLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3483.
Residence, Jasco. Yanca County.
Date Admission, 19th September 1893.
Admitted by, D. Kilbourne Hour, 7.30 P.M.
How Sent, E. P. Collester Jr. C. Yanco County.
Sex, Female.
Age, 29 years.
Civil Condition, Single.
Children, None.
Age Youngest Child, —
Occupation, Housework; (father a farmer).
Degree Education, Common School.
Profession Religion, Lutheran Church.
Habits, Probably good.
Nativity, Germany (that of parents also).
Physicians Committing, H. J. Young & J. A. Swartwood.
Correspondents, (Brother) Wm. Braun, Wesseca, Minn.
Was treated last Spring by D. Harrington, Mankato.



No. for Year, 53.
Insane Relatives, None.
Cause Exciting, Supposed she some sickness, last spring.
Cause Predisposing, not stated.
Form,
Accompanying Bodily Disorder, None mentioned.
Suicidal or Not, Not.
Date of this Attack, Last March.
Duration, about 6 months.
No. of Attack, 1st.
No. of Admissions, 1st.
Age First Attack, about 28 years.
Time of Leaving, Mar. 22. 1893.
Time in Hospital, 4 yr. 6 m. 3d.
Result, Diss. Aug. 10. 1898. Much improved.



EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined Sept 27-93

MENTAL ACTIVITY:
Clear or Confused, Mostly clear
Quick or Sluggish, A little sluggish

MEMORY:
Past Events, Good
Recent Events, Impaired somewhat
Special Subjects,

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

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

GENERAL DESCRIPTIVE REMARKS:

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

DELUSIONS: None demonstrated
Systematized or Not,
Special Subjects,
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Talks willingly but sits quietly most of the time

Personal and Medical History of Juliane Braun

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1 1/4 in. WEIGHT, 131 lbs. NUTRITION, Good.
WOUNDS OR ABNORMALITIES, None.
TONGUE, Tremors, None. Coatings, None. Promptness Movement,
PUPILS, Equality, Equal. Size, Normal.
Response Light, Normal. Accommodation, Normal.
SIGHT, Good.
HEARING, Good.
COORDINATION, Arms, Good.
Legs, Good.

Case No. 3483. Juliane Braun Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal condition
MENSTRUATION, Always regular until now. Has been suppressed last 4 mos
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean, Careless,
BOWELS, Normal, Normal, Constipated, Irregular,
APPETITE, Good, Good, Medium, Poor,
SLEEP, Good, Sleeps well, Poor, Irregular,
PULSE, 74 RESP., 18 TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Insanity
Father or Pat. Relations, " "
Brothers or Sisters, " "

Personal and Medical History of Juliane Braun

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3483.

Residence, Iasco. Itasca County.

Date Admission, 19th September 1893.

Admitted by, Dr Kilbourne Hour, 7.30 PM.

How Sent, E. P. Collester Jr. Co. Itasca County.

Sex, Female.

Age, 29 years.

Civil Condition, Single.

Children, None.

Age Youngest Child, —

Occupation, Housework; (father a farmer).

Degree Education, Common School.

Profession Religion, Lutheran Church.

Habits, Probably good.

Nativity, Germany (Mat of parents also)

Physicians Committing, H. J. Young & J. A. Swan.

Correspondents, (Brother) Wm Braun, Wescca,

Was treated last Spring by Dr Harrington, Mankato.



No. for Year, 53.

Insane Relatives, None.

Cause Exciting, Suppressed like some sickness, last spring.

Cause Predisposing, not stated.

Form,

Accompanying Bodily Disorder, None mentioned.

Suicidal or Not, Not.

Date of this Attack, Last March.

Duration, about 6 months.

No. of Attack, 1st.

No. of Admissions, 1st.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined Sept 27-93 S.E.O.

MENTAL ACTIVITY:

Clear or Confused, Mainly clear.

Quick or Sluggish, A little sluggish.

MEMORY:

Past Events, Good.

Recent Events, Impaired somewhat.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert.

Correct or Illusive, Correct.

REASONING POWER:

Ordinary Subjects, Good.

Own Mental State, Good.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm, Calm.

Indifferent,

Exalted,

Depressed,

DELUSIONS: None determined.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent.

Voluble or Reticent, Talks willingly but sits quietly most of the time.

Personal and Medical History of Juliane Braun

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1 1/4 in. WEIGHT, 131 lbs. NUTRITION, Good.

WOUNDS OR ABNORMALITIES, None.

TONGUE, Tremors, None. Coatings, None. Promptness Movement,

PUPILS, Equality, Equal. Size, Normal.

Response Light, Normal. Accommodation, Normal.

SIGHT, Good.

HEARING, Good.

COORDINATION, Arms, Good.

Legs, Good.

TREMORS, Hands, None. Tongue, None.

Facial Muscles, None. General, None.

REFLEXES, Patellar, R 5 - L 4 -

Other Reflexes,

ARTICULATION, Hesitating. Slurred,

FACIAL EXPRESSION, Dull.

SENSIBILITY,

HEART, Sounds are normal.

LUNGS, Seem in good condition.

EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal condition.

MENSTRUATION, Always regular until now. Has been suppressed last 4 mos.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean, Careless,

BOWELS, Normal, Normal, Constipated, Irregular,

APPETITE, Good, Good, Medium, Poor,

SLEEP, Good, Sleeps well, Poor, Irregular,

PULSE, 74 RESP., 18 TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Dies Insanity.

Father or Pat. Relations, " "

Brothers or Sisters, " "

Personal and Medical History of Juliane Braun

EARLY, FIDLER & CHAMBERS, DAVENPORT, IOWA

1893 This patient was brought here by Henry Reynolds, Sheriff of said County, attended by Wilhelm Braun, brother of said patient. The following is history of the case. No history given of consanguinity or heredity. This is 1st attack; symptoms appearing last March, when she was sick in Mankato; but no particulars can be learned regarding this illness or results of treatment, except from her present appearance. Disease now seems stationary; variable, with irregular rational interval. Derangement now manifested on no particular subject. Is morose & indifferent. Has shown a disposition to injure others. Has no filthy or destructive habits, nor is she suicidal. No peculiarities as previously shown. No history of intemperance, nor of any severe disease (except as above mentioned) or head-injury. She has not been restrained or confined. Cannot learn exact cause of disease, supposed to be the illness, last spring. She is stupid indifferent & averse to conversation. She says: "I am going home & wear my best clothes, every day." She runs away from home; will sit in a chair all day & say or do nothing.

Sep 19 Sep 19/93. Patient, on admission, is in poor physical condition. Has put on 13 P 82. R. 18. T. 98 4/5. Bodily condition. Quite dirty. No bruises or peculiarities.

" 20 Behavior very quiet on ward. Helped a little on ward with work. Does not talk any & spit, Appetite good. Sleep: Rested well all night. Bowels moved P 78. R. 18 T. 98 4/5

21. The same. Slept well. Sept 22 93 The same. Slept well, Sept 23 93 The same. Ped on time

23 Rested well at night.

27. Slept well. 28th Rested well 29 30 Oct 1 2 93 The same.

Oct 3. Very quiet on ward. Helps well in the dining room. Appetite good. Bowels regular. Talks but very little. Rested well Sept. 3 93 Has been very quite and well behaved in every way since admission. Works daily in dining room. Talks sensibly neat and clean. General health good. Asks to go home

Oct 31 93 Appetite good & general health seems good. Very quiet on hall & tidy about self.

Nov 7/93 Moved to A. Nov 2 93. Moved to B. Nov 9 93 Appetite good. Good help on ward. Does not talk any. Very quiet in behavior. Gen health good & rests well at nights.

Dec 12 Dec 12/93. Appetite good. Helps in the ward during-room at every meal. Very nice & quiet in behavior. Neat and tidy in habits.

- 13/93 Dec 13/93. Restless most of the night; slept but 3½ hours. Dec 14/93. Menstruated. Dec 31/93. Is very quiet. Does not talk

1894 any. At times, is rather silly in actions. General health is good. — — —

Jan 3 Jan 3/94. When going to laundry today, with clothes, she tried to make her escape. Did not want to go in dining room

" 15 for dinner. Wished to be allowed to walk home & was crying for about an hour. Jan 15/94. Fighting for her clothing

" 27 to return home. Jan 27/94. Refused to go to bed last night & had to be undressed by force. Said "she did not want to

" 28 remain here, in this House; wished to return home". Jan 28/94. Had to partly dress her, this morning. — —

" 31 Jan 31/94. With exception of above recent special notes, patient continues about as usual. Health is good.

Feb 2/ Feb 2/94. Excited & fighting, today. Patient in seclusion. Feb 14/94. Menstruated. Feb 26/94. Her general health is

14/94 good, but there seems no change in her mental condition. —

Mar 3 Mar 3/94. Patient was committed here under the "Law of 1893" recently declared unconstitutional. She was, today, taken out and Returned under "new Warrant" from Olmsted County.

Mch 10 94 Fighting & in dining room. Cause unknown. Mch 10 94 Menstruated. Mch 29 94. Gen. health good

No change mentally. April 2 94. Out walking. Tried to run away. Very difficult to get back to ward

Apr 30 94 General health good. Mentally not any change. May 6 94. Menstruated. May 18 94. General

health good. Mentally not any change. May 31 94. Tried to run away per at times.

Personal and Medical History of Juliane Braun

1894 May 31. Appetite good. Helps some in dining room. June 6 94 Is very stubborn does not want to go to dining room to eat. Bowels quite a good deal. July 2 94 Menstruating. July 6 94 Tried to run away several times, while out walking.

July 31 94. Very resistive most of the time. Appetite good. Bowels regular. Goes walking and riding. Aug 2 94 Menstruating. Aug 29 94 Appetite good. Behavior quiet. Very resistive at times. Tries to run away at times. Goes walking & riding.

Sept 2 94 Fainted in dining room. Appetite good. Works in dining room. Bowels regular. Oct 10 94 Appetite good. No change in behavior. Oct 31 94 Appetite good. Very resistive at times about going to dining room. Goes walking and riding. Nov 4 94 Crying and very stubborn all day. Nov 7 94 Stubborn about going to meals. Nov 30 94 Appetite fairly good. Works some in dining room. Very resistive.

Dec 3. 94 Very stubborn resisted about going to dining room crying & pulling for about 1 hr. 6 dy. Dec. 31 94 Appetite good. Very stubborn at times. Works in dining room. Goes walking. Jany 27 95 Menstruating. No change since to date.

Feb 14 95 No change. Feb 28 95 Appetite good. Bowels regular. Very stubborn & resistive at times. Menstr. regular. Works in dining room.

Mch 31 95. Appetite good. Bowels reg. Quite resistive at times. Works in dining room. Goes walking and riding. Apr 26 95. No change. Gen health good. May 2 95 Menstruating. Very stubborn at times.

May 31 95 Fainted this noon. June 4. Appetite good. Bowels regular. Quiet. Stubborn some times. Goes riding & walking. Works in d. r. June 28 No change. July 18 Menstr.

Aug 7 Fought with nurses while bathing. Sept 4 Quiet. Appetite good. Sleeps well. Works in dining room. Goes walking & riding. Oct 18 Very stubborn at times. Bowels usually constipated. Nov 8 Bowels regular. Works in dining room. Gen. health good. Jan 8 Works in employees dining room.

Jany Works on ward. Feb. 29 Very stubborn most of time. Works in dining room. Appetite good. Bowels irregular. Goes riding & walking.

Mar 7 Assists with work some: neat in habits: appetite fair: bowels regular: sleeps well: Has delusions. Apr 6 Has delusions. Very resistive at times. Menstr. regularly. Appetite good. Sleeps well. Bowels regular. May 30 Assists with work: appetite good: Bowels constipated. Summary Nurse's Notes by Dr. S. S. Phelps: July 7 Appetite good. bowels regular: stupid: at times very resistive: menstr. regular: works in Centre Dining room. Nov 96 No change: Jan 97 Appetite not very good: bowels regular: talks very little & only to answer questions: quite silly: works every day: Apr 97 No change: Aug 24 Struck one of the nurses: Aug 29 Very disagreeable: Appetite good: bowels regular: works in Dining room. Oct 5 Transferred to Infirmary: Put upon milk diet: mouth washed out with listerine & dusted with bromith. Oct 11 Has remained in bed: Takes light diet: Tonic & nine grns: Bowels regular: Mouth washed four times a day: Oct. 15 Mouth washed out steadily, has now about healed up. Is up on ward: Is taking some interest in work: Appetite good. (Signed by Dr. S. M. Phelps) Mar 21 98 Much Improved. Having brightened up a great deal during past few months: Is not entirely well, but can probably get along, tho' she shows a mild defectiveness.

Personal and Medical History of Mary Sander

EGBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA



Whole No. 3484

Residence, 762 Jenks St. St

Date Admission, 20th September

Admitted by, Dr. Kilbourne Hour,

How Sent, John. B. Oliver, Jof

Sex, Female

Age, 45

Civil Condition, widowed

Children, Two

Age Youngest Child, 16 years

Occupation, Housewife, (Husbai

Degree Education, limited

Profession Religion, German Lutheran

Habits, Not intemperate

Nativity, Germany (parents also born there)

Physicians Committing, W. Robillard and Wm Dinwoodie

Correspondents, (friend) Wm Riether, 752 Lawson St. St Paul / Mrs Zuzeski 785 Jenks St.

Family Physician Dr. D. W. Robillard, St Paul. Minn

No. for Year, 54

Insane Relatives, None

Cause Exciting, Epilepsy

Cause Predisposing, Previous attack

Form,

Accompanying Bodily Disorder, Epilepsy

Suicidal or Not, Not

Date of this Attack, Probably continuous -

Duration, Probably sometime -

No. of Attack, 2nd probably (one, 11 years ago) -

No. of Admissions, 1st here

Age First Attack, about 34 years

Time of Leaving, May 20. 1899

Time in Hospital, 1 yr. 8 mo.

Result, Died - Pulmonary Hemorrhage.

EXAMINATION ON ADMISSION.

Exam. Oct 12. 93 by Dr L Phelps.

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,

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,

GENERAL DESCRIPTIVE REMARKS:

Had spells when small, then got over them, but have returned last year or so. Had a good deal of trouble. Husband left her. Thinks trouble brought spells on again.

Personal and Medical History of Mary Sander

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 Ft WEIGHT, 95 Lbs NUTRITION, Fair

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, None Coatings, Promptness Movement,

PUPILS, Equality, Equal Size, Normal

Response Light, Normal Accommodation, Vy.

SIGHT, Good

Case No. 3484 Mary Sander. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

Other Reflexes,

ARTICULATION, Hesitating, Prompt. Slurred,

FACIAL EXPRESSION, Worried.

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION, Irregular. Headache.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, clean Careless,

BOWELS, Normal, normal Constipated, Irregular,

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 70 RESP., 20 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 Mary Sander

EGBERT, FISCHER & SAUNDERS, DAVENPORT, IOWA



Whole No. 34824

Residence, 762 Jenks St. St

Date Admission, 20th September

Admitted by, Dr Kilbourne Hour, 7

How Sent, John. B. Olivier, Jof

Sex, Female

Age, 45

Civil Condition, widowed

Children, Two

Age Youngest Child, 16 years

Occupation, Housewife, (Husbai

Degree Education, limited

Profession Religion, German Lutheran

Habits, not intemperate

Nativity, Germany (parents also born there).

Physicians Committing, W. Robillard and Wm Dinwoodie

Correspondents, (friend) Wm Riether, 752 Laurem St. St. Paul; Mrs Zuzyki 785 Jenks St. —

Family Physician Dr. W. Robillard St Paul Minn

No. for Year, 54

Insane Relatives, None.

Cause Exciting, Epilepsy

Cause Predisposing, previous attack

Form,

Accompanying Bodily Disorder, Epilepsy

Suicidal or Not, not

Date of this Attack, probably continuous —

Result, Died — Pulmonary Hemorhage.

EXAMINATION ON ADMISSION.

Exam. Oct 12.93 by Dr L Phelps. 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:

Had spells when small, then got over them, but have returned last year or so. Had a good deal of trouble. Husband left her. Thinks trouble brought spells on again.

Personal and Medical History of Mary Sander

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft WEIGHT, 95 lbs NUTRITION, Fair

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, None Coatings, Promptness Movement,

PUPILS, Equality, Equal Size, normal

Response Light, normal Accommodation, V.

SIGHT, Good

HEARING, Good

COORDINATION, Arms, some tremor.

Legs,

TREMORS, Hands, fine. Tongue, None

Facial Muscles, General,

REFLEXES, Patellar, Eq. normal 5.

Other Reflexes,

ARTICULATION, Hesitating, Prompt. Slurred,

FACIAL EXPRESSION, worried.

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION, Irregular. Headache.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, clean Careless,

BOWELS, Normal, normal Constipated, Irregular,

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 70. RESP., 20 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 Mary Sander

EBERT, PIGLER & CHAMBERS, DAVENPORT, IOWA.

1893

Has brought here by Deputy-Sheriff R.C. Haas, and attended by her Son, Henry Sander, with the following history of case. There is no history given of consanguinity or heredity. This is not 1st attack; She had one 11 years ago; duration 6 months; when she was confined in Iowa Insane hospital; improved under the treatment there; first symptoms of this attack manifested by Epilepsy, once or twice a day. The disease seems increasing; no rational intervals. Derangement now shown by acute mania as a result of this epilepsy. — Has shown some disposition to injure others, but is not suicidal. Has filthy & destructive habits. Showed precursories, previous to accession of the disease. There is no history of intemperance. Cause of disease is Epilepsy. No recent treatment. On personal examination, patient is haggard, anaemic, nervous & violent, and epilepsy decidedly aggravated. There was pus in coherent Gibbering & both examiners. She kicked and fought, attempted to run away, break windows &c &c. Is weak.

Sep 20 Sept 20/93. The patient, on admission, is in poor physical condition. When being taken up to ward, fought, kicked and resisted. Was put on Bst

" P. 68. R. 22 T. 96⅘ Bodily condition & bath: Very dirty & fought when being bathed. Had bruises on her nose, no other bruises or peculiarities. Mental Behavior: fought several times during the day. Appetite poor. Bowels constipated. P. 70. R 20. T. 98. Sept 22 93 Has been very troublesome, quarrels with the other patients, talks continually going to harvest, eats very little, drank about 1 quart of milk during the day

23 Sept 23. 93. Appetite very poor, very quarrelsome, annoying the other patients, constantly going into trouble with them. Sept. 24. 93. Somewhat quieter in behavior, complains of being cold. Sept 25. 93 Quiet in behavior, has made no trouble the last few days. Appetite very poor, Eats scarcely anything. Bowels have not moved, seems very constipated. Sept 26. 93 Fought attdts this morning. Tried to bite. Has been extremely noisy all day. Ate very little, but drank some milk. Sept 27 93 Quite noisy all day. Annoying other patients. Sept 28. 8th day Has been somewhat quieter in behavior, appetite very poor, takes very little food. Except milk. To menstruating to day. Sept 29. No change. Sept 30. Quiet all day.

Oct 1. No change Oct 2. 93. Appetite improving. Is taking medicine more regularly; quiet all day.

" 3. Had fit this morning. Was quite noisy not all afternoon, crying and singing. Oct 4. 93. Quiet all day.

" 4 Has quieted down somewhat in behavior. Sept. 29. 93 Violent at times, bites at every one she can reach,

" 19 has been very noisy, after having fit. Oct 19. 93 Quiet in behavior has had no fits for about 2 weeks,

" 30 works some on ward. Oct 30. 93. Has had several fits of late. Has fallen twice & cut her head during the last week. Requires holding to prevent her from striking other patients. appetite good Was sick in bed 2 days Fell & cut her head. Has been quite noisy for about a week, bites at every one & strikes patients

Nov 30 Complains of headache and constipation. Talks a good deal at home. Nov 30. 93 Appetite good, Behavior quiet Neat in habits. Sleeps well. Helps some in dining room. Complains of constipation a great deal.

Dec 10 Dec 10/93. Had 6 fits during the day. Bruised her forehead, mouth & chin. Tongue is badly bitten. Eye blacked.

" 11/17 Has been in bed all day. Dec 11 93. Very cross; striking other patients; is also quite noisy. Dec 12/93. Is very

" 15 violent today. Fighting all the time. Scratches & tries to bite. Removed to B3d. Dec 15/93. Violent. Has now been

" 31 in restraint 14 days. Takes no food, except milk. Dec 31/93. Somewhat more quietly-behaved, of late.

1894 Appetite fair; bowels constipated. Talks very little.

Jan 18 Jan 18/94. Has continued somewhat better behaved. Was today transferred to B3. Jan 19/94. Complains of consti-

" 19 " 20 -pation: Given laxative. Jan 21/94. Had 2 fits last night. Jan 22/94. Complains of headache. Is sick;

" 23 vomiting. Had 6 fits during the day. Moved to C3. Jan 23/94. Has been in bed all day. Constipation

Personal and Medical History of Mary Sander

1894

Jan 23 cont'd persists; given enema; bowels afterward moved. Complains of head ache. Does not eat very well.

" 24 Jan 24/94. Remains in bed. Behavior very silly. Appetite poor. Jan 26/94. Is more quiet, today.

" 26 " 27 Slept a good deal in the day time. Does not eat much but drinks milk. Jan 27/94. Quite noisy; is in room. Bowels constipated. Transferred to B1st.

Feb 10/94 Feb 10/94. Has sick in bed a few days, after coming on this ward; also quite noisy. Feb 22/94. Has much improved in her behavior, of late, and now helps some with work on the ward. Still inclined to be irritable.

" 23 Feb 23/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. She was, today, Taken out and Returned under "new bar rant" from Winston County.

March 24 Quiet in behavior. Habits clean. Neat in appearance. Walks steadily on ward. Has been quite well for sometime. Appetite rather poor. Bowels constipated. Mch 2 94. Has had 6 fits during the day. Complains of severe pain in head & side. Mch 3 94. In bed. Takes very little nourishment. Bowels constipated. Still having fits. April 1 94. Violent in behavior. Talks vulgar & profane. In seclusion pre half day. Stays in bed April 2 94. Walks some on ward. Appetite good. Complains some of severe headache. May 15 94 In restraint 4 days, takes very little nourishment, except milk. May 29 94 Works some on ward. Talks quite rationally. Behavior quiet.

June 94 Works on the ward. Appetite good. Goes out riding & walking. Habits clean. June 20 94. Has been in bed much, had fits.

July 20. Did not menstruate prior the first part of May. July 21 94. Bowels not very regular. Aug 3 94 Has been in bed nearly 2 weeks had fits occasionally. Appetite good. Bowels constipated, Complains of some headache. Menstruated about the 25th of month

Sept 27 94. Complains of severe headache followed by a succession of fits. Behavior is usually violent from 1 to 2 weeks but as a general rule will stay in bed without restraint. Goes riding and walking.

Oct 3. 94 Behavior quiet for the last month. Works some on ward. Appetite rather poor. Bowels constipated

Nov 4. In bed all day complained of severe headache. Nov 7 94 Had fits during nights. Nov 8 1894 Has had several fits during the day & has taken no nourishment. Nov 20 94 Behavior very violent. Was put in restraint.

Nov 3. 94 Behavior quiet, but is still in bed. Appetite good. Bowels regular. Dec 3 94. Has been quite well for some time past. but has complained of severe headache & been in bed for a day or so at a time during the month. Appetite fair. Bowels constipated. Works some on ward. Jany 30 95 Complains of headache a great deal. Behavior violent at times. In bed during the latter part of the month. Mch 12 95 Complains of severe headache, succeeded by fits. Mch 14 Behavior violent and extremely noisy. In restraint part of the time. Mch 17 95 Appetite good. Bowels constipated. Apr 22 95 quite well during the past month. Works some on ward. Appetite fair. Bowels constipated. Goes riding and walking.

May 2 95 Complains of severe headache, vomiting nearly all day. followed by a succession of fits. May 4 95. Will not stay in bed, is violent. Up on heater & pounding the door and windows. Was put in restraint. May 6 95 Taken out of restraint this morning. Is very much disturbed but stays in bed. May 14 95. Up on ward. Is more tractable but not violent. May 27 95. Up on ward, quite quarrelsome, if disturbed. June 25 Has been quite well during past month. Appetite good. Bowels reg. Works some on ward. July 3 In bed. Complains of severe headache. Had four or five fits during day. July 5 Very excited. violent. would not have her clothes and room up at window still pounding on screen. In restraint July 5 & 6. July 7 Taken out of restraint, stays in bed but is cross & excitable. Appetite good. Bowels regular. July 14 Up on ward Aug 28 In bed complains of severe headache. Had several hard fits during day. Aug 29 In bed. Talks & scolds noisy but is not violent.

Aug 31 In bed very cross & excitable but not violent. Sept 1 Quiet. Works some on ward. Appetite good. Bowels constipated. Goes riding & walking. Oct 17 Up on ward. Works some. Appetite good. Nov 1 Complained of headache followed by a succession of fits. Behavior Violent & noisy part of time. Nov 14 Up on ward. Behavior quiet. Works on ward.

Personal and Medical History of Elizabeth Clark.

EBERT, FIDLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3488.

Residence, Plainview, [illegible]

Date Admission, 28th September

Admitted by, Dr Phelps — Hou[illegible]

How Sent, Walcott Kennedy, Jo[illegible]

Sex, Female

Age, 75 years.

Civil Condition, Widow

Children, Two (died at [illegible]

Age Youngest Child, ——

Occupation, Merchant (?)

Degree Education, Common Sc[illegible]

Profession Religion, M. E. Church

Habits, not intemperate

Nativity, New York (father, Scotland; Mother, Canada).

Physicians Committing, N. S. Jeffs and J. O. Waste

Correspondents, Dr. Will C. Clark (son) Plainview, Minn.



No. for Year, 58.

Insane Relatives, None

Cause Exciting, Shaking Palsy

Cause Predisposing, not given

Form,

Accompanying Bodily Disorder, Paralysis agitans

Suicidal or Not, Not

Date of this Attack, 5 years ago (after husband's death)

Duration, about 5 years

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 70.

Time of Leaving, Aug. 8'96.

Time in Hospital, 2 yrs. 10 mo. 10 da.

Result, Died - Heart failure.

EXAMINATION ON ADMISSION.

Ex. Oct 12 93. Dr S. D. Phelps.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused.

Quick or Sluggish, Sluggish.

MEMORY: Good

Past Events,

Recent Events, not good

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER: Impaired.

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Health poor for over 30 years.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Rather depressed

DELUSIONS:

Systematized or Not, none determined

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Talks quite freely

Coherent or Incoherent, Not Coherently in a weak childish way.

Voluble or Reticent, minded

Personal and Medical History of Elizabeth Clark

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2 in. WEIGHT, 102 lbs. NUTRITION, Poor

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, None Coatings, Promptness Movement,

PUPILS, Equality, Equal Size, normal

Response Light, very sluggish Accommodation, very sluggish.

SIGHT, Impaired by age

HEARING, Impaired in both ears

COORDINATION, Arms, Impaired

Case No. 3488. Elizabeth Clark. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

FACIAL EXPRESSION, Normal and anxious.

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Had Lung fever / Pneumonia about 15 yrs ago

EXAM. URINE.

GYNAECOLOGICAL EXAM Normal condition Some adhesions Posteriorly Urethritis

MENSTRUATION, Ceased

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean. Careless,

BOWELS, Normal, Constipated, Constipated Irregular,

APPETITE, Good, Good generally Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 82. RESP., 20. 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 Elizabeth Clark

HERBERT, PUCKAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3488.

Residence, Plainview, [illegible]

Date Admission, 28th Septembe[illegible]

Admitted by, Dr Phelps — Hou[illegible]

How Sent, Malcolm Kennedy, Esq[illegible]

Sex, Female

Age, 75 years.

Civil Condition, Widow

Children, Two (died at [illegible]

Age Youngest Child, ——

Occupation, Merchant (?)

Degree Education, Common Sc[illegible]

Profession Religion, M. E. Church

Habits, not intemperate

Nativity, New York (Father, Scotland; Mother, Canada)

Physicians Committing, N. S. Jefft and J. P. Waste

Correspondents, Dr Will C. Clark (son) Plainview, min.



No. for Year, 58.

Insane Relatives, None

Cause Exciting, Shaking Palsy

Cause Predisposing, not given

Form,

Accompanying Bodily Disorder, Paralysis agitans

Suicidal or Not, Not

Date of this Attack, 5 years ago (after husband's death)

Duration, about 5 years

Result, Died.

EXAMINATION ON ADMISSION.

Ex. Oct 12 93. Dr S. D. Phelps.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused.

Quick or Sluggish, Sluggish.

MEMORY: Good

Past Events,

Recent Events, not good

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER: Impaired.

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Health poor for over 30 years.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Rather depressed

DELUSIONS:

Systematized or Not, none determined

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Talks quite freely

Coherent or Incoherent, but Coherently in a weak

Voluble or Reticent, manner childish way.

Personal and Medical History of Elizabeth Clark

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2 in. WEIGHT, 102 lbs. NUTRITION, Poor

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, None Coatings, Promptness Movement,

PUPILS, Equality, Equal Size, normal

Response Light, very sluggish Accommodation, very sluggish.

SIGHT, Impaired by age

HEARING, Impaired in both ears

COORDINATION, Arms, Impaired

Legs, Impaired.

TREMORS, Hands, Constantly. Tongue,

Facial Muscles, Same. General, Constant.

REFLEXES, Patellar, Both absent

Other Reflexes,

ARTICULATION, Hesitating, Hesitating Slurred, Slurred.

FACIAL EXPRESSION, normal and anxious.

SENSIBILITY,

HEART, Sounds are normal

LUNGS, had Lung fever / Pneumonia about 15 yrs ago

EXAM. URINE.

GYNAECOLOGICAL EXAM. Normal condition Some adhesions Posteriorly Uterus

MENSTRUATION, Ceased.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean. Careless,

BOWELS, Normal, Constipated, Constipated Irregular,

APPETITE, Good, Good generally Medium, Poor, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 82. RESP., 20. 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 Elizabeth Clark.

GOBERT, FOLAN & SHARRON, DAVENPORT, IOWA.

1893 This patient was brought here by Dr Wm C. Clark, attended by Miss Clark, with the following history. There is no history of Consanguinity or heredity. This is 1st attack, Symptoms appearing soon after her husband's death, 5 years ago, by restlessness & violent spells of temper. Disease seems steadily increasing. Is not variable, nor are there rational intervals. She is constantly in an excited or nervous condition; Complaining almost constantly about her surroundings. Wants to wander about. She now imagines that some one is trying to wrong her all the time; thinks some one is trying to steal her property, when, the facts, she has none. Not physically disposed to injure others, but constantly defaming the character of her best friends & relatives. Is not filthy or destructive; not suicidal. Always, or at least for the past 20 years, she has manifested a very ungovernable temper, so much so, her Children could not remain home long. No history of intemperance. She has had Shaking Palsy (Paralysis Agitans) for 5 or 6 years; progressive in its Character, until now it is almost impossible for her to hold her head still. Has not been restrained or confined & has had, practically, no treatment. Supposed cause of disease is Shaking Palsy; what is the cause of the Palsy, unable to say. On personal examination, the above facts also brought out; said she wanted to go to the Hospital; thought she ought to be treated. She talked all the time about her people working against her; appeared to be perfectly restless & dissatisfied. This Paralysis Agitans, together with the history of her case are sufficient causes to constitute insanity.

Sep 28 Sep 28/93. The patient, on admission, is in fair bodily condition, for her age. Has pulse 82
" " P. 84. R. 18. Bodily condition: Body nice and clean, no bruises. Behavior seems quite tired & lying in bed part of the time; talked but very little, seems to realize that she was sick. Appetite fair, but cannot feed herself as she is so very nervous. Bowels have not moved for 3 days, she says; gave pills. Complains of being sick at stomach. P. 84. R. 18. - Sleep: Rested quite well.
" 29. Quite nice on ward, otherwise the same, put on med. transferred to A1.
" 30 Is quiet and seems to be pleasant, bowels constipated, took pills. Is not able to feed herself & has to be fed with spoon. Oct 1. 93. About the same, bowels still constipated. Oct 2 93 Has some
Oct 2 trouble to take. Oct 3. 93. Removed to B1 W. Oct 4. 93. Appetite good. Sleeps well; is quite nervous & complains a great deal. Bowels moved. Oct 5 93 nothing new to note from yesterday.
" 6 Appears quite restless, she had heart burn at bed time, Appetite good, Sleep, good
" 7/8 Appetite good, Sleep good, has a few delusions. Oct 8 93 Appetite good. Has been
" 9 moving about her clothing, wants to get them & go home. Oct 9 93 Has seemed quite
" 10 well all day; Appetite good, Sleep good Oct 10 93 Been quite nervous all day, took dose
" 11 of ginger. Oct 11 93. Nervous all day at times, has been in her room a greater part of day
" 31 Sleeps well at night. Oct 31 Sept 28 93 ~~Transf. to B2~~. Appetite ravenous. Sleeps well. Behavior is quiet.
Nov 30 Is nervous has to be fed. Nov 30 93 Appetite good. Sleeps well. Is quiet. Has to be fed
Dec 27/ Dec 27/93. Went to bed today, Complaining of headache & constipation. Dec 29/93. Still in bed; feels dizzy
" 31 when she tries to sit up. Eats very little. Take medicine. Dec 31/93. Still in bed & feeling poorly. —
1894 Jan 1/ Jany 1/94. Up today; dressed & out in hall. Seems quite well again. Jan 31/94. Patient eats & sleeps well
31 at night. Appetite good. Is now up daily. Is on tonic.
Feb 10/ Feb 10/94. No material change in patients condition. Feb 25/94. Appetite good; Complains frequently of headache

Personal and Medical History of Elizabeth Clark.

1894
Feb 27 Feb 27/94. Patient had been committed here under the law of 1893 recently declared illegal. She was today Taken out and Returned under new Commitment papers from Wabasha Co. Has pulse 81 May 7 94 Appetite good Sleeps well Is very nervous Quiet in behavior Complains a good deal of headache May 14 94 Removed to B3 May 10 94 Is not feeling well Complains of headache Bowels constipated Is also vomiting a great deal June 20 94 Causes very little trouble Very quiet all the time Ortonic Appetite poor
Mar 26 Has been sick in bed today Complains of having pain in her side June 30 94 Does not rest very well at night
July 4 Has been sick in bed today Appetite very poor Bowels constipated July 20 94. Feeling some better Coughs a great deal Sleep quite poor July 27 94 Appetite poor On tonic Clean in habits. Talks coherent Augs 94 Sick in bed today
Appetite poor Bowels regular Aug 13 94 Has been quite poor in health Appetite poor Bowels constipated
Sept 24 94 Appetite poor Does not sleep well Takes medicine Has been in bed today Sept 30 Complains of pain
Oct 1 94 Appetite poor Has an ulcerated mouth On tonic Oct 10 94. Appears stronger and better On tonic
Bowels regular Appetite fairly good Oct 26 94 Appetite not very good Bowels constipated
Nov 30 94. Appetite fairly good., walking about a great deal Neat in habits, does not good walking on tonic troubled with constipation Dec 2 94 Bowels constipated Sick in bed one day Pneumonia Dec 20 94 Sick in bed one day Complains of headache Bowels being constipated Takes some other medicine for indigestion Jany 2 95 Not very clean in habits Takes exercise for bowels Lies down part of each day. Jany 20 95 Sick in bed 2 days Complains of a general bad feeling. Jany 26 95 Patient is feeling much better Appetite fair Bowels constipated Feb 12 95 Complains of headache, bowels constipated Appetite poor Takes tonic Feb 18 95 Sick in bed one day Takes med. for indigestion Untidy in habits Feb 21 95 Transferred to B4 Feb 28 95 Appetite poor. Does not complain any Mch 6 95. Appetite fairly good, bowels constipated Lies on the bed part of the day. Mch 20 95 Refuses to take her meals at times. Apr 1 95 Appetite not very good In bed some days. Bowels constipated Cathartic Sleeps fairly well Apr 18 95 Bowels constipated Sleeps fairly well Appetite very poor Has headaches quite frequently Tonic May 1 95 Suffers from dyspepsia May 20 95 Has hemorrhoids May 27 95 Sick in bed Complains of back and side ache. Liniment applied. May 29 95 In bed part of day. May 30 95 Appetite poor May 31 95 Dressed upon the ward
June 15 Sick quite a good deal. Lies on bed most of time. When not sick in bed. Appetite poor Bowels constipated Takes cathartic. Has specials July 13 Refuses to go riding or walking On Tonic. Aug 15 Goes out doors
Aug 31 Eats & sleeps well. Sept 12 Untidy in habits. Eats & sleeps well. Goes out doors & enjoys it very much.
Oct 15 Appetite fair Bowels constipated takes cathartics. Dec 10 Appetite good. Bowels constipated
Takes Cathartics Mar 10 Appetite fairly good. Has specials: Patient very annoying & hard to get along with; frequently annoys & excites the other patients Apr 20 Goes walking & riding. Bowels constipated: Takes cathartics.
June 12 97 The last few days has been sick in bed: complains of pain in different parts of body
" 13 Dressed & up on ward. July 23-25 96 Sick in bed: Complains of headache Aug 1 Able to be up & out of doors. Aug 3 Complains of her eyes being sore Eye water prescribed. Aug 8 Early in morning was taken suddenly sick complained of feeling bad all over. Refused breakfast. Complained of pain: Dropped from pain in chest. Vomited: At 7 Pm Died suddenly.

Died Aug. 8th 1896

Personal and Medical History of Mrs. Katie Kusta

EBERT, PIDLAR & DRAMBERG, DAVENPORT, IOWA



Whole No. 3493.
Residence, Mounds-view Town
Date Admission, 3rd October 18
Admitted by, D. Phelps Hou
How Sent, John B. Olivier, Jo
Sex, Female
Age, 31 years
Civil Condition, married
Children, 6
Age Youngest Child, 3 months
Occupation, Housewife (
Degree Education, none
Profession Religion, Catholic
Habits, tobacco & intemperance
Nativity, Poland (Parents also born there). –
Physicians Committing, W. Fitzsimons & C. A. Kelsey
Correspondents, Mr Geo. Kusta, New Brighton, Minn
Family Physician Dr C. A. Kelsey, New Brighton, Minn

No. for Year, 63
Insane Relatives, None
Cause Exciting, Close confinement at home
Cause Predisposing, Not given
Form,
Accompanying Bodily Disorder, Not Stated
Suicidal or Not, Not
Date of this Attack, September 30th 1893.
Duration, 3 days
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 31 years.
Time of Leaving, Feb. 6th 94
Time in Hospital, 4 mos. 3 dys
Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Exam Oct. 12 93 by D. L. Phelps.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish.
MEMORY: Poor
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, dull
Correct or Illusive,
REASONING POWER: Much impaired
Ordinary Subjects,
Own Mental State, Does not realize.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Answers very few questions. Sits in a dull manner, only half realizes things. Acts rather pullen & almost Cross

EMOTIONAL STATE:
Normal, Calm, Rather calm
Indifferent, indifferent at first.
Exalted, Violent and active
Depressed,
DELUSIONS: Seem to disappear
Systematized or Not, Can not determine any definite one
Special Subjects,
Transitory or Not,
HALLUCINATIONS: Seem to disappear
ILLUSIONS:
CONVERSATION: Refuses to talk.
Coherent or Incoherent, C
Voluble or Reticent,

Personal and Medical History of Mrs. Katie Kusta

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. WEIGHT, 143 lbs NUTRITION, Good
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, None Coatings, white. Promptness Movement,
PUPILS, Equality, Size,
Response Light, Accommodation,
SIGHT, Good
HEARING,
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, none Tongue,
Facial Muscles, None. General,
REFLEXES, Patellar, Eq 4 on scale 10.
Other Reflexes,
ARTICULATION, Hesitating, Refuses to talk much Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, clean Careless,
BOWELS, Normal, Constipated, constipated Irregular,
APPETITE, Good, Irregular Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 60 week RESP., 16 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, } Refuses to answer
Brothers or Sisters,

Personal and Medical History of Mrs. Katie Kush

LEBERT, FICKLE & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy Sheriff Haas, attended by her husband, with the following history of case. No history of Consanguinity or heredity nor of intemperance. This is the 1st attack, symptoms appearing last Saturday, Sept 30th 1893; she became violent; imagined husband was the devil & tried to kill him. Disease seems Stationary; not variable; no rational intervals. Derangements now shown as stated above and she has hallucinations of seeing relatives and friends long dead. Patient is disposed to injure others, but is not suicidal. Is also of filthy & destructive habits. Previously, she has imagined she would die from heart-disease, for past year. Has not been subject to any severe disease origining in head; has not been restrained or confined. Supposed cause of the disease is close confinement at home. Has been treated by bromides to induce rest, but time too short to observe results. On Personal examination, cannot get her attention; but becomes stubborn on further persuasion or force (attempted). Could induce her to say nothing. She made motions with hands & feet; also grimmaces of face; also uttered moans. Lies in a lethargic State. Thought her attendants & husband tried to leave home

Oct 3 Oct 3 93. On admission, is in fair physical condition; lethargic. Has patches B[d]. Bodily Condition. Stomach & bowels except on hands. Behavior violent, fought attendants, has bruised herself pounding on the person. Appetite poor, has to be fed, Bowels constipated. Oct 4 93 Fought in the dining room this morning, Appetite poor, has to be fed part of the time, destroys her clothing and throws herself against the persons & the wall. Has scratched & bruised herself Oct 6 93 Fought this morning when being dressed. Has been quite most of the day. Is screaming and tearing her clothing to night. Ate no Supper Oct 7 93 Was not feeling well today In bed all day, did not eat any Oct 8. Slept very quiet all day. In bed this afternoon. Drank a cup of coffee for breakfast and ate nothing the rest of day. Oct 9 93 Feels some better to day ate some dinner & supper.
10. Has been very quiet all day. Does not talk any. Refuses meals. Oct 11 No change in behavior. Bowels constipated. Did not eat any all day. 12th Very quiet, clean in habits. Appetite fair.
14 No change. Oct 15 93 Eats very little, habits clean, quiet in behavior works some in ward.
20. Rec[d] on B[d] Oct 30 93 Very dull & despondent. Takes off her shoes. Requires watching most of the time.
31. Appetite some better. Takes med: without any trouble not very tidy about herself. Nov 17 93 Did not take any nourishment to day Nov 23 93 Bowels constipated gave Enema as dir. Bowels moved freely
Nov 27 93. Bowels constipated, gave dose of med. as directed & bowels moved.
" 29. Appetite very poor will not feed herself. In behavior very quiet, seems much depressed, will not talk any. Occasionally will answer a question when asked. Takes tonic 3 times a day as dir. Rests ~~will not~~ at nights.
Dec 12 93. Appetite fair but will not feed herself, has to be spoonfed every meal. Does not take any care of herself. Clean in habits. Very quiet in behavior. Does not talk any. Dec 12 93 Visited by husband but did not talk very much with him. Dec 18 93 Attempted to choke Mr Rick. Dec 19 93. Restless since 3 A.M. Out on hall wanted her clothes to dress. Dec 31 93 About the same Jany 31 94 Appetite fair, but will not feed herself has to be spoonfed & has to be watched about her clothing or would not wear enough to keep her warm. Habits clean. Does not talk any. Feby 6 94 Visited by husband & friend & returned home with same.
Feb 6 94

Personal and Medical History of Mary Sander.

F. Page 200

Dec 23 Works on ward - Sleeps well - Goes walking & riding - Was sick in bed a few days with a swollen cheek & headache the first part of month Appetite good - Bowels regular - Dec 31 Had fits all day - is in bed.
Jan[y] In bed - Talks incoherently - Appetite not very good - Bowels constipated
Jan 20 Up on ward - Works some - Not very agreeable. Feb 27 Complained of severe headache, nausea & vomiting followed by a succession of fits.
Stupid nearly two days & then became violent. Mar 1 Sick in bed after a severe series of fits. Very violent & dirty: Appetite poor. Mar 16 Getting up today very quiet
April Had one fit during night & appeared as well as usual afterward. Menstr.
" 19 In restraint Kept in restraint five days at end of which time patient was more quiet: remained in bed - Menstruating. Apr 29 Upon ward: Quite restless & guarded some. Summary Nurse's Notes by Dr. E. L. Phelps: June 96 Patient periodically varies Will commence with complaint of sick head ache: grows irritable & violent, then after a few fits gradually recovers when out of spell is quite rational at times. Aug 30 Taken sick in the p.m. Aug 29 Lungs examined: lower 2/3 right lung dull on percussion: rales also over the same area: Left lung not involved: Sept 96 Has been slightly improving physically: In spell at present: very stupid: dirty in habits: Oct 15 At present quite well mentally: Gen[l] health some what better but coughs & expectorates a good deal
Oct 24 In restraint & extremely noisy during ~~night~~ day. Complains of soreness in chest: takes tonic: helps ~~Does~~ work on ward: Mar 97 Spells seem much more frequent Usually has several hard fits & then is in bed a week or so, then up on ward for about ten days, then will have another spell: When in bed is very cross and irritable: manifests many delusions: when up on ward is quiet & talks sensibly:
Apr No change. Aug 1 97 Appetite good: no mental change. (Cont[d] by Dr. R. M. Phelps)
Oct 1 Has been about the same in behavior & condition ever since coming here: Has a very distressing asthmatic cough at times, which seems partly hysterical in character. At times expectorates some blood
1898 Weight 105 lbs. Still coughs & expectorates at times: Usually has to be
Feb 8 put in room about once a month, beginning with a sick headache, as she calls it, becoming a little maniacal, then having convulsions & becoming dull & stupid. At the end of from 3 to 6 days is usually out on ward again: quiet & comparatively well behaved: Apr 28 98 Still coughs: complains of pain in back & headache. Temp. 100. July 11 98 Fell out of bed during night in a convulsion & injured nose: Hot applications kept on nose. July 12 98 Transferred to C[o]
Oct 98 Transferred to 43[d]. General condition about the same in every way. Cough seems a little less troublesome than a year ago Dec 98 May 99 (Cont[d] by Dr. R. A. Bell) Appetite fairly good: neat: bowels regular: sleeps well: coughs & expectorates a great deal: takes out door exercise: receives medicine: assists some with work on ward: Jan 9 99 Hand bitten: bathed with

(See p 212)

Personal and Medical History of Mary A. Southerland

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

* on hearing said this would be address known.

Whole No. 3491.
Residence, 387 Maple St. St Paul
Date Admission, 3rd October 1893.
Admitted by, D. Phelps Hour, 7 PM.
How Sent, John B. Olivier, Jof P, Ramsey County.
Sex, Female
Age, 41
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, none (Father a farmer)
Degree Education, High School education
Profession Religion, Baptist
Habits, probably good; no history of intemperance.
Nativity, Wisconsin (Father, Kentucky; Mother, Ohio)
Physicians Committing, Arthur Sweeney & Wm Dunwoodie
Correspondents, Mrs. G. A. Spindler* 387 Maple St (Sister)
* Mrs Samuel P. Spindler
Catherine Southerland 11 Aurora, Ypsilanti - (Mother)
Family Physcn. D. Wm Dunwoodie, 975 6th St St Paul

No. for Year, 64
Insane Relatives, None
Cause Exciting, unknown
Cause Predisposing, not given
Form,
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, not
Date of this Attack, a year + a half ago
Duration, a year + a half
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 39
Time of Leaving, Nov. 11th 93
Time in Hospital, 1 mos 8 dys.
Result, Improved

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Exam Oct 13. 93. by Dr. Linton Phelps.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused.
Quick or Sluggish, Sluggish
MEMORY:
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER: much impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Indifferent
Exalted,
Depressed,
DELUSIONS: seems to have many
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: Many, Something controls her mind.
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent, Reticent very unwilling to talk.

GENERAL DESCRIPTIVE REMARKS:

Manner of talk very peculiar. Begins telling something, then will stop & wait for some moments before finishing a sentence. Says was sick a good deal during her life. Nervous as a child, Malarial fever at one time. Had bilious fever at another time. Not well for past 2 years.

Personal and Medical History of Mary A. Southerland

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 in. WEIGHT, 113. NUTRITION, Poor very pale
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Slight Coatings, Slight pinkish Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Good Accommodation, Good
SIGHT, Improved of late, Eyes fed weak.
HEARING,
COORDINATION, Arms, Some trembling seems from weakness.
Legs, same — right leg several inches shorter than left
TREMORS, Hands, Small tremor Tongue, Small
Facial Muscles, none noticed General,
REFLEXES, Patellar, Eq 6.
Other Reflexes,
ARTICULATION, Hesitating, Quite hesitating Slurred, Speech drawling.
FACIAL EXPRESSION, blank — an absent minded expression.
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Respiration very shallow
EXAM. URINE.

GYNAECOLOGICAL EXAM. Uterus 1st degree of prolapsus Tenderness in right ovarian region
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, clean	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular, irregular
PULSE, 92	RESP., 19	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 of heart disease
Father or Pat. Relations, father " " pneumonia
Brothers or Sisters, 2 Bros (Sister says all are nervous, thinks they inherited a nervous tendency from her father

Personal and Medical History of Mary A. Southerland

EARLE, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy-Sheriff Haas + attended by Mrs Skinner, with following history. There is no history of consanguinity, heredity or intemperance. This is 1st attack, first Symptoms manifested a year + a half ago. Her disposition began to change; becoming fond of being alone and her habits of eating became altered, eating certain kinds of food by picking it to pieces with her fingers; later, she manifested delusions of control as narrated below. Disease seems increasing; not variable; no rational intervals. Derangement is now shown by the belief that the hired girl + neighbors "throw things in her mind", compelling her to do foolish + strange things + that articles brought to the house (such as flowers +c) are the agents of this thought transferred". She is depressed; silent when spoken to; avoids strangers; carries on conversations in a low voice with imaginary people. Uses, at times, very profane + uses many expressions foreign to her training and previous habits. Looks suddenly in various directions as if her attention has been called by invisible beings and cannot keep her attention fixed on any subject long by reason of these thoughts "thrown in her mind by the hired girl". Laughs + cries without cause. Has threatened to kill the minister (Rev. McCleary), because he made a pastoral call on her. Believes the hired girl drugs her food. Has threatened to injure others. Habits not sensual, nor filthy nor destructive. No peculiarities previously shown. There is no history of any severe disease or injury to head. She has not been restrained or confined. Cause of disease is unknown. Has been treated by tonics + sedatives (bromides), without much effect. — On personal examination, patient is found to be depressed, silent, abstracted; her attention cannot be fixed upon any subject for any length of time. Nutrition poor; strength feeble; sleeps poorly by reason of her delusions. Said that the hired girl + neighbors did as above mentioned, thus influencing her, + that the articles brought into the house were among the means used for this purpose. During examination, she sat silently, in an apparently depressed + abstracted manner, looking up frequently, as if in response to voices of imaginary people. Her manner was abstracted, indifferent + depressed. She has become profane; her habits + disposition changed; is suspicious of every visitor, especially of the hired girl + neighbors.

Oct 3 Oct 3/93. On admission, patient is in fair physical condition. Max Specific Gr. P. 96. R 18. Bodily Condition
4. clean, lame in right leg. Behavior very nice + quiet on ward. Restless. Slept about 3 hrs.
Talks but little. Appetite fair. Restless, quite noisy + hr talking. Has delusions. Bowels regular
P. 96. R 18. T. 98 2/5
5. The same. Rested quite well. Slept 3 hrs. 6th The same. Rested well. Slept 6 hrs.
7 Very nice + quiet on ward. Lying in bed part of the day. Complains of feeling weak
appetite fair. Takes her medicine without any trouble. Quite restless 2 hrs. Slept 6 hrs.
8 Restless most of the day + crying most of the time but gave no reason for feeling bad
Restless 2 hr. Crying at 9 P.M. 9th Most of P.M. 10th Appetite good. Has been very quiet all day
11. Very quiet all day. Slept well last night. 12th Had toothache last night and did not sleep
well. Has been lying down part of the day. 13th Quiet all day. Appetite good. Slept well
14. Nothing new to note. 15th Nothing new to note. 16th Has been crying to day. Said she was
home sick. Ate very little dinner. 16th Seemed quite well all day. Sleeps well, Eats well
31 Appetite good. Sleeps only poorly. Cries a great deal of the time. Seems very nervous. Has a few delusions. Is troubled a great deal with toothache. Pat a time treatment Nov 11. 93. Since admission she has been very quiet. Has talked very little but would always answer questions. Has cried a good deal and worried because she was here. Asked if we thought it would do her any good to stay here. Wrote for sister to come after her. Improved some mentally, while here. Did not say so

Personal and Medical History of Mary A. Southerland.

much about or seem to be influenced so much by voices. Was sent here by Deputy Sheriff from St Paul this morning.

From p. 208. No. 3484

Mary Sanders.

1899
Jan. 6 76 Sick. Dressed antiseptically. Has convulsions occasionally during night + complains of severe headache on following day. Feb. 6 Wt. 101#.
Mar Cough is becoming more severe + she occasionally has slight hemorrhages from the lungs. Frequently irritable + often quite noisy + violent + sometimes strikes other patients. Expresses delusions. Sleep is often disturbed on account of cough. April 27 Fought Pauline Frazier. eye bruised.
May 4 Hemorrhages have become more frequent + severe. patient is decidedly weaker. Frequently exhausted after attacks of coughing. May 8 Trans. to C3. Had hemorrhages at 6, 9 + 8:30 o'clock. May 19 So weak that she was kept in bed; took a little nourishment. May 20 Failed gradually. Temp. 98.
May 21 Died 4:15 a.m. Had suffered for years from chronic bronchitis. + often seemed to say to bring on these hemorrhages by excessive coughing. Was very melancholy and often expressed a wish to die.

Personal and Medical History of Annie Robinson

SEIBERT, FICLAS & CHAMBERS, DAVENPORT, IOWA



Whole No. 3502.
Residence, Transient; foun
Date Admission, 7th Octobe
Admitted by, Dr. Phelps
How Sent, Thomas Fraser.
Sex, Female
Age, 26 Years (Says
Civil Condition, widow
Children, one
Age Youngest Child, —
Occupation, House-w
Degree Education, Limited
Profession Religion, Lutheran
Habits, probably not very good
Nativity, Germany (parents also born there)
Physicians Committing, Chas. T. Grauge & E. C. Cross.
Correspondents, none given in papers"
Has no family Physician

No. for Year, 72.
Insane Relatives, no evidence of any
Cause Exciting, suppose d be this injury to head.
Cause Predisposing, previous attacks.
Form, Imbecility
Accompanying Bodily Disorder, has had a head-injury
Suicidal or Not, not known
Date of this Attack, not known
Duration, not known
No. of Attack, unknown
No. of Admissions, 2nd (here).
Age First Attack, unknown
Time of Leaving, Apr. 8. 1898
Time in Hospital, 4 yr. 6 m. 1 d.
Result, Discharged July 30 '98
Recovered.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exam Oct 12 93 by Dr. Linton Phelps

MENTAL ACTIVITY:
Clear or Confused, quite clear, but weak minded.
Quick or Sluggish,

MEMORY:
Past Events, Good.
Recent Events,
Special Subjects,

PERCEPTIVITY:
Alert or Dull, alert.
Correct or Illusive,

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

GENERAL DESCRIPTIVE REMARKS:
Mind is that of an imbecile, weak and childlike

EMOTIONAL STATE:
Normal, Calm, Calm generally.
Indifferent, at times depressed.
Exalted,
Depressed,

DELUSIONS:
Systematized or Not, none.
Special Subjects, determined.
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Talks coherently and quite
Coherent or Incoherent, sensibly, answers all
Voluble or Reticent, questions readily

Personal and Medical History of Annie Robinson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in. WEIGHT, 135½ NUTRITION, good.
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, ⊗ ⊗ Size,
Response Light, Accommodation,
SIGHT,
HEARING,
COORDINATION, Arms, Jerky gait, spine injured when young caused her to be a lame
Legs, walk. is quite difficult

Annie Robinson
Case No. 3502 Vol. 24.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

speech.

SENSIBILITY, normal.
HEART, Sounds are normal
LUNGS, seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., Uterus retroverted
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, clean Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, good Medium, Poor,
SLEEP, Good, Poor, well. Irregular,
PULSE, 88. RESP., 20. 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 Annie Robinson

GIBBS, FOLKAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3502.
Residence, Transient; from
Date Admission, 7th October
Admitted by, Dr. Phelps
How Sent, Thomas Kaser,
Sex, Female
Age, 26 Years (says
Civil Condition, widow
Children, one
Age Youngest Child, —
Occupation, House-w
Degree Education, Limited
Profession Religion, Lutheran
Habits, probably not very good
Nativity, Germany (parents also born there)
Physicians Committing, Chas T. Granger & E. E. Crook
Correspondents, none given in papers
Has no family Physician

No. for Year, 1V.
Insane Relatives, no evidence of any
Cause Exciting, supposed to be this injury to head.
Cause Predisposing, previous attacks.
Form, Imbecility
Accompanying Bodily Disorder, has had a head-injury
Suicidal or Not, not known
Date of this Attack, not known
Duration, not known
No. of Attack, unknown
No. of Admissions, 2nd (here).
Age First Attack.

EXAMINATION ... MISSION.

MENTAL CHARACTERISTICS.

Exam Oct 12, 93 by W. Linton Phelps

MENTAL ACTIVITY:
Clear or Confused, quite clear, but weak minded.
Quick or Sluggish,

MEMORY:
Past Events, Good.
Recent Events,
Special Subjects,

PERCEPTIVITY:
Alert or Dull, alert.
Correct or Illusive,

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

GENERAL DESCRIPTIVE REMARKS:
Mind is that of an imbecile, weak and childlike

EMOTIONAL STATE:
Normal, Calm, Calm generally.
Indifferent, at times depressed.
Exalted,
Depressed,

DELUSIONS:
Systematized or Not, none.
Special Subjects, determined.
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Talks coherently and quite
Coherent or Incoherent, sensibly, answers all
Voluble or Reticent, questions readily

Personal and Medical History of Annie Robinson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in. WEIGHT, 135½ lb NUTRITION, good.
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, ∞ Size,
Response Light, Accommodation,
SIGHT,
HEARING,
COORDINATION, Arms, Jerky gait, spine injured when young caused her to be so lame
Legs, that walking is quite difficult
TREMORS, Hands, Jerky movements. Tongue,
Facial Muscles, Considerable General,
REFLEXES, Patellar, Eq'l & on scale of 10.
Other Reflexes,
ARTICULATION, Hesitating, Impaired Slurred, loping speech.
FACIAL EXPRESSION, Speech at times quite difficult
SENSIBILITY, normal.
HEART, Sounds are normal
LUNGS, seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., Uterus retroverted
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, clean Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, good Medium, Poor,
SLEEP, Good, Poor, well. Irregular,
PULSE, 88. RESP., 20. 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 Annie Robinson

EBERT, PIGLER & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Deputy Sheriff John Johnson, and attended by Wm M. Hanson, with following history. Very little seems to be known about her; she was arrested as a tramp in Hayfield, Minnesota; She has probably had several attacks. Do not know when first symptoms of this attack were manifested. Disease seems increasing, but is variable & there are rational intervals, but do not know as to their occurrence at regular intervals. Her memory now seems good but derangement is shown by the fears of personal injury from every one. She has shown no disposition to injure others; not known as to suicidal propensities. No disposition to filthy or destructive habits manifested at this time. No evidence of any heredity. As to history of intemperance, not known. She says her head was injured 14 years ago, by her being thrown down stairs. Has been confined & restrained, but only during past few days. Supposed cause of disease is the injury, as above stated: not known if have been under medical treatment, except while at Hospital before. Her appearance is quite variable; fear is the leading feature of her appearance. On personal examination she has told very nearly the facts as above stated but is very fearful of people hurting her. She was arrested on the street as a wanderer & as a wild woman by people in Hayfield. Note* Patient was here before from Oct 31/90 to June 9/93. Had previously been in an Asylum in Kansas, 3 years, & at their poor-house, 1 year. Was abused & knocked about when young and received injuries to head & spine; also had severe illnesses when a child. During her stay here (in Rochester Hospital) she had no spells of excitement, though, at times, was irritable; health was good; but manner very silly; feeble minded; helped a good deal & quite intelligently in caring for the other patients on C.[3] Later, worked in the kitchen. Was much improved on leaving here. (See Vol 14. p. 192. No 2532). —

Note* Oct 7/93 On admission, patient was put on C.[3] — Oct 31/93. Patient's behavior, since her recommitment, has been quite quiet. The next day, after coming, she was quite quiet; repeated her story of being maltreated at home; easily excitable, but remained steadily in good condition. Habits have been clean and neat. —

Oct 7/31 Nov 30/93. Continues quiet and well-behaved. Has commenced to work in Physician's kitchen (Was there before leaving)

Nov 30 Dec 31/93. Appetite good. Is quietly behaved. Seems to be feeble-minded and talks in a silly way; has a childish appearance & way; works in the Physician's kitchen, daily. Menstruated about 19th inst. — Habits cleanly.

Dec 31 Jan 10/94. Keeps in good physical condition. Jan 31/94 — Rests and sleeps well at night. Eats well. — Remembers and realizes, although she has childish notions. Menstruated about 10th Was sick in bed one day.

Jan 10/31 Feb 7/94. Is now menstruating. Feb 15/94. Transferred to N. East. Feb 28/94 — Continues about as usual. — Has, at present, a bad cold and complains some of headache. Continues to work daily in the D.[s] kitchen.

Feb 7/15 March 11/94. Is now menstruating. Continues quiet and well behaved and does her work quite intelligently. —

March 11 — 27 March 27/94. Patient was committed here under the "law of 1893", recently declared unconstitutional; She was, today, Taken Out and Returned under "new warrant" from Olmsted County. —

June 8/94 Appetite good. Sleeps well. Bowels reg. Works on ward. July 17/94 Menstruating. July 30/94 Appetite good. Sleeps well. Talks at times quite silly. Works on the ward. Aug[st] 28/94 Menstruating. Aug 30/94 Appetite good. Sleeps well. At times irritable. Works some on ward, occasionally in the D.[s] Kitchen. At times complains of not feeling well. Sept 17/94 Menstruating. Sept 26/94 Quiet on ward. Sleeps well, at the present time works on ward. Is feeble minded but talks quite sensibly

Oct 30/94. Appetite good. At times quite depressed & cries quite often. Works on ward.

Nov 30. Appetite Good. Sleeps well. Works on the ward. General health good. Dec 30. 94 Talks out door exercise

Mensts 17th Jany 25/95. Menstruating. Sleeps well. Feb 26/95 Appetite good. Sleeps well. Works on ward. Is now menstruating.

March 20/95. Menstr. March 30/95 Has a very jealous disposition. Appetite good. Sleeps well

Personal and Medical History of Annie Robinson

Talks at times somewhat silly. Physical health good. Works on ward. April 17/95 Menstruating

April 30/95 Works on ward. Physical health good. May 15/95 Menstr. 7/31 Remains about the same

June 27 Menstr. June 28 At all times, quiet & disconcerted, Works on ward. Appetite good. Sleeps well.

July 29 Menstr. July 30 No change. Aug 30 Works on ward. Sleeps well. Talks seldom. Goes riding & walking. Has morbid notions. Sept 13 Menstr. Sept 29 Has morbid notions. Appetite good. Sleeps very well. Goes riding & walking. Physical health good. Works on ward. Oct 3. Menstr. Oct 29 Menstr.

Nov 27 Appetite good. Bowels regular. Sleeps well. Gen. health good. Goes riding & walking. Works on ward.

Jan 1 Talks sensibly — Tidy in habits — Appetite good — Sleeps well — Bowels regular — Takes out door exercise, assists with ward work. Jan 8 to Feb 8 Menstr.

Feb 8 Has a severe cold. In bed ½ day. Takes tonic. March 1 Talks sensibly; neat in habits; Appetite fair; Sleeps quite well. Bowels regular. Assists with ward work; Takes out door exercise; Takes tonic. March 30 to April 25 — May 15 Menstr.

July Summary Nurse's Notes by Dr. E. L. Phelps:— Menstr. regular; sometimes ill for a day during period; mental condition the same: Nov '96 No change: Jan '97 Gen'l health good: works in Dining room: Appetite variable: usually talks sensibly: quite childish in manner

1897 May. Ills change: Aug '97 Quiet & agreeable on ward: talks sensibly: Gen'l health fair: works in Dining room: (Contd by Dr. R. M. Phelps) Oct 9 '97 Works — Is quiet & well behaved: some what feeble minded but has no active delusions & causes no trouble. Mar 1 '98 Weight 135 lbs. Apr. 7 '98 Absent Home

Discharged.

Personal and Medical History of Amelia Young

HERBERT, FIGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3503.
Residence, Chatfield, Olmsted County
Date Admission, 10th October 1893
Admitted by, Dr Phelps Hour, 11 AM
How Sent, Thomas Fraser, Jof P, Olmsted County.
Sex, Female
Age, 53
Civil Condition, married
Children, Seven
Age Youngest Child, 13
Occupation, Housewife (Husband, farmer).
Degree Education, Common School
Profession Religion, None
Habits, Not intemperate
Nativity, Ohio (Father, New York; Mother, New Hampshire)
Physicians Committing, H H Mayo & A W Stinchfield
Correspondents, Daniel Young (Husband)
Nearest Family Physician, Chatfield Minn

No. for Year, 93.
Insane Relatives, Sister
Cause Exciting, Unknown. (Previous attack)
Cause Predisposing, Heredity
Form,
Accompanying Bodily Disorder, None stated
Suicidal or Not, not
Date of this Attack, 10 days ago
Duration, about 10 days
No. of Attack, 1st (probably Continuous)
No. of Admissions, 2nd
Age First Attack, 35 Years
Time of Leaving, Feb 20th '94
Time in Hospital, 4 mo. 10 ds.
Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exam Dt 11-93. D S K Phelps.

MENTAL ACTIVITY:
Clear or Confused, Confused somewhat.
Quick or Sluggish, Quick.
MEMORY: Good.
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert.
Correct or Illusive,
REASONING POWER:
Ordinary Subjects, Impaired
Own Mental State, Impaired.
Special Subjects, Does not realize her condition
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Calm, Self satisfied.
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, Has many & various.
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Amelia Young

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4½ in. WEIGHT, 188 lbs. 179 lbs. NUTRITION, good.
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Heavy coat Promptness Movement,
PUPILS, Equality, Equal Size, normal
Response Light, Normal. Accommodation, normal
SIGHT, Good.
HEARING, Good
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, none. Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Equal 3 on scale 10.
Other Reflexes,
ARTICULATION, Hesitating, Prompt. Slurred,
FACIAL EXPRESSION, normal.
SENSIBILITY,
HEART, Sounds normal.
LUNGS, Seem in good condition.
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, clean Careless,
BOWELS, Normal, normal Constipated, Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 76. RESP., 18. 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 Amelia Young

FOBERT, FISCLAR & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here, in due form, by Daniel Young, her husband, with the following history. There is no history of Consanguinity, but some of heredity, a sister being insane. This is 1st attack which seems continuous; first symptoms of this present attack have manifested about 10 days ago. Disease seems increasing but is variable & there are rational intervals, but not occurring at regular intervals. Derangement was shown by her mind running off on all subjects. Has been a disposition to injure others: but is not suicidal. No filthy or destructive habits. She manifested peculiarities of disposition as for 3 years before the first attack. There is no history of intemperance. Patient had Typhoid fever 13 years ago. Cause of disease is unknown. On personal examination, there is shown irritability with continued irrational talk. Appearance healthy; robust; manner very irrational. NOTE.* Patient was here before from June 8/88 to Oct 3/90. During her stay at that time, she was always more or less, deluded, and very vain; her mental condition did not change much. Physical health was very good. Worked quite well & steadily in the sewing-room and part of the time, also, in the kitchen. Considered herself very much abused at times. (Ill Vol 6 p16. No 916)

Note* Oct 10/93. On admission, is found to be in good physical condition. Pulse 84 B'- P76 R18. Temp'd Bodily clean. Oct 11 93. Has been very talkative. Appetite good, Sleep good, Cough none.

12 More quiet than yesterday. Appetite good. Slept well. Talks in a wandering erratic way.

13. Appetite good Sleeps well. Went to sewing room.

14th Appetite good Sleeps well. Went to sewing room.

15 Went to Chapel.

16th Has been to sewing room all day.

17th Nothing new to note.

18th Went to sewing room all day and to the dance this evening.

19th Went to sewing room. Appetite good. Sleeps well.

20th Seems to be inclined to gossip with the other ladies. Complains of not getting her clothing when she has had all she asked for.

21st & 22nd Nothing new to note.

23. Appetite good Sleeps well. Has delusions. Is about same as during her proceeding stay here. Always quarrelous complimentary and full of odd & erratic ideas (Oct 31 93 Appetite good Sleeps well. Is inclined to be quite noisy, when talking. Goes to sewing room. Has delusions.

Nov. 1093. Removed to # 2 East. Nov 30 93 Appetite good Sleep good. Is not so noisy as when she came here. Is full of delusions. Works in sewing room. Dec 3 93 Appetite good Sleeps well. Talks almost incessantly. Has many delusions. Works in sewing room. Has had a sore throat this week, but is better now. Jany 31 94 Appetite good. Sleep good. Still has many delusions. Works in sewing room. Has been very well this week.

February 20th 1894. Went home.

Personal and Medical History of Carolina Speckerman

(From p. 224)

1896 June Summary Nurse's Notes by Dr. L. L. Phelps:- Neat in habits: quiet in behavior: genl health good. Has varicose ulcer on right leg: Nov '97 Genl health good: appetite fair: bowels regular: sits quietly reading most of time: pleasant in manner: neat & clean: May '97 no change. July '97 Clean: quiet: Has delusions: takes out door exercise: Still has ulcer on limb: dressed daily.

Nov. Contd by Dr. R. M. Phelps) Nov 13 97: Daily quiet: talks in a wandering way has well defined delusions & is very feeble minded: Has chronic eczema of one leg which is sometimes very bad at other times seems better for a while: Weight 136 lbs.: Apr. 17 98: Does not is much worse today: transferred to Infirmary

1898 Feb. 8 Has been in bed a good deal of the time since last note: part of time eczema was quite acute & general, & the special please on the leg was much worse. Condition is now very much better. Is up & around

May 31 part of the time: June 23rd 98 General condition about the same. Has of late been up & about all of the time, altho' was in bed for a while the latter part of May. (Contd by Dr. R. L. Babb) Mar. to Dec 1899: Appetite good: inclined to be constipated, requiring laxatives: sleeps well: neat in habits & appearance: usually pleasant & quiet: occasionally noisy & irritable: answers questions readily but has many delusions & frequently talks to self. Has varicose ulcer on left leg which requires dressing daily. May 22-31 remained in bed both legs being effected with eczema: limbs dressed daily.

D Sept 1-99. Feb 28 1900. (Dr. Feysdale) Is agreeable on ward: Talks little: Neat in habits: Appetite good: Sleeps well: Cathartics occasionally required: occasionally scolds Jan 14. Wt. 130. Mch 1- Nov 30 1900 Talks to herself. Neat. Appetite good: Has varicose ulcer which is dressed daily: May 1- Quite excited at times: Has delusions & talks to imaginary people: July 17 Vaccinated successfully: Takes out door exercise occasionally: No change: Is at times noisy. Nov 16. Wt. 128¾ # Dec 1- Feb 28 1901 Ulcer on limb still troubles her. General health good: Feb 28 Wt. 121#.

Mar. to June 1901 No change in mental or physical health May 24 Wt. 131#.

June to Sept. Varicose ulcers on leg dressed daily, at times noisy and scolds a great deal, asks to go home, August 30 Wt. 132#. Sept. to Dec. Varicose ulcers on leg dressed daily, general condition remains unchanged. Nov. 29 Wt. 129#.

to Feb. 1903. General health fairly good: bowels regular: appetite good: sleeps rather poorly: takes no exercise: does no work: rather untidy and careless: has ulcer on right leg which is dressed daily: is delusional: at times noisy: scolds to herself. Wt. Dec. 1 at. 117#.

Patient removes dressing from leg and applies all sorts of stuff to it.

Personal and Medical History of *Caroline Speckerman*

HERBERT, FULLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3505.

Residence, Kinnia, Kinnia County

Date Admission, 10th October 1893

Admitted by, Dr. Phelps Hour, 7 PM

How Sent, H. L. Buck, J. of P. Kinnia County.

Sex, Female

Age, 60 years

Civil Condition, widowed

Children, one

Age Youngest Child, 36 years

Occupation, Housewife

Degree Education, Limited

Profession Religion, Lutheran

Habits, not intemperate

Nativity, Germany (parents also born there).

Physicians Committing, H. Lichtenstein & D. B. Pritchard

Correspondents, None given on papers

Family Physician D. H. Lichtenstein Kinnia, Minn

No. for Year, 75.

Insane Relatives, none, so far as known

Cause Exciting, not known

Cause Predisposing, previous attacks

Form,

Accompanying Bodily Disorder, prolapsus uteri + varicose ulcers

Suicidal or Not, not

Date of this Attack, about 6 months ago

Duration, about 6 months

No. of Attack, not 1st; has been at various periods in past 3 years

No. of Admissions, 2nd.

Age First Attack, ? (not known)

Time of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

Exam. Oct 13. 92. by Dr. L. Phelps.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Quick

MEMORY:

Past Events, Good.

Recent Events, Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert.

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Impaired

Own Mental State, Impaired.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm, Calm

Indifferent,

Exalted,

Depressed,

DELUSIONS: many.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Talks very readily,

Coherent or Incoherent, but seems to get excited

Voluble or Reticent, and manifests delusions in her conversation.

Personal and Medical History of *Caroline Speckerman*

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3 3/4 in. WEIGHT, 156 lbs NUTRITION, Good

WOUNDS OR ABNORMALITIES, Ulcers on left ankle, pain in right hip.

TONGUE, Tremors, Coatings, Promptness Movement,

PUPILS, Equality, Equal. Size, Normal

Response Light, Good Accommodation, Good

SIGHT, Good. Uses glasses for reading

HEARING, Good

Caroline Speckerman.

Case No. 3505 File No. 9

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

ARTICULATION, Hesitating, Prompt Slurred,

FACIAL EXPRESSION, Normal

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE.

GYNAECOLOGICAL EXAM., Uterus in 3rd degree prolapsus

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean Careless,

BOWELS, Normal, Normal Constipated, Irregular,

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, Good Poor, Irregular,

PULSE, 86 RESP., TEMP., 19.

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 Caroline Speckerman

EBBERT, FULLAM & CHAMBERS, DAVENPORT, IOWA

Whole No. 3505.

Residence, Winona. Winona County

Date Admission, 10th October 1893

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

How Sent, H. L. Buck, J. P. Winona County.

Sex, Female

Age, 60 years

Civil Condition, widowed

Children, one

Age Youngest Child, 36 years

Occupation, Housewife

Degree Education, Limited

Profession Religion, Lutheran

Habits, not intemperate

Nativity, Germany (parents also born there).

Physicians Committing, H. Lichtenstein & D. B. Pratt

Correspondents, None given in papers

Family Physician D. H. Lichtenstein. Winona, Minn

No. for Year, 75.

Insane Relatives, none so far as known

Cause Exciting, not known

Cause Predisposing, previous attacks

Form,

Accompanying Bodily Disorder, Prolapsus uteri & varicose ulcers

Suicidal or Not, Not

Date of this Attack, about 6 months ago

Duration, about 6 months

No. of Attack, not 1st; has been at various periods in last ye

No. of Admi

EXAMINATION ON ADMISSION.

Exam. Oct 13. 92. by Dr. D. H. Phelps.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Quick

MEMORY:

Past Events, Good.

Recent Events, Good.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert.

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Impaired

Own Mental State, Impaired.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm, Calm

Indifferent, /

Exalted,

Depressed,

DELUSIONS: Many.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Talks very readily

Coherent or Incoherent, but seems to get excited

Voluble or Reticent, and manifests delusions

in her conversation.

Personal and Medical History of Caroline Speckerman

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3 3/4 in. WEIGHT, 156 lbs NUTRITION, Good

WOUNDS OR ABNORMALITIES, Ulcers on left ankle, pain in right hip.

TONGUE, Tremors, Coatings, Promptness Movement,

PUPILS, Equality, Equal. Size, Normal

Response Light, Good Accommodation, Good

SIGHT, Good. Uses glasses for reading

HEARING, Good

COORDINATION, Arms, Good

Legs, Good

TREMORS, Hands, Slight. Tongue, None

Facial Muscles, General,

REFLEXES, Patellar, Eq. & b. q.

Other Reflexes,

ARTICULATION, Hesitating, Prompt Slurred,

FACIAL EXPRESSION, Normal

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE.

GYNAECOLOGICAL EXAM., Uterus in 3rd degree prolapsus

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean Careless,

BOWELS, Normal, Normal Constipated, Irregular,

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, Good Poor, Irregular,

PULSE, 86 RESP., TEMP., 99

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 Caroline Speckerman

GIBLEY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 This patient was brought here by Deputy Sheriff E. A. Welch, attended by Mrs Emma Braun, with the following history. As to consanguinity or heredity is not definitely known. This is not the 1st attack; there have occurred at various periods during past 3 years. First symptoms of this attack manifested about 6 months ago, by illusions. Disease seems stationary, but is variable & there are rational intervals, though these do not occur at regular intervals. Derangement is now shown in that she believes herself persecuted; is suspicious of all about her; hears voices; believes she is bewitched; irritable. She is neither disposed to injure others, nor suicidal, nor filthy nor destructive. There is no history of intemperance &c. Is subject to no severe disease, except prolapsus uteri and varicose ulcers. Has been confined, of late, to her room. Do not know cause of disease. Has been under treatment by bromides; treatment for ulcers; keeping the bowels free. Patient had an operation for prolapsus while in Rochester before; uterus again prolapsed. No effect except upon general health. On personal Examination, is nervous & quite talkative about her sufferings & persecutions; thieves entering her room & stealing her clothing; she related her sufferings & said she was in jail while at Rochester & again said she was in a house of Rochester and her minister was in charge of the same. She did nothing unusual during the examination. Manner was rather restless. Note* This patient was here before from — July 21/91 to Nov 7/91. Shortly after her admission, (Aug 8th), she was operated upon for the Prolapsus; remained in bed until Augt 28th when she was got up & put out on the Ward. At time of leaving she was considerably improved in condition. (See Vol 21. P. 17. No. 3079).

Note*

Oct 10 Oct 10/93. On admission, was put on B1. P 70. R 20. Is normal. Bodily cond. clean. Scars on both ankles.
11. Quiet & behaves. Appetite good. Cough none. Oct 12. 93 Appetite good. Slept well. Has been very
13 quiet all day. Oct 13. Quiet. Appetite good. Slept well. Oct 14 Appetite good. Slept well. 15th Same.
16 Removed to A 1. Oct 17. 93. Is quiet and ladylike in appearance. Appetite good. Sleeps well. 18 Same.
17
19 Is pleasant and quiet. Talks quite sensibly. 20. About the same. 21. same. 22. Same. Worked a
23 little in dining room. 23d. Eats & sleeps well. No Complaints. Always polite & pleasant. Is
30 Paranoriac in form. Oct 30. 93 Appetite good. Sleeps well. Clean in appearance. Does not talk any
Nov 9 English. No complaints. Works a little in ward dining room. Nov 9. 93. Has open sore on right ankle. Tissues
" 28 red and swollen around it. Pains to hip. Nov 28. 93. Eats & sleeps well. Sore on ankle continues. Behavior
1894 Jany quiet. Talks quite sensibly, but at times has hallucinations. Works a little on ward. Jany 7. 94 Patient
" 20 received on Sick ward. Had bed sore on L. leg - appearance of being poisoned. Leg washed with
" 27 Bichloride & dressed with Iodoform, packed in Sodamutes. Sleeps & appetite quite good. Suffered
greatly from pain in Leg. Jany 20. Sores looked a great deal better. Bowels & sleep continue
to be good. Very bad odor from sores as Jany 26. 94. On 29 dressings sores washed
with Sol. Carb. acid, dressed with boracic acid & bandaged. Sores look much better &
after afternoon washings & dressings patient was up on ward Febry 2nd 1894. Sitting up.
Feb 7 For full history see nurse-record-case - Feb 10/94. Seems to feel well; assists some with dining room work;
" 10 Also does some sewing. Feb 28/94. Sores are almost healed. Patient is very anxious to go home. —
" 28 March 10/94. Patient is regular in habits. Appetite is good. Is quiet most of the time though occasionally
Mar 10 she gets a little excited. Manifests delusions. Assists some with work in dining room. — " —
" 14 March 12/94. This patient was committed here under the "Law of 1893", recently declared unconstitutional. She was, today, Taken out and Returned, under "new Warrant" from Chickasaw County —

Personal and Medical History of Caroline Speckermann.

1894
Mch 20. Assists some with dining room work. Has a very good appetite. Is quiet in habits. Is more disturbed than usual. Has delusions. Sat quite noisy at times. April 10 94 Is more quiet. Seems to feel well.
Apr 25. Put to bed today. Sores broken out again. Has good appetite. Sores dressed. Picranic acid and Bandaged. T. 98 3/5. P 80. R 18. May 1. 94 Has great pains in her limbs, caused by the sores. Gave hypodermic Morphia gr 1/8. May 3. 94. Much better today; does not seem to suffer. Has been reading and singing all day. Bowels constipated, given Salts every day. May 18. 94. Patient is to do well. Does a little sewing. May 31. 94. More disturbed. Does not do any work. Talks all the time about going home. June 1. 94 Appetite very good. Is noisy at times. Is neat in habits. Does not go out any nor does she any work. July 2. 94 Is quiet. Does some sewing. Bowels constipated. Often sent to go home. July 2. 94
July 10. 94 Limbs quite sore. Says she does not feel well. July 23 94 Is in bed today. July 3. 94 Has been in bed 7 days. Does not seem sick. Her limbs are quite sore but no worse than they have been for some time. Her limbs are antiseptically dressed once a day. Bowels constipated. Appetite good. Augt 1. 94 Transfd to Infirmary. Augt 17. 94 Patient operated on. Aug 19 Confined to bed 10 days this month. Clinical Report. Augt 7. 94 Operation for cystocele and repair of perineum. Under ether one hour. Very quiet during P.M. Extremely restless all night & quite noisy. 8th conv. at times. 18th Eczema has appeared over thighs & external genitals. 19th thighs red & irritable. Complains of itching. 20th Parts washed & dusted with bismuth. Very restless, sleeps only 1 hr. Buttocks & thighs very red. Several blisters, some have broken, causes her to be very restless. Resting well greater part of the day. 21. More quiet than usual. Slept & has been quite. Eczema seems better this morning. 22 Slept well nearly all night. Has appetite up to this time was fairly good. Vomited up her supper. Bowels fairly regular. 23. Slept well the greater part of night, continued to improve gradually. Stitches were removed on Sept 1. became more restless again, also eczema became worse. From Sept 3. Improving. Sleepless disturbed. Sept 5 Slept well & continued to improve. Sept 8 Sat up in chair while bed was made. Sept 9. 94 Sat up in chair 15 minutes & was able to be up in ward on Sept. 18. 94 (For particulars see nurse record case.)
Sept 18. 94 Up on ward feels quite well. Good appetite. On tonic. Sept 29. 94 Appetite good. Gen. behavior. Very quiet. Is neat in habits. Bowels regular. On tonic. Transfd to B1 Sept 30. 94 Rechange. Oct 30. 94 Behavior very quiet, except on one occasion when she was very contrary. Assists some with mending and helps some in dining room. Appetite good. Sleeps well. Bowels regular. Does not go riding or walking.
Nov 27. 94 Very quiet, & behavior agreeable. Appetite good. Bowels regular. Neat in habits. Assists some in ward work also in dining room. Dec 29. 94. The same. Jany. 18. 95. Sick in bed all day, ate very little, complains of her head, chest & back. Has a very bad cold. Jany. 19. 95 Sick in bed. Jany 20 '95. Same. Jany. 22. 95 Some better to day. Appetite fairly good.
Jan 23 95. Up all day, cough. Jany 24. 95 Sick in bed, cough. Jany 25 & 26. Sick in bed. Appetite fairly good. 27th Up most of the day. Appetite & cough good. Jany 28 95. Transfd to Feb 2. 95. Has a bad cold. Takes medicine & in bed part of the day. Appetite good. Bowels reg.
Feb 2 95 Cough is better. Appetite quite good. Bowels reg. Sleeps quite well. Neat in habits. Very quiet.
Mch 31. 95 Has a good appetite. Sleeps well. Bowels reg. Talks and sings to herself. Is quite irritable at times.
Apr 30. Appetite good. Bowels reg. Sleeps well. Behavior quiet. Talks quite rationally to any one who goes home.
May 30. Gen. health quite good. Eats well. Helps in dining room. Goes riding and walking.
July 30 Appetite good. Bowels regular. Does not sleep as well of late. Talks to herself. Has delusions. Neat in dress. Goes riding & walking. Sept 30 Has a good appetite. Sleeps well. Neat in habits. Quiet in behavior. Goes riding & walking. Works in dining room. Nov 30 Gen. health good. No change in behavior. Works some on ward. Goes riding & walking. Jan 31 Extremely neat in appearance. Quiet but at times sings & prays & seems quite disturbed - Appetite good - Sleeps well - bowels regular - Assists with ward work - Has delusions
Apr 30 Neat in habits. Quiet: has delusions: Appetite good: Sleeps well: bowels regular: assists with ward work.
May 31 Has been working in sewing room since May 9. No change in patient

(over p. 220)

Personal and Medical History of Mary Slater

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3506

Residence, Ramsey Co: Alm.

Date Admission, 10th October 1893

Admitted by, Dr Phelps Hour,

How Sent, John D. Oliver, Jof P.

Sex, Female

Age, about 45

Civil Condition, unknown

Children,

Age Youngest Child, unknown

Occupation, unknown

Degree Education, Common Sch.

Profession Religion, unknown

Habits, unknown

Nativity, unknown (also of parents unknown)

Physicians Committing, Geo J. Hanley & D C Jones

Correspondents, unknown

Has no family Physician

No. for Year, 16.

Insane Relatives, Unknown

Cause Exciting, unknown

Cause Predisposing, not given

Form,

Accompanying Bodily Disorder, not known

Suicidal or Not, Suicidal (manner unknown)

Date of this Attack, no history prior to 2 years ago.

Duration, not known

No. of Attack, unknown

No. of Admissions, 1st

Age First Attack, unknown

Time of Leaving, Dec. 7. 1894

Time in Hospital,

Result, Died.

EXAMINATION ON ADMISSION.

Exam Oct 12 93 by Dr L Phelps.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Very sluggish.

MEMORY:

Past Events, Impaired

Recent Events,

Special Subjects,

PERCEPTIVITY: Dull

Alert or Dull,

Correct or Illusive,

REASONING POWER: None.

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Very depressed

DELUSIONS:

Systematized or Not, Has many

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Very incoherent

Coherent or Incoherent, Talks of many

Voluble or Reticent, delusions. Seems to think

she has been imposed upon by some one.

Personal and Medical History of Mary Slater

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft WEIGHT, 121/2 lbs NUTRITION, Good but pale

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Coatings, white quite heavy Promptness Movement,

PUPILS, Equality, Size,

Response Light, Sluggish Accommodation, Sluggish.

SIGHT, Good

HEARING, Very deaf

COORDINATION, Arms,

Mary Slater.

Case No. 3506 Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

SENSIBILITY,

HEART, Sounds are normal.

LUNGS, Seem in good Condition

EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal condition

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean. Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 90 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 Mary Slater

FARLEY, FOLAN & SCAMBLER, DAVENPORT, IOWA.



Whole No. 3506

Residence, Ramsey Co: Alm

Date Admission, 10th October 1893

Admitted by, Dr Phelps Hour,

How Sent, John D. Oliver, Jof C.

Sex, Female

Age, about 45.

Civil Condition, unknown

Children,

Age Youngest Child, unknown

Occupation, unknown

Degree Education, Common Scho

Profession Religion, unknown

Habits, unknown

Nativity, unknown, also of parents,

Physicians Committing, Geo J. Hanley & D

Correspondents, unknown

Hasno family physician

No. for Year, 16.

Insane Relatives, Unknown

Cause Exciting, unknown

Cause Predisposing, not given

Form,

Accompanying Bodily Disorder, not known

Suicidal or Not, Suicidal (manner unknown)

Date of this Attack, no history prior to 2 years ago.

Duration, not known

No. of Attack, unknown

No. of Admissions, 1st

EXAMINATION ON ADMISSION.

Exam Oct 12 93 by Dr L. Phelps.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Very sluggish.

MEMORY:

Past Events, Impaired

Recent Events,

Special Subjects,

PERCEPTIVITY: Dull

Alert or Dull,

Correct or Illusive,

REASONING POWER: None.

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Very depressed

DELUSIONS:

Systematized or Not, Has many

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Very incoherent

Coherent or Incoherent, Talks of many

Voluble or Reticent, delusions. Seems to think

she has been imposed upon by some one.

Personal and Medical History of Mary Slater

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft WEIGHT, 121 1/2 lbs NUTRITION, Good but pale

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Coatings, white quite heavy Promptness Movement,

PUPILS, Equality, Size,

Response Light, Sluggish Accommodation, Sluggish.

SIGHT, Good

HEARING, very deaf

COORDINATION, Arms,

Legs, Fair

TREMORS, Hands, slight. Tongue,

Facial Muscles, slight. General, none.

REFLEXES, Patellar, Uneq. L[illegible] absent R.3.

Other Reflexes,

ARTICULATION, Hesitating, Slurred, slurred & stammering.

FACIAL EXPRESSION, worried & anxious.

SENSIBILITY,

HEART, Sounds are normal.

LUNGS, seem in good Condition

EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal Condition

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean. Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 90 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 *Mary Slater*

EARLEY, FOSLER & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Deputy-Sheriff Haas, attended by Mr. McBride, with the following history. This is very meagre. As to nativity, occupation, religion, history of consanguinity or heredity, number of attack, disposition to injure others, habits, previous peculiarities, history of intemperance, or of any severe disease or injury to head, supposed cause of disease, nothing seems to be known. She has been in the Alms House for 2 years, and there is no history of patient prior to 2 years ago. The Disease seems to be increasing, but is variable, though no rational intervals. Derangement is now shown by her being despondent, melancholy; by inability to take care of herself; wanders out-doors during the night; can't dress herself. Has tried to make away with herself, being suicidal; manner unknown. On personal exam. She is stupid. Does not answer any questions put to her. Will not dress herself; generally unable mentally to take care of herself. She said nothing during examination, sat absolutely a "blank". Appearance and manner those of an insane person. The above facts as to her wandering out at night & inability to dress herself &c were also communicated to us by others.

Oct 10 Oct 10/93. The patient, on admission, is in fair physical condition. Was put on B.I. P.O. R.22. T. Normal.
11 Behavior quiet all day. Appetite good, Sleep good, Cough none. Oct 12. 93 Appetite good. Sleep good. Very quiet all day. Oct. 13. 93. Appetite good. Slept well. Has been wanting to go home all day.
14 Very quiet all day. 15th. Wandering from place to place on the ward all day wanting to go home. Appetite good. Sleeps well. 16th Appetite good. Slept well. 17th Appetite good. Sleep good. Resisted when put to bed at night. 18th Has seemed quite well all day, went out walking.
19 Nothing new to day. 20th No change. 21st. Went out walking. Seldom ever speaks. 22 Quiet all day.
31 Eats well, sleeps well 23d. Nothing new to day. Oct. 31. 93. Appetite good. Sleeps well. Seldom ever speaks, when she does it is only to say that she wants to go home to the poor farm. Seems quite demented.

Nov 1/93 to 30 Removed to Annex. Nov 30/93. No material change. Is quite demented.

Dec 31, 1894 Dec 31/93. No noticeable change since last note.

Jan 31 Jan 31/94. Above notes still hold good. Appetite is poor. Patient has to be fed most of the time.

Febro Febro/94. Is quiet. Still has to be fed, the greater part of the time. Is difficult for her to walk, as she does not have much use of her limbs. Goes riding occasionally. Habits, part of the time, dirty.

" 23 Feb 23/94. This patient had been committed here under the "Law of 1893", recently declared unconstitutional. She was, today, taken out, and Returned under "new Warrant" from Olmsted County.

March 2 Fell on the wash room floor striking her right hand & her head. Is rather helpless. March 6/94 Is more helpless. Very hard for her to go up & down stairs. Transfd to C2. Was on this ward from March 7 up to March 9 94 when the fractured hand had healed. Tonic was given & sore was well again. (For particulars see Nurses Notes) Transfd to B3 May 23. 94 Appetite good. Habits dirty. Untidy in appearance. Noisy in behavior, at times, & fighting. Goes walking & riding. Talk incoherent. June 21 94 Complains of pain in left side. Put to bed, applied adhesive plaster. Out of bed and astray, noisy at times. Crying, in restraint 14 hours.

June 94 Up on hall. June 30 94 Appetite poor. Neat in appearance. Clean in habits. Gets a great deal. Walks about ward. Seems very weak.

July 31. 94. Appetite good. Neat in appearance. Clean in habits. Very restless & nervous & sometimes quite noisy. Did not sleep well the past two weeks.

Aug 31 94 Bowels regular. No change. Sept. 6. 94 Much excited. Extremely noisy and violent, also destructive to clothing. Very restless. Inclines to lean body on left side. More quiet. Is quite partic & uncertain in movements. Sept. 27 94 Very much disturbed. Destructive to clothing. Noisy and violent. Appetite poor. Dirty in habits. Oct. 23 94 Very noisy and destructive to clothing, very nervous

Personal and Medical History of *Mary Slater*

and restless on her feet Oct. 26 94. Appetite fair. Dirty in habits. Sleeps poor. Talks incoherently and at times violent. Oct. 29 94 Very nervous in movements and stupid. Very much disturbed, will not sit still, is constantly annoying others. Was very weak and exhausted. Was put to bed. Oct. 30 94 Continues about the same only more restless, falling out of bed, put in restraint sheet 14 hrs. Quite noisy. Nov. 7. 94. Fell on floor & cutting a gash in forehead. Wound washed and dressed antiseptically. Nov. 29 94 Appetite fair usually, dirty in habits. Is boisterous very noisy and restless during day. Walks incoherently. Sleeps poor. Nov. 30 94 Her head healed readily and is now about as usual. Seems very stupid and on a stupor. Sleeping since 3 PM to 6 30 PM. Unable to stand alone. Seemed cold. Put to bed and applied pan bags.

Dec 1. 94. Still continues sleeping, does not seem to recognize anything around her. Pulse F. 160. Dec 7. 94. Died.

Died

Personal and Medical History of Mary Catoman

SEBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3507
Residence, Stillwater, Minn.
Date Admission, 10th October 1893
Admitted by, Dr. Phelps Hour, 7 PM
How Sent, Rudolph Lehmicke, Jeff't. Washington County
Sex, Female
Age, 22 years
Civil Condition, married
Children, none
Age Youngest Child,
Occupation, Housework
Degree Education, Limited reading & writing.
Profession Religion, German Catholic
Habits, probably good
Nativity, Switzerland (Parents also born there)
Physicians Committing, E. V. B. Freligh & D. C. Clark
Correspondents, None given in papers
Family Physcn. E. V. B. Freligh Stillwater Minn

No. for Year, 77
Insane Relatives, none
Cause Exciting, Pregnancy.
Cause Predisposing, probably injury to head in childhood
Form,
Accompanying Bodily Disorder, Epilepsy
Suicidal or Not, not
Date of this Attack, October 3rd 1893
Duration, abut a week.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 22.
Time of Leaving, Dec. 2nd '93
Time in Hospital, 1 mo 29 dys.
Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Examined by Dr. J. J. Phelps

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, apparently good
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Illusive
REASONING POWER: None
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
This patient was carried to the ward very wild and noisy. Was put to bed with restraint shirt. Tries to bite herself and any one near her.

EMOTIONAL STATE: Will not
Normal, Calm,
Indifferent,
Exalted, Very
Depressed,
DELUSIONS: Very many
Systematized or Not
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Very incoherent
Voluble or Reticent, Mixed. This person one subject to another in rapid succession

Personal and Medical History of Mary Catoman

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, In bed WEIGHT, NUTRITION, Good
WOUNDS OR ABNORMALITIES, Scar from injury and trephining in occipital bone
TONGUE, Tremors, Coatings, Furred & Corded Promptness Movement,
PUPILS, Equality, Equal Size, Widely dilated
Response Light, Accommodation,
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Arms and legs constantly in motion
Legs, Turning herself from one side to the other
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Can not test
Other Reflexes,
ARTICULATION, Hesitating, Talking can— Slurred, stands & moves around
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Quick but no murmure
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., Find her pregnant. Probably about 6 mos
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Dirty Clean, Careless,
BOWELS, Normal, Constipated, Constipated Irregular,
APPETITE, Good, Medium, Poor, Poor
SLEEP, Good, Poor, Poor Irregular,
PULSE, 89 RESP., 20 TEMP., 99 2/5
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 Mary Catoman

EUBERT, FICKAR & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Mr J. Fazendin, attended by Mrs A. Fazendin, with the following history of case. There is no history of consanguinity or heredity. This is 1st attack, symptoms first appearing Oct 3/93; she refused to eat & became violent in her actions. Disease is increasing; is not variable; no rational intervals. Derangement now shown by incoherent, irrational talk, violent actions; attempts to evade restraint. She is neither disposed to injure others, nor suicidal, but is of filthy & destructive habits. There were no peculiarities previously known. Nothing known as to history of intemperance. Is subject to Epilepsy from injury to head in Childhood. She has been confined to her room since commencement of attack. Supposed cause of the disease is pregnancy. Has been under treatment by sedatives. On personal Examination, She is incoherent, irrational; violent in actions; said nothing rational. Her appearance & manner were wild & incoherent. Patient had a portion of skull removed at time of accident before mentioned, but without relief of the Epileptic Attacks, which have occurred at intervals.

Oct 10 Oct 10/93. On admission, patient is in an excited condition. Has spitum &c.

11 On admission. Temp. 99 2/5. Oct 11. 93. Behavior violent; in restraint part of the day. Put to bed in restraint sheet; talks incessantly & incoherently. Hysterical at times. Appetite. Drank 7 glasses of milk. Slept 4 hours. Bowels constipated. P 89. R 20. T. 99 1/5

12. Ate good breakfast, out of restraint once; singing nearly all the morning. 9.30 In restraint. Talk is mostly incoherent. Keeps in almost constant motion, but is much more quiet than when admitted. Put upon tonic. Appetite good, in restraint all day. Gave pills. Oct 13. 93 Appetite good. Full bath.

13. Bowels moved, urinated. Out of restraint 3/4 of an hour. Slept 2 hrs this morning. Ate good dinner. Noisy & hysterical most of the day 4.45 gave quieting dose. Refused to eat her supper. 8.30 PM

14. Catherized Oct 14 93 Ate breakfast well. Urinated. Sponge bath. Out of restraint 1 hr. Singing most of the morning. Temp. 99. Resp. 18. P. 80. Ate dinner, cried some, ate supper. Out of restraint 1 hr. Noisy most of the day. Hysterical at times. Bowels moved. 7 PM Urinated.

15. Ate good breakfast. Out of restraint 1 hr 7 A M Urinated. Appetite good. Talks incoherently. Noisy all day. 3.30 Urinated; out of restraint 1 hr. this evening. Gave dose salts. Bowels constipated.

16. Slept from 11 to 2. Extremely noisy for 1 hr. Got out of restraint once. Could not take her up & would had to catherize 7. PM. Gave her milk twice. Talking and singing from 2 to 5 o'clock. Appetite good. Catherized 10 a.m. Very noisy all day. Bites at everything. Restless in acute manial type. Seems this PM. to be developing some fever in spite of restraint & confinement to bed. 6.30 out of

17 restraint 1/2 hr. quiet this evening. Slept nearly all night. Not very noisy, when awake gave her milk twice. Catherized at 2 o'clock. 18th More quiet than usual during night. Slept four hours

18 seems much better & more quiet. Appetite good. In restraint nearly all day. Bowels moved. Temp. 102.4 Pulse not able to take. Was catherized twice. Gave 2 sponge baths.

19. Slept 5 hrs. Catherized twice this day. Appetite good. Bowels constipated. Pulse 96 T. 100 3/5 In restraint. Very noisy this morning, more quiet this afternoon. 20th Slept 2 hrs. Catherized twice. Urinated

20 once T. per rectum 100. P. 90. Took tonic, quieter than usual to day. Sponge bath.

21. Slept 3 hrs. not very noisy when awake. Catherized in night. Urinated twice in day. Full bath. Appetite good. Took tonic. Gave Enema. Bowels moved freely. Appetite good. T. 100 3/5 P. 98.

22 R. 18. Out of restraint 2 hrs. Gave 2 Pills.

Personal and Medical History of Mary Catoman

1893

Oct 22 Slept well all night. Decist this morning. Bowels moved freely. Sponge bath. Bowels moved freely. Full bath. Appetite good T. 98 1/5. P. 88. R. 18. Out of restraint about four hours.

23. Slept 5 hrs. More quiet than usual. Not in restraint at all during night. but had to put in again this morning. Bowels regular. Appetite good. T. 98 2/5. P. 80. R. 18. Did not catherize here at all.

24. Slept well all night. quiet & seems much better. speaks very little English. T. 98. appetite good. Bowels regular.

Oct 31. Sick 21 days this month. Nov. 1. 93 Dressed on the hall. Has good appetite. Is somewhat destructive at times. Is quiet most of the time. Gets a little excited occasionally. Nov 1893 Visited by her husband

Nov 1 and 21. 93. Visited by her husband. Nov 2 5 93 Violent to day. Bowels constipated. Appetite good. Nov 2 8 9 3

. 28. 93. One of limbs swollen

Discharged

Personal and Medical History of Christina Fleckenstein

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3510.
Residence, Faribault, Minn
Date Admission, 11th October 1893.
Admitted by, Dr Linton—Prefers Hour, 5 PM.
How Sent, R. R. Mail, Jof P, Rice County.
Sex, Female
Age, 51
Civil Condition, Married
Children, 9 (4 Dead).
Age Youngest Child, Eight Years
Occupation, Housewife (Husband, Cooper).
Degree Education, Common School
Profession Religion, Catholic
Habits, Not stated
Nativity, Germany (Parents also born there).
Physicians Committing, J. M. Rose & D. McCook
Correspondents, None given in "Papers"—
Family Physician D. D. McCook. Faribault, Minn

No. for Year, 80.
Insane Relatives, 2 brothers; one committed Suicide
Cause Exciting, Puerperal mania
Cause Predisposing, Heredity
Form,
Accompanying Bodily Disorder, None given in history
Suicidal or Not, not
Date of this Attack, Seems continuous
Duration, continuous
No. of Attack, 2nd probably (Dr Pl. Letter 24 yrs ago)
No. of Admissions, 1st Adm.
Age First Attack, about 26
Time of Leaving, Jan. 29th '94
Time in Hospital, 3 mos 18 dys.
Result, Improved.

Crossed from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Exam. Oct 12 93. Dr S. L. Phelps.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY: Noisy & very excited
Clear or Confused,
Quick or Sluggish,
MEMORY:
Past Events, Can not determine
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive, Illusive
REASONING POWER: Impaired greatly.
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Talks in an incoherent & excited manner almost Continually. Refuses all physical Examination.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Exalted.
Depressed,
DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Very incoherent.
Voluble or Reticent, Refuses to answer most questions

Personal and Medical History of Christina Fleckenstein

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Good
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, will not show Coatings, Promptness Movement,
PUPILS, Equality, Can not Examine Size,
Response Light, Refuses to have Examined Accommodation,
SIGHT, Impaired.
HEARING,
COORDINATION, Arms, Good.
Legs, Good
TREMORS, Hands, None. Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Can not Examine.
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Refuses to have Examined.
LUNGS, " " " "
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
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,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Christina Fleckenstein

COBERT, FOLAR & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Sheriff C.W. Stewart, attended by her brother, Mr. Steintz, with following history. As to consanguinity, not known. This is probably 2nd attack or possibly 1st one, continuous; occurring about 25 years ago. Has been insane ever since but with apparent lucid intervals. Was sent to St. Peter 24 years ago, for seven weeks; slight relief obtained. First symptoms of this present attack were manifested by puerperal mania. Disease seems stationary. Derangement is now shown by abuse of husband and children & constant jealousy. Threatens violence to others; but is not suicidal, nor filthy nor destructive. Two brothers were insane; one committed suicide. Patient has always been high-tempered. There is no history of intemperance, or of any severe disease or injury to head. Supposed cause of the disease is puerperal mania. On personal examination, facts ascertained about as above. Manner was excited & occasionally raving.

Oct 11 Oct 11/93. Patient is in goods bodily condition, on admission. Was put on B.V. P.84. R.18. Bodily condition
" 12 Quite clean, no mucus or bruise on left arm. Behavior Extremely noisy most of the day; Does not talk any English. Appetite fair. Rested quite well, bowels constipated. P.87. R.18. Oct 13. More quiet on ward. Appetite fair. Restless most of night talking. Slept 3 hrs. Oct 14. The same. Rested well
15 Very noisy on hall most of the day. Menstruating. Rested quite well. Noisy 1 hr.
16 Appetite poor. Out on hall, otherwise the same. Rested well till 3. a.m. out of bed. Wanted her clothes to dress. Oct 17 93. The same. Restless & quite noisy 1 hr. Oct 18 The same. Restless & noisy 2 hrs. Talking. Oct 19 93. The same. Rested well. Noisy 1/2 hr. 20th The same. Rested well
21 More quiet on hall. Appetite good. Rested well. Oct 22. The same. Restless. Slept 4 hrs.
23 The same. Restless afternoon & night. Noisy 2 hrs. Oct 24. Appetite good. Noisy on the hall lying quietly in bed. Rested well. Oct. 25. 93. Out of bed. Quite noisy 2 hrs talking
Oct 30. 93. A little more quiet than at first. Does very little work. Talks German most of the time. Thinks she owns the hospital. Oct 31. 93. Menstruating. Oct 31. 93. Appetite somewhat better. Very noisy at times. Does not talk English. Nov 14. 93. Out on hall & slightly noisy 2 1/2 hrs. Ashes about 4 hrs
Nov. 16. 93. Moved to Annex.

Dush.

Personal and Medical History of

Personal and Medical History of Ida Harper

BARRETT, PUGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3511.
Residence, 228 Norris St. St Paul
Date Admission, 11th October 1893.
Admitted by, Dr Phelps Hour, 7 PM.
How Sent, John. B. Olivier, Jof P. Ramsey County
Sex, Female
Age, 35
Civil Condition, married
Children, 2 (Two)
Age Youngest Child, 9 years
Occupation, Housewife (Husband, hack-driver)
Degree Education, Common School
Profession Religion, Presbyterian
Habits, not intemperate
Nativity, Minnesota (Father, Minnesota; Mother Germany)
Physicians Committing, Arthur B. Ancker & Arthur Sweeny
Correspondents, Henry Harper, 228 Norris St St Paul
Family Physcn Dr E. J. Sawyer St Paul

No. for Year, 81.
Insane Relatives, None
Cause Exciting, nursing her child sick with Typhoid fever
Cause Predisposing, not stated
Form, Acute mania
Accompanying Bodily Disorder, none noted
Suicidal or Not, Not
Date of this Attack, Oct 8th 1893
Duration, about 3 days.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 35 years
Time of Leaving, Oct 28. '93.
Time in Hospital, 17 days—
Result, Died.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exam Oct 14. 93. Dr K. Mc S. K. Phelps

MENTAL ACTIVITY:
Clear or Confused, Confused.
Quick or Sluggish,
MEMORY:
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull.
Correct or Illusive, Illusived.
REASONING POWER: Impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Talks constantly. Very noisy in her talk. Mind rambles from one thing to another.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Exalted.
Depressed,
DELUSIONS:
Systematized or Not, many
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: very incoherent
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Ida Harper

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Poor, thin and pale
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, D. Equal. Size, dilated
Response Light, Good. Accommodation, Good.
SIGHT, Good.
HEARING, Good.
COORDINATION, Arms, Good.
Legs, Good.
TREMORS, Hands, fine Tongue, Some tremor
Facial Muscles, General,
REFLEXES, Patellar, /
Other Reflexes, Eq normal
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Fair
SENSIBILITY,
HEART, No murmurs
LUNGS, Seem in fair condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, / Clean, clean Careless,
BOWELS, Normal, 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,
Brothers or Sisters, Answers no questions

Personal and Medical History of Ida Harper

GIBERT, FICKAS & CHAMBERS, DAVENPORT, IOWA.

189[illegible]

Patient was brought here by Deputy Sheriff Haas attended by Miss Akers, with following history. There is no history of consanguinity or heredity. This is 1st attack; took place on Sunday Oct 8th. began to fear her child was stolen; then became wildly excited. Was sent to City + County Hospital St Paul; no results. Disease appears to be increasing; not variable; no rational intervals. Her derangement is now shown by religion + self-exaltation. She is neither disposed to injure others, nor suicidal, but is of filthy + destructive habits. Previously, was always religiously inclined, and attended the "Mills Revival Meetings" a few months ago, with much fervor. No history pro. of intemperance or of severe disease or injury to head. Was restrained by camisole + sheets for 3 days. Cause of disease is supposed to be "nursing" her child who was sick with Typhoid fever. Has been under treatment by Bromides, Hyoscin, Morphine; no results. On personal Examination is coldly rated; talking incessantly; believing herself to be Rev[d] Mills, Queen Victoria and other exalted persons; sees people about her + receives messages from God + others. Is restless, sleepless, and violent. She said "that she was Rev[d] Mills + could save the world". Wished the nurses to sing hymns. Talked incessantly + incoherently on all subjects. Also talked wildly; tossed + rolled about and was extremely violent, screaming all night. Appearance + manner, violent + excited. She had a Temperature of 102° at the 10th falling to 101° this morning. Refuses nourishment + cannot sleep.

Oct 11 Oct 11/93. On admission, patient is in seemingly fair strength. Was put on B[d].

" 12 Very noisy. Complains of pain in left leg. Absolute Saxon. Drank cup of coffee this morning. Bowels constipated. Temp 98. Pulse 80

" 13 Resp 28. Noisy all day. Ate very little during the day. Mouth in a bad condition. Sores on lips and around mouth. Shows a feverish condition.

" 14 Very noisy and violent. Caught attendants at last time.

" 15 Extremely noisy all day. Appetite very poor. Vulgar in her talk.

" 16 Very restless. Mouth + pharynx coated heavily. Tongue 103. Noisy. Put to

" 17 bed. Requires constant watching to keep her in bed. Cool Sponge bath given. Ice cloth on her head all last night. Mouth very foul. Tongue bad. Noisy.

" 18 Sent to Sick Ward. Temp 102. Pulse 100. Put upon milk diet. Put in some restraint to keep her in bed.

" 19 Noisy and violent all day. Talks incoherently. Manifest delusions. Temp 103. Pulse 120. Milk diet. Mattress. Did not sleep during the night. Very quiet this morning + out of restraint.

" 20 Pulse up during the P[M]. to 104. Pulse 104. Emma given. Bowels moved. Quiet during the evening.

" 21 Slept about part of night. Complains of pain in her bowels. Quiet. Temp 102 4/5. Pulse 118. R 20. Out of restraint only one hr. Took her milk.

" 22 Slept well and not in restraint during the night. Temp 102. 4/5. Pulse 108. Stronger + more rational. Bowels have

Personal and Medical History of Ida Harper

Oct 23 Did not sleep any all night. Pulse weak. Restless and noisy. In restraint this morning. Temp 102 1/5. Pulse 120. R 38. Refused to take milk or any nourishment during the day.

" 24 Did not sleep any during the night. Quite noisy. Temp 102. Pulse 120. Resp 28. In restraint all day. Mental quiet this morning. Took very little nourishment. Sponge bath given.

" 25 Slept until 4 A. M. Took milk at 4[30] and at 5 A. M. Temp 100 1/5. Pulse 120. A. M. Took milk malt ale. Has cough. Very weak. Eyes are sore.

" 25 10 A. M. Temp 100 2/5. Pulse 136. R. 40. Brandy given. Milk 3ij.

" 26 A. M. 2.30 Temp 100 1/5. Pulse 130. R 38. Did not sleep any all night. Coughed 4.30 P M. Temp 102 2/5. Pulse 120. R 36. Sponge bath. Very weak. Talks in a whisper most of the time. Eyes still sore. 8 P M. Temp 102 2/5. P 109. R 43.

" 27 Slept 2 hours last night. 7[30] A. M. Temp 101 2/5. Pulse 106. R 136. Sponge bath. 1/2 cup of milk given. 2 P M. Very weak. Dyspnoea. Temp 99 1/5. P 104. R. 30. 4[30] P M. Temp 98 2/5. Brandy 3ss. Pulse 109. R 40.

" 28 4[30] A. M. Temp 96 2/5. Pulse Rec Return. R 48. 7[30] A. M. Temp 96. 3/5. R. 58. Very weak. Sinking. 12 noon drank a little milk. 1 P M unable to swallow. 6 P M. died.

For daily temperature chart see letter file.

Died

Personal and Medical History of Annie Dickson

BERRY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3512
Residence, 1428 Stillwater Ave. St Paul
Date Admission, 11th October 1893.
Admitted by, Dr Phelps Hour, 7 PM
How Sent, John B. Olivier J.P. Ramsey County
Sex, Female
Age, 22
Civil Condition, single
Children,
Age Youngest Child,
Occupation, Domestic (father's occupation unknown)
Degree Education, Limited to reading & writing.
Profession Religion, Congregational
Habits, unknown
Nativity, Canada (Parents also born there).
Physicians Committing, Arthur B. Ancker & Arthur Sweeney
Correspondents, John Dickson Eau Claire Wis. (Father)
Geo. Dickson Eau Claire Wis. (Brother)
Family Physician unknown.

No. for Year, 82
Insane Relatives, unknown
Cause Exciting, previous sickness (typhoid)
Cause Predisposing, not stated
Form, acute mania
Accompanying Bodily Disorder, none noted
Suicidal or Not, not
Date of this Attack, a week ago
Duration, a week.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 22 Years
Time of Leaving, Dec. 16 '93
Time in Hospital, 2 mos 5 ds.
Result, Rec,

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exam'd by Dr. Linton Phelps

MENTAL ACTIVITY:
Clear or Confused, Mind acts quickly but is unable
Quick or Sluggish, to speak readily. Clear but can't express herself.

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

PERCEPTIVITY:
Alert or Dull, Alert.
Correct or Illusive,

REASONING POWER: Seems good
Ordinary Subjects,
Own Mental State, Good.
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
This patient was put right to bed upon admission in very weak physical condition

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

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

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Willing to talk as is evident
Coherent or Incoherent, but articulates with
Voluble or Reticent, great difficulty. Has bitten
her tongue at times.

Miss Annie Dickson

Case No. 6.—Girl, age 22, admitted Oct. 11, 1893. Came from city and county hospital, St. Paul. Had had typhoid fever, after which the present state supervened. Had not been up from bed, but after fever became incoherent, hysterical and restless, tossing about, talking wildly, etc., making faces and rolling her eyes. Was carried into this hospital about as described above, on entrance showed acute mania in form, with hysterical element. Was extremely pallid and restlessly tossing and moving about. Taken on the ward to the surprise of the nurses, one-half hour later she talked quite sensibly. In the morning was found with pupils widely dilated, choreic movement of hands, head and muscles of face. Could hardly speak a word or two at a time; afraid to get tongue between teeth, and completely helpless from the chorea and weakness combined. Four days later she had improved much; could speak more though with effort; hands would be quite quiet if at rest, but would wander about considerably in attempting to use them. Her mind, except some confusion, seemed clear and she struggled to overcome the motor difficulty. The combination of symptoms with its suddenness suggested some sudden and comparatively gross brain changes. Ten days after the attack at date of writing, she can say whole sentences with only slight effort or jerking, and only slight movements of hands are noted when she uses them. Has gained in flesh some, though on liquid food. Lies prone in bed and quite helpless. Temperature has been up in afternoons lately, though about normal for two days after her entrance. There seems to be a distinct relapse of the typhoid. Sleeplessness, some headache and weakness are all she complains of, mind quite clear.

This case is somewhat anomalous, the several theories suggested are none of them quite satisfactory.

Of these six cases the first two are like ordinary chorea, with mental weakness and confusion. The next two are of the adult, progressive choreic type, the fifth is of imbecile

Dickson

—(Continued.)

UTRITION, Very poor, jaundiced

ss Movement, Irregular & jerky movement

ed jerky movements of limbs.

ly

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, clean, Careless,
BOWELS, Normal, Constipated, Constipated, Irregular,
APPETITE, Good, Medium, Poor, poor
SLEEP, Good, Poor, Irregular,
PULSE, 120 RESP., TEMP., varies fr. 99 to 101. Has had typhoid fever for 6 weeks.
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 His

SIBLEY, PUGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3512

Residence, 1428 Stillwater Ave

Date Admission, 11th October 18

Admitted by, D. Phelps Hour,

How Sent, John B. Olivier, J. & P.

Sex, Female

Age, 22

Civil Condition, single

Children,

Age Youngest Child,

Occupation, Domestic (father)

Degree Education, Limited to reading

Profession Religion, Congregational

Habits, unknown

Nativity, Canada (Canada also bo

Physicians Committing, Arthur B. Inch

Correspondents, John Dickson, East Cla
Geo. Dickson, East Cla

Family Physician unknown.

EXAMIN

Exam'd by Dr. Linton

MENTAL ACTIVITY:

Clear or Confused, Mind acts quick

Quick or Sluggish, Speak readily. Clear but can't express herself.

MEMORY:

Past Events, Good

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert.

Correct or Illusive,

REASONING POWER: Seems good

Ordinary Subjects,

Own Mental State, Good.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

This patient was put right to bed upon admission in very weak physical condition

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, none determined

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Willing to talk as is ashamed

Coherent or Incoherent, but articulates with

Voluble or Reticent, great difficulty. Has bitten her tongue at times.

part of the time. Her recovery was not quite perfect, though approximately so, and was coincident with the loss of choreic tendency.

Case No. 3.—Woman, age 66, admitted June 30, '92. Physical symptoms, choreic movements of head, and to lesser degree of hands, patellar reflex extremely exaggerated, some inco-ordination. Mentally, shows mental enfeeblement, or dementia, with a marked melancholia, which seemed a logical result of her knowledge of her own enfeeblement. Had made suicidal attempts in her despair of cure. During her stay here she was often dizzy and occasionally would stay in bed from one to three days with dizziness, some headache, and increased mental confusion. Out on trial for a while she became worse, improved again after returning and again went out, and is now at home on trial. In this case chorea did not recede, nor did the mental enfeeblement to any great degree.

Case No. 4.—Woman, age 59, admitted July 6, 1893. Chorea commenced fifteen years back, as a sequel to chorea; also said to have "lesion and spinal cord." Mental failure has progressed with the chorea, and is demented though quite active at this time. Patellar reflex is absent; there is a vague history to the effect that her mother was similarly troubled, which, if so, entitles it to the name hereditary chorea. At any rate this is another case of "Adult Progressive Chorea," with "Choreic Dementia."

Case No. 5.—Man, age 39, admitted Feb. 10, 1893. Physically has chorea so extreme and intense as to make him almost helpless. Can not dress self, can only get out one or two slurred words at a time, can walk but little. Mentally is distinctly feeble-minded or imbecile in type, though early in life he was able to learn much. The mental state is congenital, and the history would seem to make the chorea date from childhood.

Personal and Medical History of Annie Dickson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Very poor, gaunt, cicl

WOUNDS OR ABNORMALITIES, Scars of ulcers on both ankles.

TONGUE, Tremors, Very unsteady Coatings, slight. Promptness Movement, Irregular & jerky movements of tongue.

PUPILS, Equality, Widely dilated. Size,

Response Light, Accommodation,

SIGHT,

HEARING, Good

COORDINATION, ~~Arms~~ Impaired, arms much impaired jerky movements of limbs.

Legs,

TREMORS, Hands, Coarse Tongue, Jerky

Facial Muscles, Jerky General,

REFLEXES, Patellar,

Other Reflexes, Con not test

ARTICULATION, Hesitating, Very Slurred,

FACIAL EXPRESSION, Anxious and staring

SENSIBILITY,

HEART, Tumultous action and very quick.

LUNGS, Can not examine thoroughly

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, clean Careless,

BOWELS, Normal, Constipated, Constipated Irregular,

APPETITE, Good, Medium, Poor, poor

SLEEP, Good, Poor, Irregular,

PULSE, 120 RESP., TEMP., varies fr. 98 to 101. Has had typhoid fever for 6 weeks.

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 Annie Dickson

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy Sheriff Haas, attended by Mrs Akers, with the following history of case. Unknown as to consanguinity or heredity. This is the 1st attack, symptoms first appearing a week ago; began to be restless and hysterical, tossing about, talking wildly &c. Was sent to the City & County Hospital, St Paul. Had Typhoid fever, from which she recovered & the present mental condition supervened. Disease seems to be increasing; not variable; no rational intervals. Derangement now known by her being generally incoherent, talkative & irrational, but no subject seems predominant. She has shown no disposition to injure others, nor is she suicidal, nor of filthy or destructive habits. No peculiarities &c were previously shown. No history of intemperance known, nor of any severe disease or injury to head (except as above). Has been restrained in bed by sheet. Cause of the disease is supposed to be previous sickness (Typhoid). She has been under medical treatment by bromides Hyoscin & morphine; no results. On personal examination, she lies in bed, with eyes rolling, distorted mouth, tossing from side to side almost incessantly, moving her eyes constantly. Talking incoherently & loudly screaming & yelled & tried to get out of bed, requiring restraint. She talked incoherently about pain; wanted to kill herself; screamed loudly nearly all the night. Tossed & rolled about, throwing her arms about & screaming. Constantly makes faces & rolls her eyes. Appearance & manner violent & excited. Has had this (supposed) Typhoid fever recently.

Oct 11 Oct 11/93. On admission, the patient was carried into the House & put to the ward. Was put on C. — On admission P. 120. R 20. T. 101. Bodily Condition clean. Injuries an old sore on each leg. Is
12 quite jaundiced. Oct 12 93 Articulation very indistinct, shuts her teeths, seems unable to open them to talk. Movements are jerkey in character. Talks in jerkey way. Talks sensibly. Appetite Takes broth and milk to solid food. Sleeps quite well. Bowels constipated. P. 120. R. 20 T. 101.
13 Slept quite well during night. Speech very difficult. Still jaundiced all over body. Gave 2 pills. Takes broths, milk and Eggnog. T. 99 4/5. P. 128. R 20. Says she had typhoid fever five weeks, says she began to have jerkey movements about a week ago. Oct 14 93 Did not sleep any during night. Says she
14 does not feel so well. More nervous. Arms and hands in almost constant motion. Jerkey movements. Took 3 Eggnogs, some beef tea and milk. Very restless this P.M. & visited by father & brother. T. 99. P. 118. R. 18.
15 Slept well nearly all night; not so nervous when awake. Looks much brighter, talks more freely, seems to realize everything. Bowels moved, took Egg nog, beef tea, milk. T. 100 4/5. P. 116. R. 18. Complains of some headache. Talk is coherent & sensible articulates more distinct. Oct 15 93 Less of the movements today. Visited by father
16. brother & friend. Oct 16 93 Slept nearly all night much brighter & better today. Visited by her brother. Somewhat nervous, gave quieting powder; bowels constipated. T. 100 4/5. P. 116. R. 18. Alcohol baths. Took Eggnog, chicken broth, beef tea. Oct 17 93 Slept well. Less of the movements today. Egg nog, chicken broth. Three
18 alcohol baths T. 102 4 P. 128. R 24. Visited by her brother. Lemonade. Oct 18 93 Slept quite well. Very quiet. Talks more freely. Articulation more distinct. Gave Enema. Bowels moved freely. T. 103.
19 P. 120. R 18. Gave alcohol baths. Eggnog and broths. Lemonade. Oct 19 93 Slept well during night. T. 103. P. 140. R 20. Slept about 2 hours during day. Complains of a pain in her side. Took Egg
20 nog, broths and tea. Gave alcohol baths. Oct 20 93 Slept nearly all night. Bowels constipated. Gave Enema. Bowels moved freely. T. 103. P. 140. R 20. Gave 4 teaspoons brandy every 2 hours
21. Gave broths Egg nog & tea. Oct 21 93 Slept quite well during night. Complains of being dizzy and of head ache. Face pale & flabby, bad taste in mouth. Articulation is quite easy. Gave baths.

Personal and Medical History of Annie Dickson.

1893 Oct 21. Complains of pain in neck. Rubbed with liniment. T. 103 1/5. P. 132. R. 18. Gave dose of salts.
" 22 Did not sleep as well as usual. Still complains of pain in neck. Malt ale 3 times a day. Brandy every
23 2 hours. Broths, Egg nog & tea. T. 103. P. 136. R 31. Oct 23 93. Slept from 2 to 5 am. Seems bright. Pulse much
better. Egg nog, chicken broth, beef tea & tea, gave several alcohol baths. T. 104 3/5. P. 140 R 40. Does not
24 feel as well this evening. Oct 24 93 Did not sleep as well as usual. Articulation distinct. Movements
gradually disappearing. Slept about 6 hours during day. T. 103 1/5. P. 122. R 37. Gave alcohol baths
25 Malt ale & medicine, Egg nog, broths, brandy every 2 hours. Oct 25 93 Slept quite well during night. Resting
quietly. Pulse good. Says she feels better. T. 101 4/5. P. 130. R 40. Oct 31 93 Fed 20 days this month.
Dec 1 Patient sitting up. Is gaining strength quite fast. Has a good appetite. Has
a salt bath every other day & is on tonic. Dec 15 93 Assists a little with dining
room work. Does some sewing for herself
December 16 1893. Went home.

Personal and Medical History of Lucy Kellogg

SIBBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3513.
Residence, St. Paul, Minn
Date Admission, 13th October 1893.
Admitted by, D. Phelps Hour, 7 PM
How Sent, John. B. Olivin, Jof P, Ramsey County
Sex, Female
Age, 59 years
Civil Condition, married
Children, 2
Age Youngest Child, 27 years
Occupation, Housewife (husband, farmer)
Degree Education, Common School
Profession Religion, Methodist
Habits, Not intemperate
Nativity, New York (father + mother also in U.S.A.).
Physicians Committing, P. Marchand & R.S. Bole
Correspondents, Warren Kellogg 594 Kellogg St. Paul Minn
Mrs C. E. Spoller Valley Creek Minn
Family Physcn; D. Stevens Lake Elmo Minn

No. for Year, 83.
Insane Relatives, None
Cause Exciting, Not known
Cause Predisposing, possibly Injury to head
Form, acute melancholia
Accompanying Bodily Disorder, Head injury, 10 yrs ago, by a fall
Suicidal or Not, Not
Date of this Attack, 4 days ago
Duration, 4 days.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 59 years.
Time of Leaving, Oct. 30 '93
Time in Hospital, 17 dys.
Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Examined Oct. 13. Patient put in bed 12 M. and D. Phelps.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, very confused
Quick or Sluggish, very active
MEMORY:
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive, very illusive.
REASONING POWER:
Ordinary Subjects, very much impaired
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, depressed.
DELUSIONS:
Systematized or Not, many delusions.
Special Subjects, mind flies from one thing to another.
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, } Talks and complains
Voluble or Reticent, } almost constantly. Noisy
in her talk.

Personal and Medical History of Lucy Kellogg

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 65 lbs NUTRITION, Poor. Very pale.
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Very irritable, red. Coatings, Promptness Movement,
PUPILS, Equality, Size, dilated
Response Light, Accommodation,
SIGHT, Fair, but uses glasses
HEARING,
COORDINATION, Arms, Prob none, can not test.
Legs,
TREMORS, Hands, some. Tongue,
Facial Muscles, General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Fair Slurred,
FACIAL EXPRESSION, anxious
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Hypostasis manifest over both lungs.
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION, Ceased
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, clean Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor, Poor.
SLEEP, Good, Poor, Irregular,
PULSE, 120. 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 *Lucy Kellogg.*

LEBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Wm. J. Vandraw, attended by Mrs Vandraw husband, with following history. No history of Consanguinity or heredity. This is the 1st attack, symptoms appearing 4 days ago. She showed delusions on every subject. Disease appears increasing; not variable; no rational intervals. Derangement is now shown on every subject. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. No peculiarities previously shown. No history of intemperance. Received an injury to head, 20 years ago, by a fall. She has not been restrained or confined. Don't know supposed cause of disease. No medical treatment has been given to her. —

On Personal Examination, she shows delusions on every subject; her talk was all insane and had no meaning whatever; did nothing during examination; appearance & manner indicated insanity. This also ascertained that She has been in her present condition 4 or 5 days past. — " —

Oct 13 Oct 13/93 The patient is in an aged & weak condition. Was put on B.V. on admission.

13 On admission: P 120. R 20. T 100 4/5. Gave sponge bath. Body clean

14 Put to bed. Very restless. Sitting up in bed most of the time. Refuses food. Drank 1 Egg nog. Slept 2 hrs. Has some cough. Bowels moved twice P 120. R 20. T 100.8

15 Refuses to take food. Restless. Noisy at times. Drank a few teaspoonfuls of Egg nog. Bowels moved twice. Very quiet this morning, but very restless this afternoon; not able to keep her in bed. Noisy at times. Put in slight restraint. Got out of it once. Oct 16 93 Couldn't keep her in bed. Refuses to take any nourishment. Didn't sleep any during the night. Bowels moved once. Egg nog. 1 Cup Coffee. 1 cup beef tea. Ate some toast, drank Coffee. T. 100. P. 118. R 20. Very much quieter to day.

17 Has slept all through the night and 1 hour this morning. Drank Egg nog. 2 cups of Coffee. Bowels moved, bed changed. Drank a cup of tea and some broth. Very quiet. Was visited by her husband.

18. Slept well during the night, seems to be better. Drank 1 cup of Coffee. Bowels moved. Very quiet. Bowels moved 6 times. Out of bed most of the time. Drank 2 cups of Coffee. Egg nog, chicken

19. broth and ate small piece of toast. Oct 19 93 Slept very good. Bowels moved. Had malt ale twice. T. 5 am: 97. More quiet. Drank Coffee, ate some toast, bowels moved twice, urinated once.

20. Bed changed 3 times. T. 98. Drank chicken broth. Oct 20 93 More quiet than usual. Bowels moved,

21. bed changed. Medecine. T. 98. P 110. R 20. Drank 1 cup of Coffee. Oct 21 93 Ate some toast. Took bath. Gave tonic. P. 110. Egg nog. Seems bright and intelligent. Took malt ale, Egg nog, 1 cup of Coffee.

22 Very quiet. T. 98. Bowels moved twice. Bed changed. Oct. 22 93 Slept 3 hrs. Wanted lamp in her room, very unreasonable. Drank milk 3 times. T 97. P 112 at 6 a.m. 7 am. cup of Coffee, Egg nog, tonic. T. 97. P.M. bowels moved twice, bed changed, urinated. Slept about 3 hrs.

23. 5 a.m. T 97. P. 120. R 19. Bowels moved twice, Urinated, bed changed 3 times. 7.30 a.m. chicken broth, ate some bread and butter. Sponge bath, malt ale, bowels moved, seems much better. Milk P.M. T. Temp. 98. ~~Bowels moved twice. Bed changed, urinated. Slept about 3 hrs.~~

24 Drank one cup of Coffee. Malt ale. Sponge bath. Drank 1 cup of boiled milk. Egg nog. Cup of potatoe soup. Bowels moved 3 times. Urinated twice. Bed changed 5 times. T 97½. P 106.

25 Asleep nearly all day. Bowels moved and urinated twice. Seems much brighter. Drank some beef tea and cup of coffee. Malt ale medecine for bowels twice. T. 96. P 98. R 21.

26. 7. o.t.m. Slept 3 hrs, didn't want any nourishment. In a stupor for about 1 hour, called out

Personal and Medical History of *Lucy Kellogg.*

1893.

Oct 26 be around. Bowels moved. Medicine. Bed changed. Malt ale. 1 P.M. Drank some chicken broth ate a little toast. Wine, more quiet. 6 P.M. Beef tea, ½ cup of coffee, urinated, bowels moved

27 medecine T. 96 & P. 104. Slept well during the night. Oct 27 93 Slept well all night. Appetite good. Seems much better. Bowels moved twice. Medecine twice. Tonic 3 times. T. 97 3/5 P 90. R 20. Clinical Report. Oct 14 Temp 96 & 2. Pulse 60

28. ate a good breakfast. Seems much better. Was visited by her husband. Very quiet all day. T 97 3/5

29 Appetite good. Sleeps well. Dressed and sitting up. Was visited by her husband & daughter. T. 97. P 90.

30 Went home this morning.

Personal and Medical History of Emma Landerville

EBBART, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3518

Residence, 60 Lyton Place, St. Paul

Date Admission, 18th October 1893.

Admitted by, Dr. Kilbourne Hour, 7 PM

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

Sex, Female

Age, 35

Civil Condition, married

Children, one

Age Youngest Child, 21 years

Occupation, sewing

Degree Education, Common School.

Profession Religion, Baptist

Habits, probably good

Nativity, U.S. (Father, England; Mother New York)

Physicians Committing, Dr. S. Hauley & D. E. Jones

Correspondents, Mrs E. G. Germain

To Alvie Germain (Sister in law) St Paul Minn

No. for Year, 88.

Insane Relatives, none

Cause Exciting, Menstruation

Cause Predisposing, Chronic

Form,

Accompanying Bodily Disorder, None noted

Suicidal or Not, not

Date of this Attack, 4 years ago

Duration, 4 years

No. of Attack, 1st (continuous)

No. of Admissions, 1st

Age First Attack, about 31 years

Time of Leaving, Dec. 14th '93

Time in Hospital, 1 mo 2 wks.

Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exam Oct 1893 by Dr. Lenton Phelps.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Good

Recent Events, Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Seems correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, Can not determine.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Says all family very healthy, she has always been well until now is tired out

EMOTIONAL STATE:

Normal, Calm, Calm

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None determined at Examination

Special Subjects, Speaks of having some trouble with people in St Paul, but will not say as to what is was.

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Talks willingly - quite freely

Gets tired. Thinks she is over-worked. Says came here to get rested up.

Personal and Medical History of Emma Landerville

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2 1/4 WEIGHT, NUTRITION, Good

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, None Coatings, Pale & flabby Promptness Movement, Normal

PUPILS, Equality, Equal Size, normal

Response Light, Accommodation,

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Good

Legs, Good

TREMORS, Hands, None Tongue, none

Facial Muscles, none General,

REFLEXES, Patellar, Eq. 9-10

Other Reflexes, Good

ARTICULATION, Hesitating, Prompt Slurred,

FACIAL EXPRESSION, Normal

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Seem in good cond

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean Clean, Careless,

BOWELS, Normal, Normal Constipated, Irregular,

APPETITE, Good, Poor ~~Medium~~, Says mouth tastes ~~Poor~~ bitter

SLEEP, Good, Poor, Irregular,

PULSE, 78. RESP., 24 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 of Paralysis, always had been healthy

Father or Pat. Relations, Father when she was very young

Brothers or Sisters, Brother healthy.

Personal and Medical History of Emma Landerville

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893 This patient was brought here by Deputy Sheriff P. C. Haas, attended by Mrs. Jermain (daughter) with the following history. There is no history of consanguinity or heredity. This seems to be 1st attack, continuous. She has not been previously sent to hospital. First symptoms manifested themselves 4 years ago. Disease appears to be increasing; but it is variable & there are rational intervals; at her "monthlies" she is worse. Derangement is now shown by thinking that men intend her, and parading street with pistol to defend & protect herself. Has shown a disposition to injure others. Is neither suicidal, nor filthy nor destructive; no peculiarities previously shown; no history of intemperance, nor of any severe disease or injury to head. She has not been restrained or confined, nor under medical treatment. Supposed cause of disease is Menstruation. On personal examination, thinks she is being persecuted and that men want to have intercourse with her. She made the above remarks. Appearance, manner and actions indicated insanity.

Oct 18 Oct 18 93. The patient, mad mission, is in good physical condition. Weight on B's. Bodily condition clean. Injuries none. Oct. 19 93 Behavior quiet, Appetite good. Sleep good.
Oct 19 Records reg: Complains, injuries: none Oct 20 93. Pers crying said she was homesick
20 Appetite good. Sleeps well Oct 21. 93. Quiet all day, appetite good, Sleeps well
21 says she is homesick, has been crying today. Oct 22 93. Nothing new today.
22 Out to sewing room today and seems more contented now, that she is busy.
23 Appetite good. Sleeps well Oct 26 93 No change. Oct 27 93 No change. Oct 28 93 Goes
24 to sewing room every day. Seems quite contented & eats & sleeps well, talks quite
sensibly Oct 29. 93. Wanted to stay at home from chapel because she didn't wear
hats. Quiet all day - Oct 30 93 No change. Oct 31. 93. Goes to sewing room every
day. Appetite good. Sleeps well. Nov. 1. 93 Appetite good. Sleeps well. Gen health good
Nov. 2. 93. Removed to 4 & E. Nov. 3 93 Behavior quiet. Seems to talk quite sensibly.
Has not been to sewing room for about 2 weeks. Mentor: about the 28th.

Dish

Personal and Medical History of

Personal and Medical History of Caroline Fredel

SHERET, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3520.
Residence, St. Paul, Minn
Date Admission, 19th October 1893.
Admitted by, Dr Phelps Hour, 7 PM
How Sent, Jno B Olivier, Jof P, Ramsey County
Sex, Female
Age, 42
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Servant
Degree Education, Limited reading & writing
Profession Religion, Catholic
Habits, Probably good
Nativity, Germany (parents also born there)
Physicians Committing, G J Hanley & H Shimonek
Correspondents, Father Fredel St Paul (Westside).
Family Physician, H. Shimonek, St Paul



No. for Year, 90.
Insane Relatives, None
Cause Exciting, Loneliness & religion
Cause Predisposing, previous attacks
Form,
Accompanying Bodily Disorder, None noted in history
Suicidal or Not, not
Date of this Attack, Several days ago
Duration, Several days
No. of Attack, 3rd (one 5 years ago & one 2 years ago).
No. of Admissions, 1st
Age First Attack, about 37.
Time of Leaving, May 10. 1893
Time in Hospital, 4 yr. 6 mo. 21 da.
Result, Died Heart failure

EXAMINATION ON ADMISSION.

Exam by Dr L Phelps. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Quick.
Quick or Sluggish,
MEMORY:
Past Events, Good
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive,
REASONING POWER: Seem imperfect
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Quiet most of the time
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 Caroline Fredel

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 116 lbs. NUTRITION, Fair, but pale
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Considerable Coatings, Pale reddish coat Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Good. Accommodation, Good.

Caroline Fredel.

Case No. 3520 Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file with the original ones.

REFLEXES, Patellar, absent in both
Other Reflexes,
ARTICULATION, Hesitating, Hesitating Slurred, is does not speaking.
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Irregular
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, normal Constipated, Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Fair Poor, Irregular,
PULSE, 80 irregular. RESP., 20. TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, healthy
Father or Pat. Relations, says healthy
Brothers or Sisters,

Personal and Medical History of Caroline Fredel

SARGENT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3520.
Residence, St. Paul, Minn
Date Admission, 19th October 1893.
Admitted by, D^r Phelps Hour, 7 PM
How Sent, Jno B. Olivier, Jof P, Ramsey County
Sex, Female
Age, 42
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Servant
Degree Education, Limited reading & wri
Profession Religion, Catholic
Habits, probably good
Nativity, Germany (parents also born there)
Physicians Committing, G. J. Hauley & H. Shimonek
Correspondents, Father Fredel St. Paul (Westside).
Family Physcn, D. Shimonek; St. Paul

No. for Year, 90.
Insane Relatives, None
Cause Exciting, loneliness & religion
Cause Predisposing, previous attacks
Form,
Accompanying Bodily Disorder, none noted in history
Suicidal or Not, not



Time in Hospital, 7 yr. 0 mo. 21 da.
Result, Died. Heart failure

EXAMINATION ON ADMISSION.

Exam by D^r L. Phelps. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Quick.
Quick or Sluggish,
MEMORY:
Past Events, Good
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive,
REASONING POWER: Seem's impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Quiet most of the time
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 Caroline Fredel

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, 116 pds. NUTRITION, Fair but pale
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Considerable Coatings, Yellowish coat Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Good. Accommodation, Good.
SIGHT, Good.
HEARING, Good.
COORDINATION, Arms, Good.
Legs, Seems dizzy and staggers some in walking.
TREMORS, Hands, Slight. Tongue, Considerable
Facial Muscles, General,
REFLEXES, Patellar, absent in both
Other Reflexes,
ARTICULATION, Hesitating, Hesitating Slurred, as does not speaking.
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Irregular
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, normal Constipated, Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Fair Poor, Irregular,
PULSE, 80 irregular. RESP., 20. TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, healthy
Father or Pat. Relations, says healthy
Brothers or Sisters,

Personal and Medical History of Caroline Fredel

EBERT, FIELAR & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy Sheriff Shaas, accompanied by Wm Francesco, with the following history No history of consanguinity or heredity. This is 3rd attack; others occurred 5 and 2 years ago, respectively; their duration several weeks. First symptoms of this attack were manifested several days ago; was found wandering about. Disease appears to be increasing; but is variable & there are rational intervals, but these do not occur at regular intervals. Derangement is now shown on subject of religion. Patient is neither disposed to injure others, nor suicidal, nor of filthy or destructive habits. Previously, she manifested religious impressions. There is no history of intemperance &c, nor of any severe disease or injury to head. She has not been restrained or confined. Supposed cause of disease is loneliness & religion. On personal examination, there is found an inability to care for herself; said she was wandering about and frequented a Priests' Porch: Appearance & manner were excited.

Oct 19 Oct 19/93. The patient, on admission, is in fair physical condition. Pulse 80. R 18. Temp 98.4 Bodily quite tidy. Robe ries. Very quiet. Oct 20 93. Very nice & quiet on hall. Helped some with ward work. Odd walking. Talks but very little English & does understand English. Appetite good. Sleep restless & awake. Slept 3½ hrs. Bowels moved P. 78. R 18. T 98.4 Oct 21 93. Appetite good. Rested quite well. Slept 6½ hrs. Headache & feeling dizzy. Oct 22 93 The same. Restless till 11 30 Complains of headache Oct 23 93 Complains of headache. Is given med as directed & bowels moved freely. Appetite fair. Rested well Oct 24 93 Still Complains of headache very nice & quiet on hand. Asked to go home & stand. Restless till 11 PM Slightly noisy Crying Headache & thirsty Oct 26 93. Headache - behavior about the same Restless first part of night Slept 6½ hrs. Oct 27 93 Appetite good. Works some on the hall. Behavior about the same. Rested well Oct 28 93 Behavior about the same Headache better. Rested well Oct 29 93 Quiet in behavior. Dresses self. Eyelet awake 2 hrs. Sleeps quite well Oct 30 93 About the same Complains of headache Rested well Oct 31 93 The same. Rested well Nov 1 93 The same. Rested well all night. Nov 2 93 Appetite good Does not complain so much of headache for the past few days. Bowels reg. Tidy in habits, quiet in behavior Rested well during the night. Talks in German. Nov 4 93. Seems to be improving Appetite good Tidy in habits. Does not talk english. Works a little in dining room. Talks but mid. visibly. Nov 7 93. Moved to A 2. Nov 8 93 Eats & sleeps well Clean in habits. Talks German. Quite sociable. Complains of headache nearly all the time. Is now menstruating.

Dec 30 Dec 30/93. Appetite good. Cries a good deal & acts as though she was in pain nearly all the time. — 1894 No marks or signs to be seen. Talks shows some delusions. Clean in her habits.

Jan 31 Jan 31/94. Is restless at night. Is very noisy by day. Cries a great deal. Complains some of headache. Attends chapel - services quite regularly. Habits are clean.

Feb 15 Feb 15/94. No change from what is above noted. Still continues quite noisy & restless, at night. —

" 23 Feb 23/94. This patient was committed here under the "law of 1893" recently declared unconstitutional. She was to-day Taken out and Returned under "New Warrant" from Olmsted County. —

" 24 Feb 24/94. Transferred to the Annex

Personal and Medical History of Caroline Fredel

1894 Feb 10 Fell on the floor. Was unconscious for a short time. May 12 94 Appetite good Clean in habits. Is rather noisy. Cries a good deal. Imagines she is sick. Goes riding & walking.

June 27 94 Appetite fair. Clean in habits. Is quite noisy. Cries a great deal of the time. Seems to be growing flighty. Goes riding & walking.

Oct 4 94 Clean in habits. Is very noisy most of the time. Is hysterical. Cries and groans a great deal. Appetite very poor. Has not eaten scarcely anything for several days. Transf to 2d ward. Oct 10 94 Appetite better. More quiet. Bowels regular. Oct 26 94 Appetite Has not been eating the last 2 days. Fed with tube & by hand.

Nov 30 94. Appetite poorly. Lies on bed most of day. Seems more quiet. Is clean in habits. On tonic.

Dec 10 94. Appetite poor. Has to be fed with a spoon. Jany 2 95 Appetite good. Takes wine & tonic. Lies on the bed most of the time. Clean in habits. Jany 28 95 Appetite good. Bowels regular. Takes wine & tonic. Jany 31 95 Transf to C2 Feb 1 95 Complains of headache. Appetite good. Has crying spells. Bowels regular. Feb 25 95 Transf to B2

March 27 Menstruating. Mch 29 95: Quite in behavior. Neat & clean in habits. Talks very little. Seems very weak. Appetite fairly good. Takes tonic. Bowels reg: Apr 29 95. Quiet in behavior. Talks very little. Cries at times. Will always get down on her knees when any body comes in. Appetite good. Takes tonic. Sleeps well. Bowels reg. Goes walking. Does no work. May 15 95 Menstruating. May 31 95. No change in patient.

July 31 Complains of headache. Quiet. Appetite good. Bowels regular. Sleeps well. Goes walking & riding. Does no work & never talks. Aug 23 Menstr. Sept 25 Complains very often of pains in her left side across after coming in from walks. Also complains of headaches. Does no work. Goes out walking & riding. Clean in habits. Quiet. never talks. Cries at times. Oct 15 Menstr.

Aug 9 No change in patient. Appetite good. Bowels regular. Sleeps well. Nov 27 Complains of pains in her hips. Does no work. Clean in habits. Somewhat careless in appearance.

Dec 5 Very quiet. Never talks. Takes outdoor exercise very seldom. Feb 11 Menstr.

Feb 28 - Very quiet in behavior. Stays by herself - Appetite good. Bowels regular. Sleeps well. Complains of headache quite often & Clean in habits. Rather careless in appearance. May 7 Menstr. Apr 27 & May 18 Menstr. May 30 Very quiet: General health good: Appetite good: Bowels regular: Sleeps well: Does no work: Goes riding. Aug 9 Summary of Notes by Dr. L.L. Phelps:- Appetite good: bowels regular: Behavior very hysterical: Always kneels down & prays to physicians: May 97 no change whatever Aug 97 Very quiet usually: appetite good: bowels regular. (Certified by Dr. Wm. Phelps)

1897 Nov 30 Fairly quiet & tidy but always rather dull & feebleminded. Feb 21 98

1898 Transferred to B1st. Apr 23 98 Works some. Complains of pain in back: coughs & has difficulty in breathing which comes on suddenly: Has quite an asthmatic breathing: seemed to be better toward night.

May 9 much better in morning - bowels moved freely: ate breakfast & supper: at 8 pm noticed to breathe with difficulty. Died at 8:30

Died

Personal and Medical History of Mary Etnyer

ROBERT, FIGLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3523.
Residence, Arendahl, Minn
Date Admission, 21st October 1893.
Admitted by, D. Phelps Hour, 2 PM.
How Sent, E. V. Farrington, Jof P. Fillmore
Sex, Female
Age, 23 years
Civil Condition, married
Children, none
Age Youngest Child, had one (now dead)
Occupation, Housework (husband, farmer).
Degree Education, limited; can read.
Profession Religion, Lutheran
Habits, not known
Nativity, Minnesota, (parents born in Norway).
Physicians Committing, J. H. Phillips & Geo. F. Love
Correspondents, none given in papers
Family Physcn Dr. Hoveleff, Lanesboro, Minn

ear, 93.
Relatives, Mother was in Rochester Hospital, 4 years ago
Exciting, Separating from husband & loss of child
Predisposing, Heredity

panying Bodily Disorder, none given in history
l or Not, Not
this Attack, about 2 months ago
on, about 2 months
Attack, 1st
No. of Admissions, 1st
Age First Attack, about 23.
Time of Leaving, Mch. 27. 1895
Time in Hospital, 1 year 5 months 6 days.
Result, Died

EXAMINATION ON ADMISSION.

Ex by Dr. W. M. Phelps. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Sluggish.
MEMORY:
Past Events,
Recent Events, } Fair.
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive,
REASONING POWER: Impaired.
Ordinary Subjects,
Own Mental State, Fair.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Has had a good health until 2 or 3 mos ago, when she had to quit work. Says, thinks it is her head - Things are rather mixed up

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent, Somewhat indifferent
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None determined
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Mary Etnyer

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4½ WEIGHT, 135 pds. NUTRITION,
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Fine Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, normal
Response Light, Good Accommodation, Good.
SIGHT, Good

Mary Etnyer.
Case No. 3523 Vol. 24.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file with the original ones.

[illegible], Patellar, eq. ↑.
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Drooped dull
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal condition
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean Clean, Careless,
BOWELS, Normal, Constip. Constipated, Irregular,
APPETITE, Good, Good Medium Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 76 weak 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 when patient was young.
Brothers or Sisters, 5 bros. 2 sisters, 1 sister unhealthy.

Personal and Medical History of Mary Etnyer

HERBERT, PUGLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3523.

Residence, Arendahl, Minn

Date Admission, 21st October 1893.

Admitted by, D. Phelps Hour, 2 PM.

How Sent, E. V. Farrington, Jof P, Fillmore

Sex, Female

Age, 23 years

Civil Condition, married

Children, none

Age Youngest Child, had one (now dead)

Occupation, Housework (husband, fa

Degree Education, limited; can read.

Profession Religion, Lutheran

Habits, not known

Nativity, Minnesota; (parents born in Norway).

Physicians Committing, J. A. Phillips & Geo. A. Love

Correspondents, none given in papers

Family Physician Dr. Hovelef, Lanesboro, Minn

Year, 93.

Relatives, Mother was in Rochester Hospital, 1892 ago

Exciting, Separating from husband & loss of child

Predisposing, Heredity

panying Bodily Disorder, none given in history

l or Not, not

Time in Hospital, 1 year 5 months 6 days.

Result, Died

EXAMINATION ON ADMISSION.

Ex by Dr. W. M. Phelps.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Sluggish.

MEMORY:

Past Events,

Recent Events, } Fair

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive,

REASONING POWER: Improved.

Ordinary Subjects,

Own Mental State, Fair.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

She had a good health until 2 or 3 mos ago, when she had to quit work. Says, thinks it is her head - things are rather mixed up

EMOTIONAL STATE:

Normal, Calm, Calm

Indifferent, Somewhat indifferent

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None determined

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Mary Etnyer

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in WEIGHT, 135 pds NUTRITION,

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Fine Coatings, Promptness Movement,

PUPILS, Equality, Equal Size, Normal

Response Light, Good Accommodation, Good.

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Some tremor of hands & arms.

Legs, a little unsteady

TREMORS, Hands, Tongue,

Facial Muscles, General,

REFLEXES, Patellar, Eq. 7.

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Dress of dull

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Seem in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal condition

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean Clean, Careless,

BOWELS, Normal, Constip. Constipated, Irregular,

APPETITE, Good, Good Medium Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 76 weak 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 when patient was young.

Brothers or Sisters, 5 bro. 2 sisters, 1 sister imbecility

Personal and Medical History of Mary Enyer

EBERT, FULLER & CRAWBERS, DAVENPORT, IOWA

1893 Was brought here by E. A. Ness, accompanied by Mrs Ness, with the following history. There is no history of consanguinity, but there is, of heredity; mother was in Rochester Hospital for insane about 4 years ago. This is her first attack, first symptoms manifested about 2 months ago; has lost memory. Disease seems increasing, but is variable & there are rational intervals. Derangement is now shown in that she cannot remember any recent occurrences; she will go to a neighboring town & repeat interviews with people she could not possibly have seen, as some are in other States & others are dead. She is neither disposed to injure others nor suicidal, nor filthy nor destructive. No peculiarities were previously known. Not known as to history of intemperance &c. No history of any severe disease. She has not been restrained or confined & had no medical treatment, until this week. The supposed cause of the disease is separation from husband and loss of child. On personal exam^n are found, melancholic appearance, vacant & depression, & answers to questions. Patient says she is insane, & there is "something wrong in her head". She hears people talking about her, outside the house, and in the woods, when none is there. Did nothing but answer questions as described above. — Appearance & manner, melancholic. How others, we learn that she thinks the noises, made by pigs, horses & other animals, was talk directed to her.

Oct 21/93. The patient, on admission, is in fair physical condition. Was put on B^r. Bodily condition clean, No bruises. Behavior very quiet on hall, lying in the bed or lounge most of the time. Talked but very little: Appetite fair. Rested well till 4 A.M. awoke crying said she was sick. Bowels moved. Complains of headache. P 78. Resp 18. Temp 98^4

22. Complained of headache, more like sick headache, sick at stomach, vomiting. Appetite fair. Tidy about herself & tidy in habits. Awake & restless from 1^30 A.M. 3½ hrs.

23 Appetite fair. Put on tonic. Does not suffer with headache today. Very nice & quiet in ward. Crying quietly. Rested well Oct 24/93. The same. Rested well Oct 25/93. Eats but helps some in the hall. Complains of headache. Rested well Oct 26/93. About the same. Rests quite well.

27. Appetite good. Sleeps fairly well. Behavior about the same. Rested well. Oct 28/93. The same.

29 About the same. Rested well. Oct 30/93. Very quiet on hall. Appetite good. Talks but very little. Seems very despondent at times & will help with a little in dining room. In bed and asleep all night. Oct 31/93. Very quiet & well behaved & seems to be about the same. In bed & asleep all night.

Nov. 1 The same. Slept well all night. Nov. 2/93. Appetite good. Quiet & behavior & tidiness helps in the dining room. Neat & tidy about herself. Has some sores on head. Takes her medecine as directed. Rested well. Nov. 3/93. The same, rested well. Nov. 9/93. Complains of headache & also of constipation. Gave med. as directed. Nov. 29/93. Complains of headache, sick at stomach, vomitting. gave med. as dir. Appetite good. Talks but little. If asked a question, will answer it rationally, but seems very melancholy & lying around the sofa most of the time. Does not do any work, neither does she take any interest in anything. Never reads. Neat in habits about herself. Rests well of nights. Dec 31/93. Was moved to Annex W 4^th Dept. Continues about as usual.

Dec 31 1894 Jan 31/94. No material change in patients condition. Habits are clean and neat. —

Feb 5 Feb 5/94. Appetite good. Is very quiet; seldom speaks. Goes riding & walking. General health good. Habits, Clean.

" 28 Feb 28/94. Above notes still hold good, in the main, to this date. Continues very quiet. Depressed, at times.

Mar 1 Mar 1/94. This patient was committed here under the "Law of 1893", recently declared unconstitutional

Personal and Medical History of Mary Enyer

1894

Mar 2 Mar 2/94. Patient was, today, Taken out and Returned under "new warrant" from Auditor's.

May 11 Appetite good. Clean in habits. Is very quiet. Never talks. Will seldom answer if spoken to. Will not go riding or walking. General health good. June 27/94 Appetite good. Clean in habits. Is very quiet. Never speaks. Goes riding & walking. Gen. health good. July 4/94 Visited by her cousin. Seemed to recognize him, but could not talk to him. Sept. 28/94 Visited by her husband. Would not speak to him.

Oct 3/94 Visited by her husband. Oct 6/94 Appetite fair. Is very quiet, will never move unless compelled to. Will not talk any. Clean and tidy in habits. Goes riding and walking. Gen. health good. Nov 7/94 Visited by husband.

Dec 6/94 Was put to bed this P.M. Will not speak. Seems to have pain in her left side. Dec. She some took a Heal. a cup of tea for supper.

Dec 10. Still in bed. No change. Transf to B^r. Dec 11/94 In bed. About the same. Transf to Infirmary. Dec 12/94 Sick in bed.

Synopsis. During her stay in Infirmary ward patient was very quiet; although she passed some restless nights at the beginning. She, in all, enjoyed very good nights rests. She coughed a great deal. Her breathing seemed to be hard at times. On March 26 she fell out bed and she seemed to be in pain and very weak. Her appetite remained good up to the last. Mch 26. From that day on she did not take any regular meals — only took milk and then and then a little brandy + water. Bowels moved very freely all the time. Talked rarely. Seldom was visited by her sister on Mch 22. Suffered very much pain & was crying a great deal. Became weak was very quiet all day and Mch 27 and

Died, March 27^th 1895. 8. P.M.

See Particulars for nurse's record.

Personal and Medical History of Annie Franklin

EBERT, FIDLAR & GRAMBERS, DAVENPORT, IOWA

Whole No. 3531.
Residence, 131. Eleventh St St. Paul.
Date Admission, 25th October 1893.
Admitted by, Dr. Phelps. Hour, 7 PM.
How Sent, Jno. B. Olivier, Jof P, Ramsey County
Sex, Female
Age, 30
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Dress-maker (father laborer, while living).
Degree Education, Can read & write
Profession Religion, not a Church member
Habits, Not intemperate
Nativity, Illinois (Father, Germany; mother, U.S.).
Physicians Committing, H.B. Anker & A. Sweeney
Correspondents, Josie Franklin, Houston, Texas

No. for Year, 101.
Insane Relatives, none
Cause Exciting, unknown
Cause Predisposing, unknown
Form,
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, Suicidal; propensity now active.
Date of this Attack, probably recent
Duration, probably short
No. of Attack, 1st
No. of Admissions, 1st (has been in St E Hospital)
Age First Attack, about 30.
Time of Leaving, Feb. 14. 1899
Time in Hospital, 5 yr. 3 m. 20d.
Result, Transferred to Fergus Falls

O.K. pm

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Ex Oct 26 93
by Dr. Linton Phelps

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Quick.
MEMORY:
Past Events, Good.
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert.
Correct or Illusive,
REASONING POWER: Impaired.
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None determined
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None.
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent.
Voluble or Reticent, Talks freely & sensibly

Says had headache for 7 or 8 years but taken sick in bed in Aug. 93, then in bed 2 weeks. Bowel trouble. Was left weak from that time. Says feels weak and exhausted. Not able to eat. — Came directly from City Hospital where she has been since Aug. General physical condition impaired. Weak - Voice low & weak.

Personal and ... Franklin

ISSION.—(Continued.)

TICS.

HEIGHT, 5ft 3
WOUNDS OR ABNOR
TONGUE, Tremors,
PUPILS, Equality, E
Response Light
SIGHT, Good
HEARING, Good
COORDINATION, Arms,
Legs

NUTRITION, Poor, Pale
and flabby.
Promptness Movement,
normal
n, Good

TREMORS
REFLEXES
ARTICULATION

office.

FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds ar
LUNGS, Seem pr 8
EXAM. URINE.

GYNAECOLOGICAL EXAM
MENSTRUATION, Regular but scant
OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

Rochester State Hospital,

Annie Franklin,

Patient.

Order for Discharge of Patient

Under Law 1897.

Filed NOV 8 1897 18

J. K. Sinus

Annie Franklin.
Case No. 3531. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

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 Annie Franklin

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3531.
Residence, 131. Eleventh St. St. Paul.
Date Admission, 25th October 1893.
Admitted by, Dr. Phelps. Hour, 7 P
How Sent, Jno. B. Olivier, Jof P, R
Sex, Female
Age, 30
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Dress-maker (father labor
Degree Education, Can read + write
Profession Religion, not a Church memb
Habits, Not intemperate
Nativity, Illinois (father, Germany; m
Physicians Committing, A B Ancker + A
Correspondents, Josie Franklin, Hous

No. for Year, 101.
Insane Relatives, none
Cause Exciting, unknown

EXAMINA

Ex Oct 26 93 ME
by Dr. Linton P.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Quick.
MEMORY:
Past Events, Good.
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert.
Correct or Illusive,
REASONING POWER: Impaired.
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

Says had headache for 7 or 8 years but taken sick in bed in Aug. 93, then in bed 2 weeks. Bowel trouble. Was left weak from that time. Says feels weak and exhausted. Not able to eat. — Came directly from City hospital where she has been since Aug. General physical condition impaired. Weak - Voice low + weak.

HALLUCINATIONS: None.
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent.
Voluble or Reticent, Talks freely + sensibly

Rochester State Hospital.

Annie Franklin.

Patient.

Order for Discharge of Patient

Under Law 1897.

Filed NOV 8 1897 18

J K Sturdevant Sec

Personal and Medical History of Annie Franklin

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT. 5ft 3½ WEIGHT. 112 lbs. NUTRITION, Poor, Pale.

PULSE, REST, 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,

Office Secretary Board of Trustees,

MINNESOTA * STATE * HOSPITALS * FOR * INSANE.

Copy.

On filing the certificate and report of the Physicians of the Rochester State Hospital for Insane, upon an examination of Annie Franklin *a patient committed to said Hospital from the County of* Ramsey *and received there on the* 25th *day of* October *1893, recommending the discharge of said* Annie Franklin *on the ground* No harmful tendencies Has ability to earn her own living. No home.

Ordered, that said patient, Annie Franklin, *be and hereby is discharged from the said Rochester State Hospital, under the provisions of Chapter 212, General Laws Minn. 1897; and that the Secretary of said Board forthwith notify the Judge of Probate of said* Ramsey *County, and send a copy of this order to the Medical Superintendent of said State Hospital.*

Dated Dec 1st *1897.*

John Coleman
J. H. Block
F H Peters
Trustees.

Personal and Medical History of Annie Franklin

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 3½ WEIGHT, 112 lbs. NUTRITION, Poor, Pale.
WOUNDS OR ABNORMALITIES, Little finger of right hand crooked.
TONGUE, Tremors, Slight. Coatings, very white. Promptness Movement,
PUPILS, Equality, Equal Size, normal
Response Light, Good Accommodation, Good
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, none Tongue, Slight.
Facial Muscles, some twitching of muscles of ~~General~~ Right side of face.
REFLEXES, Patellar, 5 on Jack 10.
Other Reflexes, Good
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, normal.
SENSIBILITY, ~~irritable~~
HEART, Sounds as normal but irritable
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION, Regular but scant
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean Clean, Careless,
BOWELS, Normal, Constipated, constipated Irregular,
APPETITE, Good, Medium, Poor, 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 Annie Franklin

EBBERT, FIGLAS & CHAMBERS, DAVENPORT, IOWA

1893

This patient was brought here by Deputy-Sheriff Haas, attended by Miss Fuhrman, with the following history. There is no history of consanguinity or heredity. This is 1st attack. Has been in City & County Hospital, St Paul; results of treatment, negative. This attack is probably recent; has a great distaste for mixing with people & would avoid society in any way possible. Disease appears to be increasing; but is variable & there are rational intervals, but these do not occur at regular intervals; but if she is opposed & not allowed to do as she wishes, she becomes very troublesome. Derangement is now shown by avoidance of society; being taciturn; she is wilful & stubborn & fancies she is not rightly treated. Is not disposed to injure others, but is suicidal; has several times tried to throw herself out of window; propensity now active. Is not filthy or destructive. Patient was very peculiar, prior to admission to Hospital, complaining of being sick, without any apparent symptom of disease. No history of intemperance or of any severe disease or injury to head. Has not been restrained or confined. Cause of disease, unknown. Has been treated by tonics & forced nourishment: results negative. On personal examination, patient is very wilful, stubborn & taciturn; refusing to answer questions & sits, all day, in a melancholy dejected attitude, taking no interest in her surroundings. She talks to herself a great deal, and acts like a child, when she is eating; she avoids society & will not go near other patients. Hides in closets & stairways & remains there for a long time. Said "that she was sick & did not associate with others because they were troublesome & talked about her & laughed at her. Laughs to herself: appearance & manner, childish.

Oct 25 Oct 25/93. On admission, is in fair physical condition. Pulse 80. R 18. T. 97 4/5.
Bodily condition: clean. No injuries or peculiarities. Oct 26/93. Very quiet on the hall. Walked very little. Appetite good. Rested quite well. Awoke 2 hrs. P 80. R 18. T. 97 4/5.
27. Behavior about the same. Awake and restless about 2 hrs. Oct 28/93. The same. Troubled some with a cough. Oct 29/93 Very quiet. Talks rationally. Sleeps well.
30. Very quiet on hall. Talks rationally. Complained of feeling bad from cold. Has a cough. Was awake about 4 hrs during the night. Very quiet. Oct 31/93 In behavior the same. Cold the same. Takes her cough med. as directed. Her circulation quite poor. In bed and asleep all night. Nov 1/93 The same. Asleep all night. Nov 2/93 Appetite
Nov 1 Very quiet in behavior. Neat about self. Talks rationally but does not seem very strong. Rested well during the night. Nov 3/93. The same. Menstruating. Rested well all night.
4 The same. Rested well. Nov 5/93. Appetite some better & seems to be improving. Was at chapel. Rested well all night. Nov 6/93 The same. Rested well. Nov 7/93. The same. Restless about 2 hrs. Nov 8/93. The same. Rested well. Nov 13/93. Complained of cold. Patient, gave pills as directed. Nov 15/93 Awoke restless most of night. Slept 3½ hrs. Nov 21/93 Mood bad.
Nov 28/93 Appetite good. Behavior quiet. Does no work. Complained of sore throat.
Dec 1/31 Dec 1/93. To day, moved to 3rd. Dec 31/93. Sleeps well, at night. Appetite good, now. Is irritable, at times. Menstruated about the 6th. (Patient was sick in bed for 3 days this month – 7 to 10th –). —
1894 Jan 31 Jany 31/94. Continues to sleep well, at night. Appetite is fair. Has been much brighter & better, the past two weeks. Works a little in the ward. Menstruates about the 6th
Feb 28 Feby 28/94. Has been resting well each night. Improving a good deal of late. Appetite quite good.

Personal and Medical History of Annie Franklin

1894

Feb 23 Feb 23/94. This patient was committed here under the "Law of 1893", recently declared unconstitutional. She was today Taken out and Returned under "new Commitment papers" from Olmsted County. March 28.94 Appetite fair. Sleep good. Behavior dull. Talks fancy at times. Cannot see that she has delusions. Cleanly habits. Does not complain. Does not work at present. On tonic. Menstruated about the 7th. April 30.94. Appetite good. Sleeps well. Clean in habits. Is quiet. Does no work. May 16.94 Transf'd to 3d. May 22.94 Appetite good. Sleeps well. Wanders from place to place on the hall. Is very talkative. Goes to school.
June 27.94. Appetite good. Sleeps well. Helps some with the hall work. Behavior is more natural. Is quite anxious to go home. Menstruating.
July 28.94 Is quite busy most of the time either painting or crocheting for the hall. Clean in habits. Some tidy of late about the personal appearance. Appetite good. Sleeps well. Aug 30.94 Has been very fancy & impudent the past few days. Removed to 3d Aug.
Aug 4 94 Appetite good. Quiet in behavior. Transf'd to 1st Dec 20.94. Appetite good. Sleeps well. At times irritable. Does no work. Lies a-bed most of the time. Cloudy quite angry when asked to get up. Jany 30.95. At times irritable. Appetite good. Sleeps well. Physical health good. Occupies most of her time painting for ward. Feb 1.95. Menstruating. Feb 27.95. Continues about the same. Mch 19.95. Appetite fair. Sleeps well. Is at times irritable. Phys health good. Transf'd to
Feb 1 Has been quite fairly rational & far from morbid ideas of late and probably can be trusted home. Mch 30.95. Appetite good. Bowels regular. Sleeps well. Complains occasionally of headache. Is quite irritable. Apr 14.95. Menstruating. Apr 30.95 Appetite good. Bowels reg. Does walking & riding. Is very irritable at times. May 10.95. Menstruating. May 31.95. Appetite fair. Sleeps well. Bowels reg. June 29 Appetite fair. Sleeps well. Very irritable & quarrelsome. Complains of headache. Usually refuses to go walking. Aug 8 Menstr. Aug 30 Appetite good. Bowels regular. Sleeps well. No change in behavior. Menstr. Does no work.
Sept 1 Oct 1 Nov 1. Appetite fair. Bowels usually constipated. Sleeps well. Behavior quiet. Very irritable at times. Works occasionally. Usually refuses to go walking. Jan 8 Quiet in behavior. Talks quite sensibly but is at times cross & disagreeable on ward. Appetite good. Sleeps well. Occupies part of her time reading & sewing. Seldom goes out of doors. Menstr. Jan 31 Menstr. Apr 1 Appetite good. Sleeps well.
1896 Bowels regular. Works in doctors Kitchen. Takes out door exercise.
Apr 25 Menstr. May 20 Appetite good. Sleeps well. Bowels regular. Very impudent. Works in sewing room. Takes out door exercise.
June 8 Summary Nurses Notes by Dr. E. E. Phelps:- Transf. to Annex: Aug 7 Habits neat: appetite good: bowels regular: works in sewing room: menstr. regular: Oct 1896 No change.
1897 Feb. Health poor: coughs some: quite dull & feeble minded: July 97 Appetite good: will not take out door exercise: no mental change. (Contd by Dr. R. M. Phelps)
Oct 27 General health fairly good: always quiet, at times irritable: sits by herself & does not talk much: Dec 9'98 Weight 113: Feb 14'99 Transferred to Fergus Falls: Very little change in condition but to be more violent than formerly toward other patients.

Personal and Medical History of Amelia Polzen

HERBERT, PUSLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3537.
Residence, St Paul, Minn
Date Admission, 25th October 1893.
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, John. B. Olivier, J.P. Ramsey County
Sex, Female
Age, 20
Civil Condition, single
Children, one
Age Youngest Child, 3 weeks.
Occupation, Domestic (Father was a farmer)
Degree Education, Can read & write
Profession Religion, Lutheran
Habits, probably not very good.
Nativity, U.S. (Parents born in Sweden)
Physicians Committing, A.B. Ancker & Arthur Sweeny
Correspondents, Miss Emma Polzen, La Crosse Wis. (Sister)
Wm James Davis 573 Bradley St. St Paul.

No. for Year, 102.
Insane Relatives, unknown
Cause Exciting, Lactation
Cause Predisposing, unknown
Form, acute mania
Accompanying Bodily Disorder, none Stated
Suicidal or Not, not
Date of this Attack, Oct 19th 1893
Duration, about a week.
No. of Attack, 1st
No. of Admissions, 1st (was in St C Hospital)
Age First Attack, 20 years
Time of Leaving, Nov 23 - 1893
Time in Hospital, 29 days.
Result, Died

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Ex. by Dr. Lenton Phelps.

MENTAL ACTIVITY: very much excited
Clear or Confused, noisy, tossing self around
Quick or Sluggish, the bed Continually
MEMORY:
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive, Illusive.
REASONING POWER: Gone.
Ordinary Subjects,
Own Mental State, none
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Exalted.
Depressed,
DELUSIONS: Many; Thinks and says she
Systematized or Not, is in heaven.
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Talks wildly and incoherently
Coherent or Incoherent,
Voluble or Reticent,

Talks & throws her arms constantly. Does not seem to realize anything.
Put to Bed in Sick ward. Put upon milk diet, with cold baths for remainder of temp.

Personal and Medical History of Amelia Polzen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS. Patient very much excited, Put to bed on admission

HEIGHT, WEIGHT, NUTRITION, Poor
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Heavily coated Promptness Movement,
PUPILS, Equality, Eq. Size, dilated.
Response Light, Accommodation,
SIGHT, Seems good
HEARING, Good.
COORDINATION, Arms, Can not test.
Legs,
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Can not test.
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Quick, no organic disease.
LUNGS, Respiration impaired
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Dirty. Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Poor Medium, Poor,
SLEEP, Good, very poor Poor, Irregular,
PULSE, 120. RESP., TEMP., 103.
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, 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 Amelia Polzen

EBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Deputy-Sheriff Haas, attended by Mrs Fuhrman, with following history. As to Consanguinity or heredity, unknown. This is 1st attack (Has been in Cole Hospital, St Paul; no results from treatment). First Symptoms manifested Oct 19/93; she began to talk & act strangely. Disease seems increasing; no rational intervals. She now believes that she is dead: wrote on the bed-clothes a message to God; she talks irrationally & without coherence. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. No peculiarities to previously known. There is no history of intemperance or severe disease &c. Has been kept by harness in bed, at nights. Supposed Cause of disease is Lactation; she was confined, Oct 8th of an illegitimate child. Has been under following treatment; frequent feeding, Stimulants, & sulfonal, but with little apparent results. She seems, instead, to be growing worse. On personal examination, she is a fairly nourished girl, with a temperature of 100° & rapid, feeble pulse, and has a delusion that she is dead & wrote messages to God, & to her father (at Norwalk) who is dead. She talks incoherently, sees heavenly messengers, calls for her father & expects him soon; sees people about her & talks to them. Said "that she was dead at midnight". Looked about, as if recognizing unseen persons. Appearance & manner were exalted. After birth of child (above) Lactation Established, but milk has since dried up. Temperature has been as above, at night.

Oct 25 Oct 25/93. The patient, on admission, is in fair physical Condition. Was vomiting at train; is now pale. Was put on B°. P. go. R-Jo 103 Bodily Condition: Dirty. No peculiarities or injuries.

26 Is in bed Noisy all day. Has hallucinations Appetite Not very good Slept about 3 hrs Bowels moved. P 120. T. 103 1/5. Oct 27/93 Slept 4 hrs. awoke 2nd out of bed, had chair in hand Appetite very good. Behavior about the same. Removed to C2 at 11 30 A M. T 104 1/5 P 134 R 36. Patient very noisy Gave 3 alcohol baths 2 cups of milk. Oct 28/93 Slept 1 hr during night Noisy & restless talking nearly all night. T 101 1/5. P 140. R 42. Drank 5 Cups of milk. Malt-ale 3 times). Gave 3 alcohol baths Slept about 1 hr bd day. Oct 29/93 Extremely noisy Slept 2 hrs. Gave brandy & malt-ale Drank 6 cups of milk. Gave 3 baths. Bowels reg. Talk incoherent. T 102 3/5 P. 140. R 36 Very noisy all day. Quiet a short time this P M. Oct 30/93 Slept 4 hrs. Face flushed. Much more quiet this morning, talk incoherent. Has many delusions. Very noisy this afternoon. Six alcohol baths. T 104 1/5 P. 150 R [illegible]

31 Looks very much exhausted. Face more pale. Pulse rapid & rather weak. Gave brandy every 2 hrs. Milk diet. T. 104 (104) P. 140. R. 30. P 128 Nov 1/93 Gave 4 Sponge baths (Alcohol) Brandy every 2 hrs. and malt ale four times a day. Much brighter, talks quite intelligently, but misinterprets some delusions T 103 4/5. P 130. R 31. Nov 2/93. Has been quite noisy all day. Has diarrhoea. Alcohol Baths. Slept 5 hrs. Very noisy 2 hrs. T. 104 4/5. P. 116 R 30. Diet was milk. Nov 3/93. T. 104 P 119. R 28. Gave alcohol bath took chicken broth, beef tea & milk. Very noisy at times talking most of the time. Slept 5 hrs. Nov 4/93 Face flushed on left side. Nose red & swollen T 105 2/5. P 120. R 28. Emesis. Slept 3 hrs. Gave 7 Alcohol baths. Gave Phenacetine gr grain. Nourishment beef tea, chicken broth, milk. Nov 5/93 Face flushed on both cheeks. Extremely noisy 1 hour. Quieter then passed the remainder of time. T. 104 P 119. R 25. Nov 6/93 Has been noisy all this A M quiet this morning. T. 104 3/5. P. 128. R 26 Had hemorrhage of bowels about 3/4 pt of blood Gave enema. Put ice on abdomen. Nov 7/93 Pulse weak Several Rasceipts in abdomen and chest. Face flushed & complains of pain in abdomen & chest. Nose swollen & red. T. 105 1/5 P 128. R 28. Slight hemorrhage 3/4 III. Nov 8/93 Very restless & noisy today. Has diarrhoea. Gave

Personal and Medical History of Amelia Polzen.

11 1893. Nov 8 several alcohol baths. T 105 1/5 P. 130. R 32. Slept very poorly is restless moving, had to be fed per rectum from 9 to 12 of Nov 9 93. Was ten quite bright & her abdomen pained, character of stool was flecky, & of greenish color. on Nov 10 93 face was very much flushed Sleep continues but very poor - seldom over 1 hour during night, bowels moved but character greenish watery. Is more or less noisy all the time Nov 10 93 Vomited, had milk every day to be fed by rectum. Gets sponge baths (alcoholic) as often as possible Since 1893. Pulse very compressible - stools continues to be watery & of a greenish color, bowels moved involuntarily on Nov 18 93 - Temperature drops very high, up to 106 on Nov 19. Nov 20 93. Pulse quite strong & regular seems somewhat better. More noisy than usual Nov 22 93 Very weak and Exhausted, general tremor from weakness. face very pale, pulse irregular, coughs some, skin is moist, profuse perspiration Nov 23 93 Called for her sister, failing very fast and died Nov 23 93. at 10.40 A.M.

Died.

Personal and Medical History of Bridget Naughton

EGBERT, FOLEY & CRAMBERS, DAVENPORT, IOWA.

Whole No. 3535.
Residence, 4th & Commercial Streets. St Paul
Date Admission, 28th October 1893
Admitted by, Dr Phelps — Hour, 7 PM
How Sent, Jno. B. Olivier, Jo P. Ramsey County.
Sex, Female
Age, about 50.
Civil Condition, married
Children, 5 living
Age Youngest Child, 12 years
Occupation, husband, Laborer
Degree Education, none
Profession Religion, Catholic
Habits, addicted to alcoholic liquors, formerly
Nativity, Ireland (parents also born there).
Physicians Committing, Asst. R. Day & E. X. Amos.
Correspondents, address of friends to Co. 4 & Commercial Streets (Commonly known as "Connemara Patch")

No. for Year, 105.
Insane Relatives, not sure
Cause Exciting, brooding over death of children & drink
Cause Predisposing, Chronic (?)
Form,
Accompanying Bodily Disorder, No history obtainable.
Suicidal or Not, Continually threatens to drown herself
Date of this Attack, 5 years ago
Duration, 5 years
No. of Attack, not 1st (many during past 5 years).
No. of Admissions, 1st
Age First Attack, about 45
Time of Leaving, Dec. 14th '93
Time in Hospital, 1 mo 15 da
Result, Rec.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Exam'd by Dr. Linton-Phelps, Nov 10 '93 — MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Cannot test; as cannot talk
Recent Events, well enough.
Special Subjects,
PERCEPTIVITY:
Alert or Dull, " "
Correct or Illusive,
REASONING POWER: Impaired
Ordinary Subjects,
Own Mental State, Says "She is not crazy"
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Says "has rheumatism". Put upon tonic.

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, Cannot determine
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Talk irish & cannot-
Voluble or Reticent, understand or talk much English.

Personal and Medical History of Bridget Naughton

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 3 in WEIGHT, 111 lbs NUTRITION, Pale in color
WOUNDS OR ABNORMALITIES, none
TONGUE, Tremors, none Coatings, white Promptness Movement,
PUPILS, Equality, equal Size, normal
Response Light, a little sluggish Accommodation, a little sluggish
SIGHT, seems good
HEARING, " "
COORDINATION, Arms, Legs, Good, unusual tests.
TREMORS, Hands, slight Tongue, none
Facial Muscles, General, none.
REFLEXES, Patellar, Equal; 7. —
Other Reflexes,
ARTICULATION, Hesitating, Hesitating Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, A little weak; sounds are normal
LUNGS, seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Records kept Clean, Careless,
BOWELS, Normal, Constipated, Yes Irregular,
APPETITE, Good, Medium, Poor, Yes
SLEEP, Good, Yes Poor, Irregular,
PULSE, 110 weak 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, when patient Young.
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Bridget Naughton

LEBLANT, FIGLAR & CHAMBERS, DAVENPORT, IOWA

1893 Brought here by Deputy Sheriff Haas. Attended by Mr. Fuhrman, with following history. This is not 1st attack; others have occurred at intervals during last 6 years; duration variable: was never sent to Hospital. First symptoms of this attack were manifested 6 years ago, here in St Paul by melancholy (keeped by whiskey) after death of children. Disease appears to be increasing slowly. Is variable. Hardly any rational intervals; then don't occur at regular intervals. Disagreement is now shown in that she won't stay at home; uses filthy language, talks loudly & gets more excitement as she talks. Does certain peculiar actions. Attempted to strike her daughter with an axe. Has not attempted suicide but she continually threatens to drown herself. Is disposed to filthy and destructive habits, if drinking. Acts heredity, not sure. Cannot find out anything as to previous peculiarities &c, as her people & surroundings are very ignorant. Has used alcoholic liquors for years. No history obtainable as to the point of her having had any severe disease. They say, however, she had suppression of mind, in Ireland. She has not been restrained or confined. Supposed cause of the disease is brooding over deaths of children & more recently, drinking whiskey & beer, as often as she can get it. On personal examination, she talks loudly & gets more excited, as she goes on. Swears. Her home is filthy. When excited, she speaks only "Irish". Only English words she said, in our presence, were "Damn"; "Damned right"; "Dr Amos is the fine gentleman" and "God bless you". She always expectorated on her hands before shaking hands & forgets to wipe them. She would be dirty, were it not that her neighbors are like herself; her manner is excitable, but not wild. Pupils look normal.

Oct 28 Oct 28/93. On admission, is found to be in fair physical condition. Was sent on B[t] Po. R. 99

29 Behavior quiet, appetite poor. Cough none. Bowels constipated. Complains: none.

30 Quiet in behavior. Talks only when spoken to, or to ask for something, makes no trouble.

31 Very quiet, makes no trouble, appetite poor. Nov 1/93 No change. Nov 2/93 No change. Nov 3/93 Complains of pain in abdomen, is constipated. Nov 4/93 No change. Nov 5/93 Always seems tired, has no inclination to move around much. Nov 6/93 No change noticeable. Nov 7/93 No change. Nov 8/93 Complains of being constipated. Ate very little. Nov 9/93 No change. Nov 10/93 Noticed patient talking to self this afternoon. Nov 11/93 Transf to B[t] Nov. 15/93 Removed to B[t] E. Nov. 26/93 Appetite poor. Behavior quiet & pleasant. Complains a great deal of constipation. Clean in habits. Talks but very little English

Disch

Personal and Medical History of Emily Seebach

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Mar 1 – June 1 – 1901 No change. May 28 Wt. 123#

June to Sept. Aug. 4 visited by sister, Aug. 31 Wt. 117#. Sept. to Dec. no change in condition, Nov. 30 Wt. 122#.

to Feb 1, 1903. General health good: appetite good: bowels regular: rather restless at night: does chores exercises: walks up and down the ward most of the time: scolds to herself: is quite delusional: Dec 1st. Wt. 122#

Personal and Medical History of Mary H. Owens.

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3537.
Residence, 2 Sq Midway; St Paul
Date Admission, 1st November 1893.
Admitted by, Dr Phelps Hour, 7 PM.
How Sent, John B. Olivier, Jof P, Ramsey County
Sex, Female
Age, 43
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, School-Teacher
Degree Education, Good school education
Profession Religion, Central Presbyterian
Habits, Probably good
Nativity, St Paul; (Parents born there; not now living)
Physicians Committing, Dr Gates & E. L. Mann
Correspondents, D. P. Lewis, St Paul.
Address of Family Physician 13 Germania Bank Bldg St Paul. Mrs. F. M. Owens 469 Collins Str. St Paul, Minn.

No. for Year, 107.
Insane Relatives, None
Cause Exciting, overwork while teaching
Cause Predisposing, previous attacks
Form, R. Mel m
Accompanying Bodily Disorder, None stated
Suicidal or Not, Suicidal during attack 10 yrs ago.
Date of this Attack, Last May; renewed this fall
Duration, some months
No. of Attack, 3rd probably
No. of Admissions, 1st (here) was at Battle Creek Hosp.
Age First Attack, about 33.
Time of Leaving, May 1 94
Time in Hospital, 6 mos.
Result, Rec.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Ex Nov 3/93 Dr Thornton Phelps

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Sluggish.
MEMORY: Says not as good as
Past Events, used to be.
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive, Seems correct.
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE: a nervous unrest
Normal, Calm, agitated but quiet.
Indifferent,
Exalted,
Depressed,
DELUSIONS: Thinks her past life has
Systematized or Not, been wrong.
Special Subjects,
Transitory or Not,
HALLUCINATIONS: Very much afraid jumps
ILLUSIONS: appr[illegible] walks around in
CONVERSATION: agitated manner,
Coherent or Incoherent, holding her hands
Voluble or Reticent,

Says stomach troubles her, thinks it is destroyed. Constipation & dyspepsia have troubled her a great deal. Put upon tonic & treatment for dyspepsia & constipation

Personal and Medical History of Mary H. Owens.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3" WEIGHT, 94 lbs Dec 88- April 8- 114 lbs NUTRITION, Poor
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Very badly Promptness Movement,
PUPILS, Equality, Eq. Size, Normal
Response Light, Sluggish. Accommodation, Sluggish.
SIGHT, Good
HEARING, Good

Case No. 3537. Mary H. Owens. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

ARTICULATION,
FACIAL EXPRESSION, Anxious
SENSIBILITY,
HEART, Sounds transmitted
LUNGS, Seem in good Condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal Condition
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS, × He is told no natural movement of bowels for a long time

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died when patient was a baby.
Father or Pat. Relations, Father died of paralysis. Had several strokes. Had dyspepsia badly
Brothers or Sisters,

Personal and Medical History of Mary H. Owens.

EGBERT, FIGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3537.
Residence, 25th Midway; St. Paul
Date Admission, 1st November 1893.
Admitted by, Dr. Phelps Hour, 7 PM.
How Sent, John B. Olivier Jof P. Ramsey County,
Sex, Female
Age, 43
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, School-Teacher
Degree Education, good school education
Profession Religion, Central Presbyterian
Habits, Probably good
Nativity, St Paul; (Parents born there; not now livi
Physicians Committing, [illegible] & E. L. Mann
Correspondents, R. P. Lewis, St. Paul.

No. for Year, 107.
Insane Relatives, none
Cause Exciting, overwork while teaching
Cause Predisposing, previous attacks
Form, Melan
Accompanying Bodily Disorder, none stated
Suicidal or Not, Suicidal during attack 10 yrs ago.
Date of this Attack, Last may; renewed this fall
Duration, some months

Address of Family Physician 13 Germania Bank Bldg St Paul. Mrs. F. M. Owens 469 Collins Ste, St Paul, Minn.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Ex Nov 3/93 by Dr Clinton Phelps

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Sluggish.
MEMORY: Says not as good as
Past Events, used to be.
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive, Seems correct.
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,

EMOTIONAL STATE: a nervous unrest
Normal, Calm, agitated but quiet.
Indifferent,
Exalted,
Depressed,
DELUSIONS: Thinks her past life has
Systematized or Not, been wrong.
Special Subjects,
Transitory or Not,
HALLUCINATIONS: Very much afraid jumps
ILLUSIONS: up & walks around as on
CONVERSATION: agitated manner,
Coherent or Incoherent, holding her hands
Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:

Says stomach troubles her, thinks it is destroyed. Constipation & dyspepsia have troubled her a great deal. Put upon tonic & treatment for dyspepsia & constipation

Personal and Medical History of Mary H. Owens.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3" WEIGHT, 94 lbs Dec. 88 April 8-114 lbs NUTRITION, Poor
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Somewhat flabby Promptness Movement,
PUPILS, Equality, Eq. Size, Normal
Response Light, Sluggish. Accommodation, Sluggish.
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs,
TREMORS, Hands, None Tongue, None
Facial Muscles, None General, Good
REFLEXES, Patellar, Eq. quite active.
Other Reflexes,
ARTICULATION, Hesitating, Very Slurred,
FACIAL EXPRESSION, Anxious.
SENSIBILITY,
HEART, Sounds transmitted
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., Normal condition
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS, × He's had no natural movement of bowels for a long time

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died when patient was a baby.
Father or Pat. Relations, Father died of paralysis. Had several strokes. Had dyspepsia badly
Brothers or Sisters,

Personal and Medical History of Mary. H. Owens

SIBERT, FOLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Nov 1 Was brought here by Deputy Sheriff Staas and attended by Wm Harrison, with following history. There is no history either Consanguinity or heredity. This is 3rd attack probably. Went to Hospital at Battle Creek for nervousness & Stomach trouble last May; also about 10 years ago (at time of father's death), was not natural. Was slightly improved by treatment there, but, with the return to her teaching, the Symptoms grew worse. Symptoms of this attack manifested last May renewed this fall. by forgetfulness; unable to think enough to write; Cannot sleep; Constipation; will not eat. Her disease appears to be rather increasing; is variable; Has been entirely irrational. Derangement is now shown by the belief that her Stomach is unable to take any food; is unwilling to spend any money, for fear of poverty. Is not disposed to injure others. Attempted suicide during attack 10 years ago; now, talks of it. "Feels like destroying clothing". No peculiarities previously shown. No any history of intemperance, not known. Has had no serious disease or injury to head. Has not been restrained or confined. Thinks overwork, while teaching, the cause of the disease. Has been treated by massage, electricity, and dieting at Sanitarium. On personal examination, the following notes. Staring Eyes, Constant motion, picking at clothing, appearance of one under strain & trying to collect thoughts and realize present Condition; wandering in Speech; starts on a sentence & before concluding, branches off on to some altogether foreign topic - Is incoherent. Is unable to sit long at a time, and, when sitting, is Constantly moving arms & limbs - Appearance & manner, agitated, suspicious, Erratic, under strain in attempting to collect thoughts. Among other facts communicated, are Sleeplessness, Constipation, Dry mouth, without thirst; "want to die"; "would Commit Suicide but afraid to".

Nov 1 Nov. 1/93. On admission, is in fair physical condition. Has fever B° P. 92 Resp. R. 18. Tongue Bodily Condition Quite clean. Several bruises on her body. Did not sleep any all night.

2 Very restless & quite nervous. Neat & tidy in habits. Talks Rational but not freely Seems to hesitate when talking; Appetite Very poor. Sleep: Did not sleep any all night. Bowels Constipated. P. 92 R. 18 T. 98 1. Nov 3/93 The same. Put on tonic. Sleep 2 hrs. Very quiet all night. Nov 4/93 The same. Rested well Nov 5/93 Appetite poor. Very nice & quiet on ward. Complained of Constipation Gave Enema bowels moved freely Slept about 2 hrs. Very quiet. Nov 6/93. Seems better, not as restless as before. Appetite somewhat improved otherwise the same Restless about 2 hrs during the night.

7 The same. Awoke about 3 hrs during the night. Nov 8/93 The same. Rested well all night

9 Complains of bowels being constipated, asked for pills, otherwise the same. Gave pills Restless about 2 hrs. Bowels moved Nov 10/93. Appetite somewhat better, but seems quite restless & nervous most of the time. Awoke about 4 hr. Slept well the rest of the night.

11 The same rested well. Nov 12/93. The same. Rested well. Nov 13/93. Seems to be doing nicely Helps with mending or any light work. Is not very strong. Rested well.

14 The same. Rested well. Nov 15/93 Complains of Constipation Otherwise the same. Gave Enema. Bowels moved Rested well. Visited by friend. Nov. 18 93 Moved bet: —

Nov 30. 93. Appetite poor. Sleep quite good. Has an idea she is going to die at once. Very hard to get her to take medicine. Bowels constipated: —

Dec 1 Dec 1/93. When she came with this word (At East) She was scarcely able to eat anything without complaining of severe distress. Took Peptonized milk about 2 weeks, but seemed unsatisfied.

Personal and Medical History of Mary. H. Owens

1893

Dec 15/ 31 Dec 15/93. Has gone back to regular diet. Dec 31/93. Patient sleeps well at night. Seems much better and is quite Cheerful, of late. Bowels, however, are still irregular.

1894 Jan 31 Jan 31/94. Sleep & appetite are both good. Bowels still irregular. Goes out walking twice daily, and seems to be much better, in every way. —

Feb 14 Feb 22/94. Sleep, as a rule, good. Appetite good. Bowels, of late, more regular. She has gained considerably in flesh, and is in better health now. Works some in the dining-room. —

" 23 Feb 23/94. Patient was committed here under the "Law of 1892" recently declared unconstitutional. She was today Taken out and Returned, under "new Commitment papers" from Olmsted County. March 29 94. Appetite good Sleep generally good Has been gaining in flesh and seems much better in every way. Works a little on ward. Complains of nervousness, occasionally April 20 94. Massage by Miss Crum every 4 days.

May 1 94 Went home. Seemed quite nervous on receipt of news, but is quite well on the whole.

Personal and Medical History of Josephine. T. Campbell

ABBOTT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3539.
Residence, Austin, Minn
Date Admission, 2nd November 1893.
Admitted by, Dr Kilbourne Hour, 11.30 A.M.
How Sent, I.S. Washburn, Jof P, Mower County
Sex, Female
Age, 40
Civil Condition, married
Children, 8
Age Youngest Child, —
Occupation, Housewife (husband
Degree Education, Common Scho
Profession Religion, not a church mem
Habits, not intemperate.
Nativity, Count. (father Count; mother Penn).
Physicians Committing, H Wallen & O.W. Gibson
Correspondents, Katie Campbell (daughter)
She has no regular Physician — Austin Minn



No. for Year, 109.
Insane Relatives, 2 sisters. 1 Aunt; 1 uncle & grandfather
Cause Exciting, Hereditary
Cause Predisposing, Heredity
Form,
Accompanying Bodily Disorder, None mentioned
icidal or Not, Not
te of this Attack, 5 or 6 years ago
uration, 5 or 6 years
. of Attack, probably many
. of Admissions, 1st
e First Attack, not given
me of Leaving, Feb. 15 '94
Time in Hospital, 3mo 15 ds.
Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Exd by D. Linton-Phelps, Nov 10/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Quick
MEMORY:
Past Events,
Recent Events, Good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Illusive
REASONING POWER:
Ordinary Subjects, Impaired
Own Mental State, Does not realize that she is sick
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, excitable
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, Many & various
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Partly Coherent
Voluble or Reticent, Talks a great deal & becomes much excited during conversation. Mind wanders from one subject to another in rapid succession.

Personal and Medical History of Josephine. T. Campbell

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2 in. WEIGHT, 110 3/4 lbs. NUTRITION, Good
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, None Coatings, whitish Promptness Movement, Prompt
PUPILS, Equality, Equal Size,
Response Light, Good Accommodation, Good
SIGHT, Good
HEARING, Good
COORDINATION, Arms, } Good, & usual tests
Legs, }
TREMORS, Hands, None Tongue, None.
Facial Muscles, General, None
REFLEXES, Patellar, Equal — 7. —
Other Reflexes,
ARTICULATION, ~~Hesitating~~, Prompt Slurred,
FACIAL EXPRESSION, Worried
SENSIBILITY,
HEART, Quick; sounds normal
LUNGS, Seem in good condition.
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION, Regular
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, Yes Constipated, Irregular,
APPETITE, Good, Yes Medium, Poor,
SLEEP, Good, Yes Poor, Has been Irregular,
PULSE, 100 RESP., 18 TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") } Hereditary history strong; grandfather, Aunts and 2 sisters insane.
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Josephine T. Campbell

GOEDEL, FEILAR & CHAMBERS, DAVENPORT, IOWA

1893 This patient was brought here by Deputy Sheriff John Manning, attended by Florence Hillam, and Fannie Campbell, with the following history. Unknown, as to consanguinity. There is strong history of heredity; insane relatives being 2 sisters, 1 aunt, 1 uncle & grandfather. Probably has had many attacks; for many years, subject to ungovernable passion and under the influence of hallucinations of various kinds. First symptoms of this attack manifested 5 or 6 years ago; disease appears to be increasing. Is sometimes rational. Derangement now shown by irrational talk, on nearly all subjects. Always threatens to do injury to anyone, against whom she has an antipathy. Is neither disposed to filthy habits, nor destructive, nor suicidal. Previously, showed violent temper. There is no history of intemperance nor of any severe disease or injury to head. — She has not been restrained or confined. Disease is hereditary. Has not been under medical treatment. On personal examination, her talk was mostly abuse of examiners and people in general. Appearance & manner excitable. —

Nov 2/93. Patient, on admission, is in good physical condition. Temperature 98°.

Nov 2. No urines. Fought, while bathing. Behavior very noisy & fighting. Very angry on account of child being taken away from her. Thinks she was not insane but very badly treated & be brought here. Did not take any dinner. Scuffled did not take pulse or temp.

3. T. 98. P 89. Resp 19. Very noisy, talking, Eats well, Slept short. Bowels Reg.

4 More quiet. Temp. pulse and resp the same. Very noisy & talks very incoherently.

5. Menstruating. Pulse 100 T. 99. Resp 20. Very noisy. Has shown violence. Very annoying to other ladies. Bowels reg. Nov 6/93 T. 98. P 99. R 19. Very noisy Eats well, slept very poorly, last night. Bowels reg. Nov 7/93 No change in mental condition. Nov 8/93 More noisy than usual. Appetite good. Slept well last night. Nov 9/93 Very much the same. Talks very silly at times. Has delusions. Eats & sleeps well. Bowels Regular. Nov 10/93. No change

11. No change. Quite noisy this morning. Nov 12/93 Very irritable all day.

13 Talks very loud & incoherently. Has delusions, very tidy in habits, Nov 14/93 No change

14 in mental condition. Nov 15/93 No change. More quiet but quite irritable.

30 Appetite good. Sleep fairly good. Is very talkative. Has delusions. Dec 3/93 Appetite good. Sleeps well. In health good. Talks a great deal about going home to take care of the children. Doesn't see why she should be kept here when her children need her so much at home. Helps in dining room and knits some for herself. Is very industrious. Mental condition stationary.

At Jan. 3/94 Appetite good. Sleeps well. Works in laundry now. Is more quiet, when on the ward. Mental condition stationary.

Feb 15/94 Husband came and took her home. She had improved much, but was quite excitable. Erratic and apt to be very unreasonable. Was very anxious to go. Always thought she was unjustly kept here. Never would admit that she had been sick.

Personal and Medical History of

Personal and Medical History of Helen Wagner

BARRY, FISCHER & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3540.

Residence, Morristown, Rice Co. Minn.

Date Admission, 2nd November 1893.

Admitted by, Dr Linton-Phelps Hour, 4.30 PM

How Sent, R. A. Mott, Jof P, Rice County.

Sex, Female

Age, 28

Civil Condition, Married

Children, 2

Age Youngest Child, 16 months

Occupation, Housewife (Husband farmer)

Degree Education, Common School

Profession Religion, Lutheran

Habits, probably good

Nativity, Wisconsin (Parents born in Germany).

Physicians Committing, D.M. Cook and P. A. Lang

Correspondents, Chas. J. Wagner (Husband) above address.



No. for Year, 110.

Insane Relatives, None

Cause Exciting, Child-bearing

Cause Predisposing, previous attacks

Form,

Accompanying Bodily Disorder, No history of any severe illness

Suicidal or Not, not attempted tho' Meditates it

Date of this Attack, about 3 years ago

Duration, about 3 years

No. of Attack, Not 1st (at intervals for 2 years)

No. of Admissions, 1st

Age First Attack, probably about 25.

Time of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Ex. Nov 2/93. by Dr Linton-Phelps

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Quick.

MEMORY: Impaired

Past Events,

Recent Events, Good.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert.

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State, Impaired.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm, Calm

Indifferent,

Exalted,

Depressed,

DELUSIONS: None.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Coherent Talks willingly

Coherent or Incoherent, & quite freely

Voluble or Reticent,

Put on tonic

Personal and Medical History of Helen Wagner

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7 1/2 WEIGHT, 155 lbs. NUTRITION, Fair, rather pale

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Tremulous at times Coatings, Promptness Movement,

PUPILS, Equality, Eq. Size,

Response Light, Normal Accommodation, Normal

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Good

Case No. 3540. Helen Wagner. File No. 9

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

ARTICULATION, Hesitating, Prompt Slurred,

FACIAL EXPRESSION, Normal

SENSIBILITY,

HEART, Sounds are good

LUNGS, Seems in good Cond.

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean Clean, Careless,

BOWELS, Normal, Normal Constipated, Irregular,

APPETITE, Good, Good. Medium, Poor,

SLEEP, Good, Good Poor, Irregular,

PULSE, 84 RESP., 20. TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Gradual 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 healthy.

Personal and Medical History of Helen Wagner

EASLEY, PUGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3540.

Residence, Morristown, Rice Co. Minn.

Date Admission, 2nd November 1893.

Admitted by, W. Linton-Phelps Hour, 4.30 PM

How Sent, R. A. Mott, Jof C, Rice County.

Sex, Female

Age, 28

Civil Condition, Married

Children, 2

Age Youngest Child, 16 months

Occupation, Housewife (Husband a farmer)

Degree Education, Common School

Profession Religion, Lutheran

Habits, Probably good

Nativity, Wisconsin (Parents born in Ge...

Physicians Committing, D.M. Cook and ...

Correspondents, Chas. J. Wagner (Husband) above address.



No. for Year, 110.

Insane Relatives, None

Cause Exciting, Child-bearing

Cause Predisposing, previous attacks

Form,

Accompanying Bodily Disorder, No history of any severe illness

Suicidal or Not, not attempted tho' meditates it

Date of this Attack, about 3 years ago

Duration, about 3 years

No. of Attack, Not 1st (at intervals for 2 years)

No. of Admissions, ...th

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Ex. No 23/93. by W. Linton-Phelps

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Quick.

MEMORY: Seems clear

Past Events,

Recent Events, Good.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert.

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State, Impaired.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm, Calm

Indifferent,

Exalted,

Depressed,

DELUSIONS: None.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Coherent Talks willingly

Coherent or Incoherent, & quite freely

Voluble or Reticent,

Put out tonic

Personal and Medical History of Helen Wagner

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7 in WEIGHT, 145 lbs. NUTRITION, Fair, rather pale

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Protruded opposite. Coatings, Promptness Movement,

PUPILS, Equality, Eq. Size,

Response Light, Normal Accommodation, Normal

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Good

Legs, Good.

TREMORS, Hands, None Tongue, None

Facial Muscles, General,

REFLEXES, Patellar, Eq +

Other Reflexes,

ARTICULATION, Hesitating, Prompt Slurred,

FACIAL EXPRESSION, Normal

SENSIBILITY,

HEART, Sounds are good

LUNGS, Seems in good Cond.

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean, Careless,

BOWELS, Normal, Normal Constipated, Irregular,

APPETITE, Good, Good. Medium, Poor,

SLEEP, Good, Good Poor, Irregular,

PULSE, 84 RESP., 20. TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Gradual ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters, 1. Bro healthy.

Personal and Medical History of Helen Wagner

EARLEY, FICLAR & WHAMBERG, DAVENPORT, IOWA

1893 Was brought here by Sheriff Stewart, attended by her husband, with the following history. There is no history of any consanguinity or heredity. She has had previous attacks at intervals for 2 yrs of about 3 weeks duration. Has not previously been sent to hospital. First symptoms of this attack were manifested about 2 years ago, by obscene language, angry words; abuses the children. Disease seems to be increasing, but is variable & there are rational intervals. Suffers from Menstrual periods. Derangement is now shown by her wandering from home, night & day; contemplates suicide. Is irascible, unreasonable Easily provoked. Is disposed to injure others. Has not attempted suicide but seems to meditate it. No peculiarities were previously noticeable. There is no history of intemperance or of any severe disease or head-injury. She has been locked in her house, frequently. Supposed cause of disease is Child-bearing. Has had little or no medical treatment. On personal examination, Examining Physicians remark: From the evidence set before us, at this trial, we are of the opinion that Mrs (Helen) Chas. J. Wagner is insane and we believe it is the result of frequent Child-bearing and want of proper care at such times resulting in Uterine & Ovarian disease". —

Nov 2/93. On admission, patient is found to be in good Physical Condition. Was put on B3 — P. 84. R 20. T. 98 4 Bodily Condition Nobunnies, quite clean. Behavior very nice & quiet on Ward. Tidy in habits. Talk rational Appetite quite good Rested well all night. Bowels Reg: P. 84 R 20. T. 98 4 Nov 3/93 The same Put on tonic. Slept well during the night. Nov 4/93 The same, Rested well. Nov 5/93. The same, was at Chapel Quite Restless Slept about 5 hrs. Nov 6/93 Very nice & quiet, seems to realize by that she has not been well Wrote a letter to husband & is anxious to go home to the children. Rested well all night. Nov 7/93 The Same Visited by Bro. & friend. Rested well all night. 8 Nov 8/93 The same. Restless 2 hrs during the night. Nov 9/93 The Same. Rested well. 10. The same Rested well. Nov 11/93 Does not seem so well. Suffering with pain in bowels. Menstruated. Gave med as directed. Rested well. Nov 12/93 Appetite good. Very nice & quiet on ward. Does not suffer so much today. Otherwise the same. Rested well. 13. The same, Except refuses to take her tonic. Nov 14/93 The Same Rested well. 25. The same Rested quite well. Nov 25. 93. Menstruated Nov 29 93 Appetite fair. Very neat & " 29 quiet in behavior. Tidy in habits. Neat about herself. Talks rationally Takes med. 3 times daily. Rests good at nights & quite a good help in dining room. — " — " —

Dec 1 Dec 12/93. Appetite good. Very quiet in behavior. Tidy in habits. Working for self; does not do any ward-work.
" 14 For past few days has been very anxious to go home. Dec 14/93. Was today, going to laundry with some clothes
" 19 and ran away; it was very difficult to get her back. Dec 19/93. Broke off piece of her teeth. — " —
" 31 Dec 31/93. Continues about the same as described in above notes.
1894
Jan 7/94 Jan 7/94. Transferred to B1. Jan 31/94. No noticeable change in patient's condition. —
Feb 25 Feb 25/94. Sleeps well, at night. Appetite is good. Is quietly behaved. Talks quite sensibly when spoken to & replies promptly: otherwise, seldom speaks. Works in laundry. Habits are clean. —
" 28 Feb 28/94. Patient was committed here under the "law of 1893", recently declared unconstitutional. She was today, Taken out and Returned under "New Warrant" from Olmsted County —
Mch 17 Appetite good. Sleeps well. Is very quiet. Seldom ever talks. Worked in laundry until last few days. Removed to asylum of Mch 17. 94.

Personal and Medical History of Helen Wagner

May 5 / July 17 Appetite good. Sleeps well. Is very quiet. Seldom speaks. Clean in habits. Has been working in laundry for the last 2 weeks. Goes riding. General health good.
May 11 94 Visited by a friend July 17. 94 Visited by her husband July 28. 94 Appetite fair. Clean in habits. Is rather quiet. Works in laundry Goes riding & walking Gen. health good. Aug 27. 94. Looks pale & thin. Does not work in laundry
Nov 1 94 Appetite fair Clean in habits but untidy in personal appearance. Is growing more fleshy but looks quite pale. Is quiet most of the time. Talks incoherently Is violent occasionally Goes riding and walking. General health good.
Febr 20. 95. Appetite good. Clean in habits. Very untidy in habits. Rather noisy and restless. Talks incoherently. Has delusions. Gen health good. Goes riding & walking. Mch 26. 95 Has been very restless for some time. Wants to stay in the water. Lie on the floor & take her clothes off all the time. Has to be watched constantly.
Apr 6 95 Appetite good. Dirty & untidy in habits. Is very noisy, talking & laughing all the time. Acts very silly. Talks incoherently. Gen health good. Goes riding & walking. May 24. 95 Has become very quiet. Talks very little. June 19 Not well for several days past. Complains of pain in chest. Does not cough. Pulse 106. Temp. 102 6/10 Resp. 36. 5.30 P.M. June 20 9.30 A.M. Pulse 86 - Temp. 99. Resp. 28 5.30 P.M. Pulse. 100 Temp. 102 Resp. 30. June 21 10 A.M. Pulse 86. Temp. 98 2/10. Resp. 28. June 24 Sick all night. Complains this morning of severe pain in back & left side. Screams when she moves. 9 A.M. Pulse 112 - Temp. 100 2/10. Resp. 34. Trans. to Inf.
June 30 In bed. Moaning & complains of pain in side. Will not stay in bed very much. Appetite fair. Bowels Regular. July 5 Up on ward. Appetite good. Goes walking. July 6 Face & Arms & Aug 9. Visited by brother, did not seem to recognize him. Aug. 12. No change.
Sept 30 Appetite good. Clean in habits but untidy in appearance. Talks very little & then incoherently. Not noisy but restless. Acts silly. Gen. health good. Goes walking & riding. Nov 2 Violent at times. Habits very dirty. Extremely noisy at times. Nov 30 Appetite good. Sleeps quite well. Dirty. Noisy at times. Dec 30 Violent at times. Eats & sleeps well. Habits very dirty. Bowels regular. Destructive at times. Mar 30 Quiet most of time. Eats & sleeps well. Habits quite clean. Goes riding & walking. Bowels regular. Apr 30 Very noisy at times. Habits extremely filthy. Noisy at night. Appetite poor. Violent & destructive. Summary Nurse's Notes by Dr. S.L. Phelps: Aug '96 ~~quite noisy for several hours at a time~~. Dirty part of time: works some on ward: Quit health good: Nov '96 Appetite good: bowels regular. Jan '97 Quit physical condition good: somewhat quieter & much cleaner in habits the past two months.
1897 May Very violent: appetite poor: habits untidy: destructive: Aug 97 Eats & sleeps quite well ~~Habits~~ dirty: no mental change (Cont'd by Dr. R. M. Phelps) Nov. 27 '97 General health fairly good: somewhat dirty in habits & inclined to be violent. Dec '97 Visited by husband. Feb 28 98 Weight 160 lbs.
1899 Feb 28 Intervening notes show no special change in condition or behavior. Health fairly good (Cont. by Dr. R.A. Birkett) Feb to Sept 99 Appetite good: bowels usually regular: sleeps well: neat. Takes out door exercise: Violent & destructive at times. Nov 17 Struck by Sarah Darling & cut small cut on nose.

See Folio 292.

Personal and Medical History of Emily Seebich

LIBERTY, FOLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3541.

Residence, 924 Minnehaha St. St Paul Minn

Date Admission, 2nd November 1893

Admitted by, Dr Phelps Hour, 7 PM.

How Sent, John B. Oliver Jof P. Ramsey County

Sex, Female

Age, 46 years

Civil Condition, married

Children, 4

Age Youngest Child, 9 years

Occupation, Music - Teacher

Degree Education, Fair

Profession Religion, Methodist

Habits, Not Known

Nativity, Germany (parents also born there)

Physicians Committing, Edgar J. Schmidt & J. O. Hagen

Correspondents, None given in Papers

Family Physician Edgar J. Schmidt 265 Eg[th] St St Paul



No. for Year, 111.

Insane Relatives, Unknown

Cause Exciting, Unknown

Cause Predisposing, unknown

Form,

Accompanying Bodily Disorder, None mentioned

Suicidal or Not, not attempted, but propensity active

Date of this Attack, 2 or 3 years ago

Duration, 2 or 3 years

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 43

Time of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

Exd by Dr Luiton Phelps Nov 1893 — MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Good

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Illusive

REASONING POWER: much impaired

Ordinary Subjects, Impaired

Own Mental State, Says "She is perfectly well."

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Thinks she is all right and we are interfering with her by asking so many questions —

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Indifferent

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, Thinks she might not to eat.

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Talks incoherently, part of

Voluble or Reticent, the time. Answers questions quite promptly.

Personal and Medical History of Emily Seebich

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2 in WEIGHT, 104 lbs NUTRITION, Poor; very pale

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Coatings, whitish Promptness Movement,

PUPILS, Equality, equal Size, normal

Response Light, Good Accommodation, Good

SIGHT, Impaired; uses glasses for fine work.

HEARING,

COORDINATION,

TREMORS,

Case No. 3541. Emily Seebich. File No. 9

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

REFLEXES, Patellar, Equal —

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Worried and anxious.

SENSIBILITY,

HEART, Sounds are normal.

LUNGS, Seem in good condition.

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Records kept Constipated, Irregular,

APPETITE, Good, Medium, Very Poor, Requires feeding by tube. But upon House —

SLEEP, Good, Poor, Irregular,

PULSE, 78 RESP., 16 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 has dyspepsia

Brothers or Sisters,

Personal and Medical History of *Emily Seebich*

LIBERTY, POLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3541.

Residence, 911 Minnehaha St. St Paul Minn

Date Admission, 2nd November 1893

Admitted by, Dr Phelps Hour, 7 PM

How Sent, John B. Oliver J of P, Ramsey County

Sex, Female

Age, 46 years

Civil Condition, married

Children, 4

Age Youngest Child, 9 years

Occupation, Music - Teacher

Degree Education, Fair

Profession Religion, Methodist

Habits, not known

Nativity, Germany (parents also born there)

Physicians Committing, Edgar J. Schmidt & J. J. Hagen

Correspondents, None given in Papers

Family Physician Edgar J. Schmidt 265 Eg[th] & St Paul

No. for Year, 111.

Insane Relatives, Unknown

Cause Exciting, Unknown

Cause Predisposing, unknown

Form,

Accompanying Bodily Disorder, None mentioned

Suicidal or Not, not attempted, but propensity active

Date of this Attack, 2 or 3 years ago

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

Exd by Dr Linton Phelps Nov 10/93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Good

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Illusive

REASONING POWER: much impaired

Ordinary Subjects, Impaired

Own Mental State, Says "She is perfectly well."

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Thinks she is all right and we are interfering with her by asking so many questions —

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Indifferent

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, Thinks she right not to eat.

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Talks incoherently, part of

Voluble or Reticent, the time. Answers questions

quite promptly.

Personal and Medical History of *Emily Seebich*

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2 in WEIGHT, 104 lbs NUTRITION, Poor; very pale

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Coatings, whitish Promptness Movement,

PUPILS, Equality, equal Size, normal

Response Light, Good Accommodation, Good

SIGHT, Impaired; uses glasses for fine work.

HEARING, Good

COORDINATION, Arms, } Good by usual tests

Legs, }

TREMORS, Hands, none Tongue, none

Facial Muscles, General,

REFLEXES, Patellar, Equal — 5 —

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Worried and anxious.

SENSIBILITY,

HEART, Sounds are normal.

LUNGS, Seem in good condition.

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Yes Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Records kept Medium, Very Poor, Requires feeding by tube. But upon stomach —

SLEEP, Good, Poor, Irregular,

PULSE, 78 RESP., 16 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 has dyspepsia

Brothers or Sisters,

Personal and Medical History of Emily Seebich

EARLEY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Deputy Sheriff Haas, attended by Mr. Flynn, with following history. Not known as to Consanguinity or heredity. This is 1st attack, first symptoms manifested 2 or 3 years ago. Disease seems increasing, lucid variable & there are rational intervals, at irregular periods. Derangement is now shown by pyromania. Is neither disposed to injure others, nor filthy, but is destructively inclined. She has not attempted suicide but propensity is active. As to habits, unknown. There is no history of any severe disease or injury to head. She has not been restrained or confined. Cause of the disease is unknown. No medical treatment has been given. On personal examination as stated above; She said her desire was to set the house on fire, and the Lord would protect her. Manner was irrational. —

Nov 2/93. On admission, is in fair physical condition. Has put on 7 lbs. No bruises. Very dirty. Behavior quiet. Refused to take her medicine. Claims she is not sick and did not know where they were going to send her. Has eaten nothing. Sleep good. Coughs none. Bowels regular. Pgt. T. 98. P. Rested somewhat, not talkative.

4 Slept well. Has eaten nothing all day. Has been quiet. Nov 5/93. Slept well, ~~would not be fed by tube~~. Has eaten nothing. Quiet all day. Nov 6/93. Slept well. Was fed with tube. "7/93. Slept well, has eaten nothing. Quiet all day. Nov 8/93. Slept well, fed with the tube. "9/93. Slept well, fed with the tube. Stands in one place all day. "10/93. Slept well, fed with the tube, was visited by her brother this afternoon. Seems more cheerful. Ate some supper. "11/93. Slept well. Has been walking up & down the hall all day, ate some breakfast and dinner. Took no supper. "12/93. Took breakfast. No dinner, no supper. Slept well. Has been walking up & down the hall all day. "13/93. Took some breakfast. No dinner, no supper. Slept well. "14/93. Ate some potatoes for dinner. No breakfast, no supper, slept well. "15/93. Was fed with the tube this morning. Ate a few potatoes for dinner & supper. Slept well. "16/93. Slept well. Appetite fairly good today. Nov 17/93. Appetite poor. Has been fed with the tube most of the time since she came. Is quite, sleeps well, her delusion seems that she is in perfect health & don't need rest. —

Nov 19/93 Appetite poor. Sleeps well. Has many delusions. —

Dec 20 Dec 20/93. Appetite fairly good. Has not been fed by the tube since the 12th of the month. Still deluded.

" 31 Dec 31/93. No change to note in Patients condition. —

Jan 30/31 Jan 30/94. Took neither breakfast nor dinner today. Jan 31/94. Appetite fairly good. Patient is troubled a great deal with Catarrh & frequently Complains of headache. —

Febr 22 Febr 1/94. Sleeps well, at night. Appetite is fairly good. Deluded. Thinks, now, she is a "Queen". —

" 23 Feb 23/94. This patient was committed here, under the "Law of 1893", recently declared unconstitutional. She was, today, Taken out and Returned, "under" new Commitment Papers" from Chariton County.

March 31 Physical condition good — Still delusive and incoherent. Has worked most of the month — Does not realize her condition. Mind is full of delusions.

April 30 — 94 More quiet — Does not talk much unless addressed. Always asks to go home if any

July 19 94 Visited by friends. July 19 94. Appetite good. Clean in habits & tidy in habits. Is noisy occasionally. Acts very silly. Talks incoherently. Has delusions. Will not go riding or walking. Gen health good.

Nov 2 94. Appetite good. Clean in habits, but rather untidy in personal appearance. Is quite noisy. Talks a good deal and in an incoherent manner. —

Personal and Medical History of Emily Seebich.

Is very obstinate. Will not go riding or walking. General health good.

Feb 14 95. Appetite good. Clean in habits. Untidy in personal appearance. Noisy and restless. Talks incoherently. Gen health good. Will not go riding or walking. Apr 20 95 Appetite good. Clean in habits but untidy in personal appearance. Is very noisy and restless talking and walking up and down the hall. Talks incoherently. Is very obstinate. Gen health good. Will not go riding or walking. July 7. Appetite good. Clean in habits but untidy in appearance. Noisy & restless. Is very obstinate profane. Gen. health good. Aug 12. Goes walking. No change. Sept 5 Visited by cousin. Sept 29 & Oct 9 Appetite good. Clean in habits but untidy in appearance. Noisy & restless. Talks incoherently & has delusions. Is very obstinate. — always objects to going walking & riding. Gen. health good. Dec 6 Appetite good — Clean in habits but very untidy. Noisy & disagreeable. Talks much & incoherently. Has delusions. Very restless nights. General health good. Always refuses to go riding or walking.

1896 Scans. & B.2. Jan 13 Quite noisy. Feb 5 Very disagreeable. Fought this A.M.

Feb 6 No change in behavior. Scans. & Amnes. — Noisy most of night. Feb 7 & 8. Awake & talking until 4 A.M. April Visited by friend. April 8 Appetite good. Clean in habits. Untidy in appearance. Noisy & restless & very obstinate. General health good. Takes out door exercise. April 9 Very noisy for 3 hrs. during night.

May 15 & 16 Very noisy for several hrs during night.

Aug. Summary Nurse's Notes by Dr. S. B. Phelps:— Quite noisy for several hours at a time. Very untidy. restless. very obstinate talks incoherently. Gen. health good.

Nov. Noisy & restless. No change. Jan 97 Quiet part of time. at other times restless, scolding & noisy. May 97 Gen. health good. No mental change. Aug 97 Appetite good. Habits untidy. talks incoherently. Has many delusions. Gen. health good.

Continued by R. M. Phelps. Nov 30 97 Patient since October 25th has been on Infirmary & has been in bed the last few weeks. Complains of a swollen knee & lameness. Temp. was up for a few days but the last two days has been about normal. From the slow chronic character of the swelling it appeared to be tuberculous in character but receded. Is not now badly swollen. Dec 30 Visited by sister. walks somewhat lame but is able to be up & about. Jan. 9 98 Trans & Amnes Feb 9 Wt. 112 Feb 12 98 Patients condition shows very little change. Knee trouble seems to have receded quite perfectly (Seen by Dr. R. A. Bell)

1898 & Dec. General health fair. appetite good. sleeps well. quite neat in

Mar. habits & appearance. takes out door exercise. quite noisy at times. very talkative, but incoherent & expresses many delusions. and she is sarcastic & abusive. June 13 98 Lame. right limb swollen. bandaged. remained in bed

Aug 8. limb again swollen. quite lame. Aug 18 Wt. 109 #. Sept 1 — Feb 28 (Dr. Reynolds) Neat but careless. walks lame. Very sarcastic. Very noisy at times. Talks incoherently. Expresses delusions. appetite good. Bowels regular. Trans. & A. Nov. 28 No change.

March 1 — Aug 31 1900. (Dr. Reynolds) Patient clean tho rather careless. Noisy at times. Bowels regular. Takes out door exercise. July 4. Visited by sister July 23 Vaccinated. Sept 1 — Nov 30 (Dr. Linton) General health good. Talks to herself. Does not answer questions. Goes riding & walking. Dec. — Feb 8 1901 Extremely noisy at times. walks about all day scolding to herself. Appetite good. sleeps well. Wt. 127 #.

Personal and Medical History of Anna Atneosen

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3543

Residence, Big Woods P.O. Mars

Date Admission, 3rd November 18

Admitted by, Dr. Phelps Hour, 7

How Sent, J. Cooke, Ct. Commr. Ma

Sex, Female

Age, 45 years (about)

Civil Condition, Married

Children, Iva

Age Youngest Child, 7 months

Occupation, Housewife (husband

Degree Education, Can read & wri

Profession Religion, Lutheran Synod

Habits, Nobility of intemperance

Nativity, Norway (parents also born there).

Physicians Committing, I. J. McGillan & G. S. Wattam

Correspondents, none given in "Papers" Brother? Thorsen Olsen

No family Physician

No. for Year, 113.

Insane Relatives, None

Cause Exciting, Death of children & being left by husband

Cause Predisposing, not given

Form,

Accompanying Bodily Disorder, partially deaf

Suicidal or Not, Suicidal, propensity now active

Date of this Attack, 10 or 20 days ago

Duration, 10 or 20 days

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 45.

Time of Leaving, Dec. 3rd '94

Time in Hospital, 1y 1ms.

Result, Improved.

EXAMINATION ON ADMISSION.

Exd by Dr Linton - Phelps - Nov 11/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish, very

MEMORY:

Past Events,

Recent Events, Can not determine

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Impaired

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Physical condition is very good.

EMOTIONAL STATE:

Normal, Calm, Calm

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, Seems to have many.

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Does not talk any English.

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Anna Atneosen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 4 feet 11in WEIGHT, 121 pds. NUTRITION, Good; Good color.

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Coatings, red; raw looking Promptness Movement,

PUPILS, Equality, equal Size, normal

Response Light, Accommodation,

SIGHT, Seems good; left Eye red.

HEARING, Seems good.

COORDINATION, Arms, Good, by usual tests

Legs, Good (walking).

TREMORS, Hands, None Tongue, None

Case No. 3543. Anna Atneosen. Vol. 24.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

FACIAL EXPRESSION, Blank

SENSIBILITY,

HEART, Sounds are normal

LUNGS, In good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean Careless,

BOWELS, Normal, Normal Constipated, Irregular,

APPETITE, Good, Medium, Fair Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 72, strong RESP., 18 TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") Cannot determine.

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Anna Ahneosen

GILBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA.



Whole No. 3543

Residence, Big Woods P.O. Mars

Date Admission, 3rd November 18

Admitted by, Dr. Phelps Hour, 7

How Sent, J. Cooke, Ct. Commr. Ma

Sex, Female

Age, 45 years (about)

Civil Condition, Married

Children, Two

Age Youngest Child, 7 months

Occupation, Housewife (husband

Degree Education, Can read & wri

Profession Religion, Lutheran Synod

Habits, nohistry of intemperance

Nativity, Norway (parents also born there).

Physicians Committing, I. J. McGillan & G. S. Wattam

Correspondents, none given in "Papers" Brother? Knoxville Iowa

No Family Physician

No. for Year, 113.

Insane Relatives, None

Cause Exciting, Death of children & being left by husband

Cause Predisposing, not given

Form,

Accompanying Bodily Disorder, partially deaf

Suicidal or Not, Suicidal, Propensity inactive

Date of this Attack, 10 or 20 days ago

Duration, 10 or 20 days

1st

Time in ...

Result,

EXAMINATION ON ADMISSION.

Exd by Dr Linton - Phelps - Nov 11/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish, very

MEMORY:

Past Events,

Recent Events, Can not determine

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Impaired

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Physical condition is very good.

EMOTIONAL STATE:

Normal, Calm, Calm

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, Seems to have many.

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Does not talk any English.

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Anna Ahneosen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 4 feet 11 in. WEIGHT, 121 pd. NUTRITION, Good; Good color.

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Coatings, red; raw looking Promptness Movement,

PUPILS, Equality, equal Size, Normal

Response Light, Accommodation,

SIGHT, Seems good; left Eye red.

HEARING, Seems good.

COORDINATION, Arms, Good, by usual tests

Legs, Good (walking).

TREMORS, Hands, None Tongue, None

Facial Muscles, None General, None

REFLEXES, Patellar, Equal — q+.

Other Reflexes, ankle-clonus

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Blank

SENSIBILITY,

HEART, Sounds are normal

LUNGS, In good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Clean Careless,

BOWELS, Normal, Normal Constipated, Irregular,

APPETITE, Good, Medium, Fair Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 72, strong RESP., 18 TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") Cannot determine.

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Anna Ahneosen

EBBERT, PUGLAR & CHAMBERS, DAVENPORT, IOWA.

1893 Has brought here by Sheriff's Deputy, Otto Stultz & her brother, A. Olson, with the following history — There is no history of consanguinity, so far as known. no insane relatives. This is 1st attack, symptoms manifested about 10 or 12 days ago, by jumping out of bed, at night, and by crying & talking in a violent manner, and laboring under the delusion that her husband had been drowned in the river. The disease appears to be increasing; no rational intervals. Derangement is now shown by violent and incoherent talk, on all subjects. Has shown disposition to injure others. Her habits have not been filthy but they are somewhat destructive. Has endeavored to choke herself, and also to throw herself down stairs; propensity now active & she has to be constantly watched. Previously, had always been quick-tempered, but paid little attention to religious subjects. There is no history of intemperance. She had some inflammatory trouble in middle-ear, in child-hood, which left her partially deaf, in both ears. Has been confined & restrained during the past week. As to cause of disease, nothing definite known. She lost 2 children by diphtheria, in August, and her husband left her about the time this attack became manifest. She had no medical treatment. On personal examination; patient does not speak English, so that we are unable to converse with her; seems not to comprehend what is said to her in her own language or to realize passing events; when left to herself, standing, began dancing & contorting body, singing an accompaniment. There was a total loss of understanding of her surroundings; a tendency to intervals of excitement, dancing, singing & so forth. —

Nov 3 Nov 3/93. On admission, is in fair physical condition. Respiration 13'. Pyl. R18. Poddy condition. Very dirty. Both feet turn in. A large bruise on right arm & several small bruises on body, also a sore place on right hand. Nov 4/93. Behaves quiet on ward. Being difficult to dress & undress. Untidy in habits. Does not talk English. Appetite. Ate but very little. Asleep all night. P84 R18. T 98 4.

" 5 Noisy at times, ate but very little during the day. Does not seem to realize or understand anything that is said to her. Rested well during the night. Nov 6/93. The same. Rested well all night.

7 The same. Rested well. Nov 8/93 Somewhat better. Seems brighter. Very quiet in habits. Appetite better & feeds herself. Rested well. Nov 9/93. The same. Rested well. Nov 10/93 The same Do

11 The same. Rested well. Nov 12/93. The same. Rested well 7/13/93. Not quite so well. Does not talk any. Bowels constipated. Gave dose of salts. 7/14/93 The same. Rested well. 7/16/93 The same Do

17 The same. Rested well. Nov 24.93 Seems somewhat brighter & was very much interested in letter from husband.

29 Seems to realize now where she is. Nov 27.93 Moved to B1. Nov 29.93. Appetite fairly good. Sleeps very well & doesn't talk, sits in one place all day long. —

Dec 26 1894 Dec 26/93. Sleeps well at night. Appetite fairly good. Sits in one place, all day long; moves only when she is asked to. Manifests delusions. General health good. (Menst. about 24th).

Jan 31 Jan 31/94. No noticeable change, except that she seems somewhat brighter than at time of last note. Menst. about 24th.

Feb 7 Feb 7/94. Appetite not so good the past few days. One of her ears has been discharging, today. Feb 20/94. Appetite much better.

" 28 Feb 28/94. Sleeps well. Appetite good. Seems much brighter, although she does not talk. Ear troubles her some yet. Menst. 24th.

Mar 5 Mar 3/94. Continues to rest and sleep well. Is quietly behaved. Clean in habits. Does not talk. Helps into hall-work.

" 14 Mar 12/94. Patient was committed here under the "Law of 1893" recently declared unconstitutional. She was, today, Taken off and Returned under new warrant from Olmsted County.

24 Transf to A. 1 C.

Personal and Medical History of Anna Ahneosen.

May 2 94 Appetite good. Sleeps well. Behaves very quiet. Does not talk any. Works in the center dining room. No complaints. April 30 94. Appetite good. Clean in habits. Works in the employe's dining room. Behaves just

May 16 94 Transf to B2. May 22 94 Sleeps well. Gen. health good. Helps in C. D. room. Behaves as very strange. Coughs a great deal. June 28 94 Gen. health good. Helps in C. D. Room all the time. Does not talk, jokes in the hall. July 3 94 No change. Aug 10 94. Appetite good. Bowels regular. Helps in C. D. Room

Sept 3 94 No change. Gen. health good. Works in C. D. R. Sept 30 94 Gen. health very good. Talks incoherently at times. Works in the E. D. R. Oct 30 94 Mental condition is considerably improved. So much brighter and talks quite sensibly. Works in E. D. R. Appetite good. Bowels regular. Sleeps well. Nov 5 94 Menstruated from 1-6th. Nov 30 94 Appetite good. Bowels regular. Talks much more of late. Works in the E. D. R. Dec 19 94 Visited by her husband. Dec 31 94 Went home this morning.

Discharged

Helen Wagner. From Folio 284.

Sept 1. 1898 1900. (Dr Heyerdale) Appetite good. Sleeps well. Habits usually clean; violent at times. Bowels regular. Takes out door exercise. 1898. Very dirty in habits. On restraint at night until 1899. 1897. Eats & sleeps well. Mch 1 – Nov 30 Quiet; untidy; does not converse; Appetite good. Sleeps well. Bowels regular. Sept 18 Has been suffering with diarrhoea. Trans. to Infirmary; Given boiled milk diet & medicine. Bloody stools. Temp. quite high. 22. Much improved. Trans. to 1-2. Nov 20. 140 lbs. [illegible] 1901. Patient quite noisy & destructive; habits dirty the part of time neat & clean; quiet. Has many delusions; Sleeps quite well. Bowels regular. Takes outdoor exercise; July 17 Vaccinated.

Dec 1. 1898 1901. General health good. Feb 15 Wt. 152 1/2 lbs.

Mar. to June 1901 Patient shows no change in general condition. May 29 Wt. 155 #.

June to Sept. Patient assists some with ward work, is treacherous at times attacks nurses without provocation, kept in bay some of the time, Aug. 31. Wt. 131 #.

Sept. to Dec. Occasionally attends amusements, no change in general condition. Nov. 23 Wt 125 #

No change. Wt 124 # Mar. to Aug 23-02 No change. Sept. to Dec. 31-02 General health good; eats & sleeps well; takes regular out door exercise unoccupied; dirty & resisting & violent; kept in bay; frequently attacks nurses & patients and is very hard to manage; is destructive.

Personal and Medical History of Annie Louise Brown (nee Anderson)

HERBERT, FOLLAS & CHAMBERS, DAVENPORT, IOWA



Whole No. 3546 — 116.

Residence, 1185 Edgerton St. St — ives, none

Date Admission, 7th November 1893. — ng, hardwork & desertion by husband.

Admitted by, D. Phelps Hour, 7 PM — posing, not stated

How Sent, John. B. Olivier Jof P. C

Sex, Female — g Bodily Disorder, none mentioned

Age, 30 — ot, not

Civil Condition, married — Attack, probably a year ago

Children, 3 — probably a year

Age Youngest Child, 22 months — 1st

Occupation, Scrubbing & washing — born — No. of Admissions, 1st

Degree Education, Limited Reading & writing — Age First Attack, about 29. (?)

Profession Religion, Methodist — Time of Leaving,

Habits, not intemperate — Time in Hospital,

Nativity, Sweden (Parents also born there). — Result,

Physicians Committing, Arthur B Ancker & Arthur Sweeney

Correspondents, (Brother) Andrew Anderson - Grove Ave St Paul (Cousins) Langrue Bros, Grocers, E. 7th St. and George F. Woolsey - 3745 - River St. —

Family Physician, unknown

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Ex. Nov. 9 Dr Linton Phelps

MENTAL ACTIVITY:

Clear or Confused, Fairly clear

Quick or Sluggish, Quick.

MEMORY: Good

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER: Impaired

Ordinary Subjects,

Own Mental State, Does not realize her condition.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Hesitates in answering but finally answers correctly. Says people took her husbands part, that he was good Brotherfolk and ugly then. Has a nervous manner when talking.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed,

DELUSIONS: Seems to have some

Systematized or Not,

Special Subjects, Religious delusions.

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Talks coherently

Coherent or Incoherent, mostly.

Voluble or Reticent,

Personal and Medical History of Annie Louise Brown

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 4 1/4 — WEIGHT, 114 lbs — NUTRITION, Good

WOUNDS OR ABNORMALITIES, Upper & lower front teeth defective in formation

TONGUE, Tremors, — Coatings, Yellowish white tip — Promptness Movement,

PUPILS, Equality, Eq. — Size, normal

Response Light, Good. — Accommodation, Good

SIGHT, Good.

HEARING, Good

COORDINATION, [illegible] Hands.

Annie L. Brown.

Case No. 3546 — File No. 9

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

TREMORS, Hands,

REFLEXES, Patellar,

ARTICULATION, Hesitating, Hesitating — Slurred, imp speech

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Sounds are normal.

LUNGS, Seems in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION, Reg. no pain

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Normal — Clean, clean — Careless,

BOWELS, Normal, Normal. — Constipated, — Irregular,

APPETITE, Good, Good — Medium, — Poor,

SLEEP, Good, — Poor, Poor — Irregular,

PULSE, 74 — RESP., 22 — 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 Rheumatism

Father or Pat. Relations, father died of Hemorrhage.

Brothers or Sisters,

Personal and Medical History of Annie Louise Brown (nee Anderson)

HERBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3546

Residence, 1185 Edgerton St. [illegible]

Date Admission, 7th November 1893.

Admitted by, D. Phelps Hour, 7 P[illegible]

How Sent, John B. Olivier Jo[illegible]

Sex, Female

Age, 30

Civil Condition, married

Children, 3

Age Youngest Child, 22 months

Occupation, scrubbing & washing

Degree Education, Limited Reading & writing

Profession Religion, Methodist

Habits, not intemperate

Nativity, Sweden (Parents also born there)

Physicians Committing, Arthur B. Ancker & Arthur Sweeney

Correspondents, (Brother) Andrew Anderson Grove Ave. St. Paul
(Cousins) Langvick Bros. Grocers, E. 7th St. and
George F. Woolsey 824 S. Burr St.

Family Physician, unknown

116.

[illegible]ives, none

[illegible]ng, hardwork & desertion by husband.

[illegible]posing, not stated

[illegible]g Bodily Disorder, none mentioned

[illegible]ot, not

[illegible]Attack, probably a year ago

probably a year

1st

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Ex Nov 9. Dr Linton Phelps

MENTAL ACTIVITY:

Clear or Confused, Fairly clear

Quick or Sluggish, Quick.

MEMORY: Good

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER: Impaired

Ordinary Subjects,

Own Mental State, Does not realize her condition

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Hesitates in answering but finally answers correctly. Says people took his husbands part, that he was good brother folks and ugly then. Has a nervous manner when talking.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed,

DELUSIONS: Seems to have some

Systematized or Not,

Special Subjects, Religious delusions.

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Talks coherently

Coherent or Incoherent, mostly.

Voluble or Reticent,

Personal and Medical History of Annie Louise Brown

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 4 1/4 WEIGHT, 114 lbs NUTRITION, Good

WOUNDS OR ABNORMALITIES, Upper & lower front teeth defective in formation

TONGUE, Tremors, Coatings, Coated with red tip Promptness Movement,

PUPILS, Equality, Eq. Size, Normal

Response Light, Good. Accommodation, Good

SIGHT, Good.

HEARING, Good

COORDINATION, Arms, Nervous in manner, nervous action of hands.

Legs,

TREMORS, Hands, Slight Tongue,

Facial Muscles, None General,

REFLEXES, Patellar, R+ L+ 2.

Other Reflexes,

ARTICULATION, Hesitating, Hesitating Slurred, imp speech

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Sounds are normal.

LUNGS, Seems in good condition.

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION, Reg. no pain

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Normal. Clean, Clean Careless,

BOWELS, Normal, Normal. Constipated, Irregular,

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, Poor, Poor Irregular,

PULSE, 74 RESP., 22 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 Rheumatism

Father or Pat. Relations, Father died of Hemorrhage.

Brothers or Sisters,

Personal and Medical History of Annie Louise Brown

EARLEY, FOLAN & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Sheriffs - Deputy Mc Quirk, attended by Wm. Fuhrman, with the following history of case. No history of consanguinity or heredity. This is 1st attack; seemingly continuous for past year. Has been at City & County Hospital, St. Paul. First symptoms of attack manifested by wandering about aimlessly, exposed to cold & want. Disease seems stationary, but is variable. At times, she is apparently rational & talks freely & connectedly. She now wanders about with her 3 children, occupying deserted houses, shutting & barricading doors & receiving food from neighbors who push it through the windows. She would not hold communication with them otherwise. She was found, with her children, to cold & hunger. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. There is no history of intemperance nor of any severe disease or injury to head. Cause of disease, has been deserted by her husband & has had hard work to support her family. Has been given good nutrition & sedatives. She has improved a little, in general health. On personal examination, she is usually reticent & suspicious, avoiding close contact with people. Said very little concerning her condition, & did not complain except of her clothes, which, she thought, were not good. Sat, reading her bible & would smile in a vacant, meaningless way. She sits on the floor, because, she says, it is more comfortable than a chair. Appearance & manner, vacant & uninterested. Other facts, communicated to us by others, are that she was deserted by her husband a year ago. Was found living in a deserted house last year & was sent to the House of the Good Shepherd, being released in the Spring, when she resumed her old mode of life.

Nov 7 Nov 7/93. The patient, on admission, is found to be in fair physical condition. Has sputum B.[3] Dirty. No injuries &c

8 Been very quiet all day. Worked in the dining room. Went out walking with the patients. Talk sensible. Appetite good. Sleep good. Bowels moved O.70. A.20. T. 98 1/5. Nov 9/93. Behavior quiet. Worked some in the dining room. Did some mending. Seems nervous at times & walks up & down the hall. Went in the bedroom & prayed about 1 hour. Complained of headache. Went to bed 3.30 P.M.

10. Behavior very quiet. Worked some in the dining room. Does not talk unless questioned. Went out walking with the patients.

11. Behavior quiet. Prays & reads the bible all day. Did not work at all. Went out walking with the patients.

12. Behavior quiet. Worked some in the dining room. Went to the chapel.

13 No change in behavior. Reads the bible most of the time.

14 No change in behavior. Works some in the dining room & makes her bed

15 Transf to A.1. Nov 16/93 Appetite good. Is quiet & pleasant in appearance. Works some on ward.

17 Appetite good. Talks in her sleep. Works on ward. No complaints. Nov 18/93 Behavior quiet. Eats well & is pleasant in appearance.

19 Goes walking & riding, also to chapel. Nov 20/93 Eats & sleeps well. Works on ward. No complaints.

28 No change. Nov 28.93 Appetite good. Sleeps well. Clean in habits. Works a little on ward. Worries some a great deal. Wants to go home.

Dec 31 Dec 31/93. Appetite very good. Is usually quietly behaved. Has "crying spells" occasionally & prays a great deal. Works a little on ward. Is clean in habits - (Menstruation absent). -

1894 Jan 15/94 Jan 15/94. No noticeable change. Usually quietly behaved. Habits clean. (Menstruation absent). Jan 31/94. No change.

Feb 24 Feb 22/94. Sleep well, at night. Appetite good. Complains a great deal of headache. At times, works a little in the ward. Attempts to run away, quite frequently. -

" 24 Feb 24/94. This patient was Committed here under the "Law of 1893" Recently declared unconstitutional. She was today, Paid for & Returned under "New Warrant" from Olmsted County. -

Personal and Medical History of Annie Louise Brown.

1894 Mch 7 Transf to Annex April 2 94 Visited by a friend. May 10 94 Appetite good Clean in habits. Is quiet. Sometimes will help with the mending. Sews a very little. Goes riding & walking. Gen health good. June 23.94 Appetite good. Is clean and tidy in habits. Helps on sleeping flat. Has delusions. Goes riding & walking. Gen. health good.

Sept 27 94. Appetite good. Is quiet in behavior. Occasionally works in the laundry or on the sleeping flat. Has had some trouble with her eyes for several days. Goes riding and walking. Gen health good. Jany 30 95. Appetite good. Clean & tidy in habits. Is rather noisy at times. Talks incoherently & has delusions. Gen health good. Goes riding & walking

Mch 16 95. Appetite good. Clean & tidy in habits. Quite noisy at times. Talks incoherently and has delusions. Is troubled a good deal with sore eyes. Gen health good. Goes riding and walking.

June 13 Appetite good. Clean. Quite noisy. Incoherent & has delusions. Gen. health good. Aug 6 Goes walking. No change. Sept Oct & Nov. Appetite good. Clean & tidy. Quiet in behavior. Talks incoherently & has delusions. Always objects to going out of doors. Gen. health good (during Sept had sore eyes)

Dec 30 - Jan 31 Menstr. Jan 24 Appetite good. Clean & tidy in habits - Noisy in behavior. Talks incoherently - Has delusions - General health good. May 23 Appetite good - Clean & tidy in habits: Quite noisy: Rather quarrelsome: Talks incoherently: Subject to sore eyes: General health good: Refused to take out door exercise

1896 Aug. Summary Nurse's Notes by Dr. S.L. Phelps:- Appetite good: Habits clean & tidy: quit healthy good: Quite noisy at times: Demented: Feb 97 Usually sits about quietly. At present eye is red & sore: Quite dull mentally: slightly depressed: Apr 97 no change: July 27 97 Lungs and heart examined: Quit nutrition impaired rather pale: Resp. 25, about normal: no special physical Signs: Heart Sounds normal: no murmurs.

Continued by Dr. R.M. Phelps. Oct 15 97 Patients general condition good: So comparatively quiet: has chronically sore eyes. but They are never very troublesome - Feby 98 Wt 123.# Dec 13 98 Patients condition as shown by intervening notes, is about the same in every way. General health is fairly good. Continued by Dr. R.A. Bibb

1899 Mar. 5 Sept. General health good: appetite good: menses regular: sleeps well: eats: takes out door exercise: Very noisy when mentally disturbed: Scolds & swears & is abusive at times: Nerves tonic: Has many delusions. Aug 8 Wt 125 1/2

Sept 1 - Feb 28, 1900. (Dr Heyerdale) Neat: expresses delusions & talks to herself. Very disagreable at times: Does not converse: Does not sleep well: Takes out door exercise: Jan 1st 1901. Mch 1. Aug 31 1900 (Dr. Linton) Noisy at times: Neat in habits but rather careless in appearance: Does not converse: Has delusions: Appetite good: Sleeps well: General health good: does no work. Apr 9. Menstruated July 20 Vaccinated.

Sept 1 - Nov 30 1900. Appetite good: Bowels regular. Sleeps well: Menstruates regularly: Does no work: Takes out door exercise: Habits dirty: at times very noisy: Quite obstinate Does not converse. Nov. 24. 123 1/2 lbs. Dec 1 - Feb 28, 1901. Appetite good: Usually sleeps well: Takes out door exercise: Takes no interest in work: Talks & scolds & is at times quite noisy Mch 4. Wt. 124 lbs. Mar. 1 - June 1 1901 No change May 30 Wt. 120 #

June to Sept. June 13, July 3, Aug. 28 menstruating, does no work. Sept. 1st. Wt. 116 #.

See Page 184.

Personal and Medical History of Martha A. Johnsrud

GIBERT, FOLAR & CRAMER'S, DAVENPORT, IOWA

Whole No. 3549.
Residence, Pilmington, Houston Co. Minn
Date Admission, 9th November 1893.
Admitted by, Dr. Phelps Hour, 7 PM
How Sent, Thomas Ryan, Jof C, Houston County
Sex, Female
Age, 29 years.
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Housework; father a farmer.
Degree Education, Limited in her own & English language
Profession Religion, Spring Grove Lutheran Church
Habits, Probably good
Nativity, Minnesota (Parents born in Norway).
Physicians Committing, E. B. Johnston and E. A. Rovens
Correspondents, (Father) Ole Johnsrud, Spring Grove, Minn
(Brother) O. H. Johnsrud, " " "
Family Physician D. Jensen, Spring Grove, Minn

No. for Year, 119.
Insane Relatives, none
Cause Exciting, Disappointment in love.
Cause Predisposing, previous attack
Form,
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, not
Date of this Attack, about 1st May 1890
Duration, 3 years & 6 mos
No. of Attack, 2nd
No. of Admissions, 2nd
Age First Attack, 25 years
Time of Leaving, Jan 10th 94
Time in Hospital, 2 mos 1 da.
Result, Unimproved

Ordered discharged from this institution by the Court, April 1st, 1895, because illegally committed.

EXAMINATION ON ADMISSION.

Exd by Dr Linton-Phelps, Nov 11/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Poor
Recent Events, Poor
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Illusive
REASONING POWER:
Ordinary Subjects, Impaired
Own Mental State, Impaired
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Very dull & indifferent in manner.

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS Says "hears voices talking to her"
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Speaks only when asked
Voluble or Reticent, Some question & then answers very reluctantly, hesitatingly.

Personal and Medical History of Martha A. Johnsrud

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 in WEIGHT, 143½ lbs. NUTRITION, Good, but pale.
WOUNDS OR ABNORMALITIES, none
TONGUE, Tremors, none Coatings, pale & flabby Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Good Accommodation, Good
SIGHT, Good
HEARING, Good
COORDINATION, Arms, } Good, unusual tests.
Legs, }
TREMORS, Hands, none Tongue, none
Facial Muscles, General, Nervous in her movements, but no tremor.
REFLEXES, Patellar, Equal — 3 —
Other Reflexes,
ARTICULATION, Hesitating, Hesitating Slurred,
FACIAL EXPRESSION, Dull
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Clean Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Well Poor, Irregular,
PULSE, 64, regular RESP., 16. 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, } Healthy, as far as can determine.
Brothers or Sisters,

Personal and Medical History of Martha H. Johnsrud

ERNEST, FISLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Sheriff's-Deputy George N. Blegrud, attended by Tilda Johnsrud, with the following history. No history of consanguinity or heredity. This is probably 2nd attack. About three(?) years ago she had the 1st attack, which lasted about 9 months; she was sent to this (Rochester) Hospital about Dec 1st 1890 remained here about 4 months; partially cured when she returned home. First symptoms of this attack were manifested about 1st may 1890; she began to walk about the house, without any apparent object in view; and, if asked a question, she would very seldom answer. She would not work and she seemed unable to fasten her mind on any particular work. Would leave home without any reason or without giving a reason, except she imagined she would fare better, when out and away. The disease seems increasing. Is variable; rational periods occur at irregular intervals; but she is hardly rational, at any time. Derangement is now shown on subject of matrimony; weeping, sometimes, a day at a time, because her brothers & sisters are all married and she is not; runs away; violent temper; has delusions & illusions regarding devils, horns & angels; threatening to send her father & mother to H—l. Does not dispose to injure others. Has shown a slight tendency to destroy furniture. Is not suicidal. Previously, had peculiar religious impressions; laughing in Church &c. There is no history of intemperance nor of any severe disease &c. Disappointment in love is the supposed cause of the disease. Has had no treatment outside of Hospital. On personal examination, she is found to suffer from Hysteria. Said she had seen a white horse & black devils & that she was afraid of the "black devils" Appearance & manner were very quiet & reserved. Patient is thought, by some, to have Nymphomania. NOTE. The date of her previous stay, as mentioned above, is somewhat erroneous. Records show that patient was here before from Nov 26/88 to March 27/89", making her first attack about 5 years ago. During that stay, she was very dull & stupid, while here. Habits were occasionally dirty. She was not greatly improved, when taken home. (See Vol 11. p. 120. No 1920).

Nov 9 Nov 9/93. On admission, is in fair physical condition. Has put on lbs. P 76. R 17. Normal Bodily condition clean, Ingurio &c none.

10 Behavior quiet. Does not talk any. Appetite good. Sleep good. Cough none. Bowels unable to state. Complains none.

11 Appetite good. Slept well. Behavior quiet, wandering from place to place on the hall, seems quite indifferent to all & to everything around her. Nov 12/93. Appetite good. Slept well. Is quiet. Nov 13/93 Appetite good. Sleeps well. Is quiet.

14 Appetite good Sleeps well. Is quiet. Nov 15/93 Nothing new to note. Nov 16/93. No change Nov 17/93 No change.

18 No change. Nov 19/93 No change. Nov 20/93 No change. Nov 21/93 Appetite good. Sleeps well. Is quiet. Does not talk at all.

23 Appetite good. Sleeps well. Is quiet. Nov 30. 93 Appetite good. Sleeps well. Is quiet. Wanders from place to place in the hall. Meant. about the 1st.

disch.

Personal and Medical History of

Personal and Medical History of Mary Davis

EBERT, FIDLAR & CRAWDEN, DAVENPORT, IOWA



Whole No. 3553.
Residence, Albert Lea
Date Admission, 11th Novemb
Admitted by, D Kilbourne
How Sent, Ieman Blackmer
Sex, Female
Age, 37
Civil Condition, married
Children, Four
Age Youngest Child, 6 years
Occupation, Housewif
Degree Education, ordinary
Profession Religion, Presbyterian
Habits, Probably good -
Nativity, Mass: (Parents born in England)
Physicians Committing, H. H. Wilcox & A. C. Hodge
Correspondents, Husband address 314 - 9th St. S. E. Rapids. Minn
Family Physcn. D. H. H. Wilcox Albert Lea. Minn

No. for Year, 123.
Insane Relatives, Mother Continuously insane for 10 yrs
Cause Exciting, heredity
Cause Predisposing, heredity
Form,
Accompanying Bodily Disorder, Painful Menstruation
Suicidal or Not, not.
Date of this Attack, November 1892
Duration, about a year
No. of Attack, 3rd probably
No. of Admissions, 1st
Age First Attack, about 32.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exam. Nov 14 93 Dr Benton Phelps

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, Quick
MEMORY:
Past Events, Good
Recent Events, Good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, alert
Correct or Illusive,
REASONING POWER: Seemingly impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Answered all questions but volunteers very little information regarding herself. Says positively she thinks her husband brought her here to beat up.
Put upon Ax Tonic treatment.

EMOTIONAL STATE:
Normal, Calm, Calm but with some uneasiness when addressed
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None determined
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None determined.
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Talk is coherent.
Voluble or Reticent,

Personal and Medical History of Mary Davis

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in. WEIGHT, 133 ℔ NUTRITION, Good
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, None Coatings, Promptness Movement, Prompt
PUPILS, Equality, Equal Size, Normal
Response Light, Normal. Accommodation, Normal
SIGHT, Slightly impaired

Case No. 3553. Mary Davis. File No. 9.
The Law of 1893 having beendeclared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

REFLEXES, Patellar, Eq. 5.
Other Reflexes,
ARTICULATION, Hesitating, Prompt Slurred,
FACIAL EXPRESSION, Rather staring. wild expression
SENSIBILITY,
HEART, Sounds are normal.
LUNGS, Seem in good condition.
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION, Regular
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean Clean, Careless,
BOWELS, Normal, Regular Constipated, Irregular,
APPETITE, Good, Medium 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 died several years ago.
Father or Pat. Relations, Father has poor spells.
Brothers or Sisters, 2 Sisters, healthy, 3 Brothers healthy.

Personal and Medical History of Mary Davis

HERBERT, PUTNAM & CHAMBERS, DAVENPORT, IOWA



Whole No. 3553.

Residence, Albert Lea

Date Admission, 11th Novemb

Admitted by, Dr Kilbourne

How Sent, Herman Blackmer

Sex, Female

Age, 37

Civil Condition, married

Children, four

Age Youngest Child, 6 years

Occupation, Housewife

Degree Education, ordinary

Profession Religion, Presbyterian

Habits, Probably good -

Nativity, Mass: (Parents born in England)

Physicians Committing, A. H. Wilcox & H. G. Wedge

Correspondents, 318 - 9th St. S. E. Duplo. Minn
Husband address

Family Physician, D. H. & Wilcox. Albert Lea. Minn

No. for Year, 123.

Insane Relatives, Mother continuously insane for 10 year

Cause Exciting, heredity

Cause Predisposing, heredity

Form,

Accompanying Bodily Disorder, painful menstuation

Suicidal or Not, not.

First Noticed Attack, November 1892

Time of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

Exam. Nov 14 93 Dr Benton Phelps

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Good

Recent Events, Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, alert

Correct or Illusive,

REASONING POWER: Seemingly impaired

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Answers all question but volunteers very little information regarding herself. Says she started out to find her husband brought her here & left her up.

Put upon Ax Tonic treatment.

EMOTIONAL STATE:

Normal, Calm, Calm but with some uneasiness when addressed

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None determined

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None determined.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Talk is coherent.

Voluble or Reticent,

Personal and Medical History of Mary Davis

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in. WEIGHT, 133 lbs NUTRITION, Good

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, None Coatings, Promptness Movement, Prompt

PUPILS, Equality, Equal Size, Normal

Response Light, Normal. Accommodation, Normal

SIGHT, Slightly impaired

HEARING, Good.

COORDINATION, Arms, Good

Legs, Good

TREMORS, Hands, None Tongue, None

Facial Muscles, none General, None

REFLEXES, Patellar, Eq. 0.

Other Reflexes,

ARTICULATION, Hesitating, Prompt Slurred,

FACIAL EXPRESSION, Rather staring. a wild expression

SENSIBILITY,

HEART, Sounds are normal.

LUNGS, Seem in good condition.

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION, Regular

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean Clean, Careless,

BOWELS, Normal, Regular Constipated, Irregular,

APPETITE, Good, Medium 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 died several years ago.

Father or Pat. Relations, Father has poor spells.

Brothers or Sisters, 2 Sisters, healthy, 3 brothers healthy.

Personal and Medical History of Mary Davis

EBERT, FUCAS & CHAMBERS, DAVENPORT, IOWA.

1893

This patient was brought here by Deputy Sheriff H. C. Mitchell & E. W. Davis, with following history. There is no history of consanguinity, but there is of heredity; mother was enteriously insane for 10 years; no others. This is 3d attack, probably, others occurring in April 1888 and May 1888; duration 3 months. First symptoms of this attack were manifested in November 1892, by unreasonable conduct & delusions. The disease appears to be increasing, but is variable & there are paticular intervals, at time of menstruation. Derangement is now shown by being unreasonable; suspicious mind; torpid, at times; & at other times, morbidly excited. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Before accession of the disease, she was unreasonable during her bad spells (1 C) during all her monthly periods, and, at this time, was irritable when being crossed, or antagonized, in any way. There is no history of any severe disease or injury to head. Ordinary watching & prevention has been employed. Supposed cause of disease is heredity. Has had no medical treatment.

On personal examination, She has a wild, restless, suspicious eye; aimless, restless movements. Patient rather refuses to talk, but says "She is not sick"; says "She is as well as any one". — Refused to submit to any examination. Is sullen & contrary. Appearance, rather anaemic; — Manner, wild & restless. From other sources, it is learned that patient has never been really sane since the first attack 5 years ago; but a large part of the time, She has been quiet & easy to get along with. ——

Nov 11 Nov 11/93. Patient, on admission, is in apparently good physical condition. Was put on A. East. —

" " P. 77. R. 18. Temp. 99 2. Bodily condition clean. No injuries.

" 12 Behavior quiet. Didn't give any trouble whatever. Talks somewhat silly. Appetite fair. No cough. Bowels regular. No injuries &c. P. 76. R. 18. Temp. 99.

" 13 Appetite poor. Restless at night. Behavior quiet. Nov 14/93. Appetite poor. Rested better at night than before. Seems to be weak minded. Nov 15/93. Behavior quiet. Often laughs to herself. Helped a little with the dinning room work. Does not eat much. Pleasant in appearance. No complaints. Nov 17/93. Appetite poor. Sleeps well. Behavior quiet. Always asking for something to do. Nov 18/93. About the same. Nov 19/93. Appetite somewhat better. Goes out walking. Has to Chapel. Nov 20/93 Eats & sleeps well. Is quiet & pleasant in appearance. Works some on ward. Nov 21/93. About the same. Recom. to A. 2 E. Nov 22/93. Appetite fair. Talks very little. Helps some on ward. Seems a little confused. Not able to think much. Bowels regular. No cough. Has not complained. Nov 23/93. Appetite fair. Does not talk much. No cough. Bowels regular. Complains of toothache. Nov 24/93. Appetite good. No change in any particular that I can see.

Nov 25 Appetite good. Cleanly habits. Works on ward some. No cough. Bowels reg. Quiet in behavior.

" 30 Appetite good. Sleep generally good. No cough. Bowels regular. Has complained of toothache last week.

Dec 1 Quiet in behavior. Dec 22/93. Has been sick in bed, the past 5 days. Has had sore throat, but is now recovered. Sleeps well at night. Appetite fair. Menst. about the 18th. Dec 31/93. Keeps about the same. Inclined to be stubborn, at times; but, generally, very tractable.

1894

Jan 15/94 Jan 15/94. No very material change in patients condition. Jan 31/94. Sleeps well, at night. Appetite fair; bowels regular. No cough noticed, but she complains occasionally of sore throat. Very quiet and lady-like in behavior, most of the time; only a little stubborn about bathing. Menstruated about the 18th. Works a little in the ward.

Feby 15/94 Feby 15/94. No change to note. Lives along quietly & seemingly contented here. Feb 20/94. This patient was committed here under the Law, recently declared unconstitutional. She was, today, taken out and

Personal and Medical History of Mary S. Davis.

1894 cont'd

Feb 20 Returned under new "Commitment Papers" from Olmsted County. Put on A. East.

Mch 26/94. Appetite poor. Sleep good generally. Behavior strange. Given to talking in an incoherent way. Very stubborn at times. Complains of headache. Ordinis Menstruated about the 23d April 6/94. Removed to B. 2 May 1/94. Left Utd. May 7/94. Appetite good. Sleeps well. Tidy in her personal appearance. Clean in habits. Is quiet &

May 22/94 Appetite poor. Sleeps well. Has delusions. Is very cross & irritable at times. Refused her medicine.

June 1/94 Very cross & irritable. Removed to B. 2 June 30/94 Very cross & have to have her own about everything

July 6 " Has been very quiet & nice the past 6 days. July 6/94 Very cross. July 13. Fighting & very irritable all day.

" 14 " Has been quite violent in behavior all day. July 16/94 More quiet today. Transf. to C. 1 July 31/94 Quiet most of the time. Appetite good. Sleeps well. Cross for herself. Habits clean. Works on the ward some. Bowels quite regular. Violent at times. Aug 31/94 No change. Sept. 27/94. Appetite poor. Noisy at times also destructive & violent Sept 19 Left arm bruised in a struggle while bathing. Habits clean. Goes walking. Bowels constipated. Oct 30/94 Appetite poor. Noisy at times. Complains of sore throat. Bowels constipated. Nov 30/94. Very much disturbed at the present time. Noisy & violent. Appetite quite good. Habits clean. Bowels irregular. Jany 25/95 No change. Transf. to B. 2

Jany 30/95. Appetite poor. Transf. to C. 1. Appetite poor. Habits clean. Noisy at times during day & night. Imp. Health. Bowels constipated. Feb 26/95. Appetite quite good. Quiet most of the time. Sleeps well. Habits clean. Works on ward some. Mch 30/95. Appetite quite poor. Habits clean. Works in sewing room part of the time. Also on wood. Is violent occasionally. Bowels usually constipated. Apr 30/95 Appetite poor. Habits clean. Sleeps quite well usually. Always very cross & violent during menstruation. Bowels constipated.

May 23/95 Appetite good. Sleeps well. Habits clean. Works in sewing room. Bowels constipated.

June 30/95. Most part of the time. Appetite quite good. Habits clean. Usually Bowels regular. July 31/95

July 30 " Patients appetite poor. Noisy & rude, violent at times. Bowels constipated. Habits clean usually.

Sept. Oct. Nov. Eats & sleeps well. Habits clean. Goes riding & walking. Bowels usually constipated.

1896 Violent at times. Works in sewing room some of time. Dec 30 Appetite good. Sleeps well.

Habits clean. Works in sewing room. Bowels regular.

Mar 30 Works in sewing room: Habits usually clean: Appetite poor: Sleeps well most of time. Goes riding & walking. Apr & May No change in patient.

July Unnecessary Nurses Notes by Dr. E. L. Phelps: Appetite usually good: clean: goes to sewing room: at times violent. Nov 96 Eats & sleeps well: no change. Jan 97 Appetite variable: good at present: has regular spells of violence, when she is very filthy in habits.

1897 Incoherent & noisy in talk: quiet times are much shorter, lasting only about ten days:

May No change: Aug 97 Quiet health remains good: no mental change.

Continued by RM. Phelps. Sept 20 Appetite not very good: but general health fair: Seems to be quiet & rather dull. Feb 98 Wt. 141 lbs. Works some in sewing room. July 20 Seems to be becoming somewhat more violent. Is not ordinarily so but once in a while is irritated & becomes so. Jan 21 99 Trans. to B. 3 Seems to be getting along more quietly. (Mar. to Dec.) Cont'd by Dr. R. A. Bell) Gen'l health & appetite good. Bowels & menstr'n regular. Sleeps well: usually neat: sometimes untidy & careless in appearance: takes out door exercise: quite disturbed at times, talking & singing & quite stubborn & disagreeable: incoherent. works

(see p. 376)

Personal and Medical History of Lizzie Husser

BARRETT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3556.
Residence, Mt. Vernon, Linn Co
Date Admission, 16th November 189
Admitted by, Dr. Phelps Hour, 7
How Sent, H.L. Buck, Jf. P, Vin
Sex, Female
Age, 21 years old
Civil Condition, single
Children,
Age Youngest Child,
Occupation, Girl in family (
Degree Education, fairly good (7
Profession Religion, Catholic
Habits, probably good.
Nativity, Switzerland; (parents also born there).
Physicians Committing, D.A. Stewart & Franklin Stapler
Correspondents, Fanny Husser. Minneska. Minn
Family Physician Dr. O'Connor. Vinona (?)

No. for Year, 126.
Insane Relatives, none
Cause Exciting, Epilepsy
Cause Predisposing, previous & continuous attacks
Form, Epileptic demented.
Accompanying Bodily Disorder, Epilepsy
Suicidal or Not, Threatens to jump in the river.
Date of this Attack, at age of 13 years
Duration, Continuous since that time
No. of Attack, many probably
No. of Admissions, 2nd
Age First Attack, 13 years
Time of Leaving, January 12. 1895.
Time in Hospital, 1 year 1 month. 27 days.
Result, Died.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Sluggish.
Quick or Sluggish,
MEMORY: Impaired.
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY: Dull.
Alert or Dull,
Correct or Illusive,
REASONING POWER: Impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Calm usually.
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None determined
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent, Reticent and dull.

Personal and Medical History of Lizzie Husser

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Good
WOUNDS OR ABNORMALITIES, Epilepsy.
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Size,
Response Light, Accommodation,

Lizzie Husser.
Case No. 3556 Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

Facial Muscles, General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Dull and dreamy.
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Good. Medium, Poor,
SLEEP, Good, Sleeps well usually. 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 Lizzie Husser

GIBBET, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3556.

Residence, Mt. Vernon, Winona Co

Date Admission, 16th November 189

Admitted by, Dr. Phelps Hour, 7

How Sent, H.L. Buck, Jof P, Win

Sex, Female

Age, 21 years old

Civil Condition, single

Children, —

Age Youngest Child, —

Occupation, Girl in family (

Degree Education, fairly good (7

Profession Religion, Catholic

Habits, probably good.

Nativity, Switzerland; (parents also born there). —

Physicians Committing, D.F. Stewart & Franklin Stapler

Correspondents, Fanny Husser, Minneska, Minn

Family Physician Dr. Obrien Winona (?)

No. for Year, 126.

Insane Relatives, none

Cause Exciting, Epilepsy

Cause Predisposing, previous & continuous attacks

Form, Epileptic dementia

Accompanying Bodily Disorder, Epilepsy

Age First Attack, 13 years

Time of Leaving, January 12. 1895

Time in Hospital, 1 year 1 month. 27 days.

Result, Died.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Sluggish

Quick or Sluggish,

MEMORY: Impaired.

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY: Dull.

Alert or Dull,

Correct or Illusive,

REASONING POWER: Impaired

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm, Calm generally.

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None determined

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent, Reticent and dull.

Personal and Medical History of Lizzie Husser

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Good

WOUNDS OR ABNORMALITIES, Epilepsy.

TONGUE, Tremors, Coatings, Promptness Movement,

PUPILS, Equality, Size,

Response Light, Accommodation,

SIGHT, Good.

HEARING, Good.

COORDINATION, Arms, Good

Legs,

TREMORS, Hands, Tongue,

Facial Muscles, General,

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Dull and dreamy.

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Good. Medium, Poor,

SLEEP, Good, Sleeps well generally. 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 **Lizzie Husser**

EBERT, PICLAR & CHAMBERS, DAVENPORT, IOWA.

1893

This patient was brought here by Sheriff Gay, attended by her mother, with the following history of case. There is no history of consanguinity or heredity. She has been an Epileptic since 13 years of age. The disease seems increasing; is variable & there are natural intervals, but not regular; has attacks of Epilepsy & dementia & violent manner. Threatened to strike her mother. Has threatened suicide & to jump in the river. Propensity now active. Is destructive of clothing. There is no history of intemperance. Cause of the disease is Epilepsy. She has been under care of Physicians & has also had Hospital treatment (here). — On personal examination, there is found evidence of personal injury on the head. She said she was mad Enough to kill her brothers, last night, when they attempted to take the axe from her and confine her. Appearance & manner, Stolid.

Nov 16 Nov 16/93. On admission, patient is in fair physical condition. Has pustules 6ᶜ. NOTE. The Records show that patient was at this hospital before from Sept 19/91 to April 6/92. During her then stay, was, a good deal of the time, in a State of great mental confusion, bordering upon the condition "Epileptica", was allowed to go home with her brother, although it was thought it would be difficult to take care of her. (See Vol 17. page 321. No 2818). P. 90. R. 22. T. 99.4 Bodily condition: Her face, arms & hips were bruised and was very dirty.

17 Behavior Had crying spells in morning but was real quiet the rest of the day. Has delusions, says someone is going to kill her. Refused breakfast but ate dinner & supper. Sleep, quite good. Cough none. Bowels regular. Complains of headache. P. 90 R. 22 T. 97.4

18 Seems very stupid. Throws herself on floor & rolls all over. Talk is very incoherent.

19 Refused dinner. Very stupid lying on bench almost all day. Will not answer when spoken to.

20 Acts very much as if she had a fit during night. Tongue is also bitten. Is very Good.

21 Acts somewhat better. Very quiet. Nov 22/93. The same. Nov 23/93. Walks up & down most of the time. Nov 24/93. Seems much better. Helped a little in dining room. Nov 25/93 Very nice.

22/27 Works some in dining room. Nov 26/93. The same. Nov 27/93. Talks incoherently all the

27/28 time. Quarrels with ladies, also strikes them. Nov 28/93 Behavior about the same

28/30 but is much worse. Also walks up & down. Nov 29/93 Some quieter. Nov 30/93 Helped in Dining

30 room to day. Is not so quiet. Was fighting with ladies & tearing up all the things.

Appetite good. Sleep good. Bowels regular. Behavior quiet. Clean in habits. Has been very troublesome of late, tears up the rooms also takes up carpets and other things about ward. Helps at times in dining room.

Dec 10/93 Dec 10/93. Keeps about the same. Dec 31/93. Appetite good. Bowels regular. Behavior is stupid & dull. Has to be

1894 dressed. Was recently struck by one of the patients, receiving a black eye. Rests and sleeps quite well, at night.

Jan 5/94 Jan 5/94. Had a fit today; bruised her forhead & got a black eye. Jan 18/94. Been fighting all day and very noisy.

" 19/94 Jan 19/94. Very noisy and quarreling with the other patients. Jan 31/94. Bowels regular. Appetite good. Does not sleep very well, of late. Is not quite so stupid as she was last month. Clean in her habits. —

Feb 28 Feb 28/94. Is quietly behaved. Is now quite dull & stupid. Otherwise no change.

March 10 March 10/94. Quarrelsome & fighting with the other patients. Was put in room, but had to be held for 2 hours or so, as

" 11 she was throwing herself on the floor and pounding her head against the wall. Had to be afterward put in restraint

" 12 as she was so violent, and to keep her from injuring herself. March 11/94. Is up & out in the hall. Very stupid.

March 12/94. Has been badly behaved and violent, all day; quarrelling with the other patients. Is also very restless and excited this evening. This patient was committed here under the "Law of 1893"

Personal and Medical History of **Lizzie Husser**

1894 Court Ord

March 14. recently declared unconstitutional. She was today, Taken out and Returned under a "new warrant" from Olmsted County. 0 p.m. 94 Appetite good Behavior stupid. Dirty in habits Bowels reg. Throwing herself on floor & pounding herself. Put in restraint at 3 PM Taken out at 8³⁰ A.M. May 31. 94 Untidy in habits Appetite good. June 1 94 Appetite fairly good. Sleeps well.

July 94 Appetite fair. Sleeps well. Is untidy at times & very stupid. Does not speak English. Aug 1 94 Transfer to C² Had several hard fits. In restraint 24 hrs. No change mentally or physically. Sept 1 94 Appetite good. Sleeps very little. Does not stay in bed at night. Goes out walking. Untidy in personal appearance.

Sept 26 94 Visited by relatives Sept 29 94 Awoke 4 hrs during night. Very restless. Had one fit

Oct 1 94 Behavior noisy at times. Untidy in habits. Goes out walking. Does no work. Is very restless at night. Bowels constipated. Oct 2 94 Had one hard fit. Does not stay in bed at night. Nov 30 94 Appetite good. Usually restless at night. Untidy in habits. Goes out riding. Has had several fits during month. Bowels constipated.

Dec 10 94 Appetite fairly good. Sleeps well. Behavior is very restless. noisy at times. Does not work any. Untidy in habits. Goes out walking and riding. Bowels regular. Dec 6 94. Had 6 hard fits. January 95 Had 7 hard fits. Appetite fair. Is very restless most of the time. Untidy in habits. Goes out riding. Bowels regular.

1895 January 12 95. Patient had a very hard fit. Died 1 o'clock A.M.

Died.

January 12, 1895 at 1 o'clock A.M.

Personal and Medical History of Fannie Barnhard

ASHERY, FOLAR & SCHAMBERS, DAVENPORT, IOWA



Whole No. 3559.
Residence, Owatonna,
Date Admission, 20th November
Admitted by, Dr Kilbourne Hour
How Sent, N. B. Chadwick, Jr
Sex, Female
Age, 9 years
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, — only a child —
Degree Education, none
Profession Religion, not a church member
Habits, not stated
Nativity, Steele County (Parents also born there).
Physicians Committing, E. E. Bigelow & A. B. Stewart
Correspondents, none given in papers
Family Physcn. A. B. Stewart, Owatonna.

. for Year, 129.
ane Relatives, None (Father an Inebriate)
use Exciting, not known
use Predisposing, not known
rm,
companying Bodily Disorder, Epilepsy
icidal or Not, not
te of this Attack, when a baby
uration, all her life
o. of Attack, Has had several
o. of Admissions, 1st
ge First Attack, when a baby.
Time of Leaving, Nov. 14' 95
Time in Hospital, 1 yr. 11 mo 24 da.
Result, Unimp. 7/5/96
(Went to Faribault State School.)

EXAMINATION ON ADMISSION.

Ex by Dr Leyton Phelps Nov 23. 93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Sluggish, Imbecile
Quick or Sluggish,
MEMORY: Much impaired
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull very
Correct or Illusive,
REASONING POWER: Almost nil.
Ordinary Subjects,
Own Mental State, Childish.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Generally quiet.
Indifferent,
Exalted,
Depressed,
DELUSIONS: None determined.
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,
Talks very little. Has defective speech. Impediment very childish in manner. Comprehends very little.

Personal and Medical History of Fannie Barnhard

MISSION.—(Continued.)

TICS.

ON, Good

ment,

OFFICE OF
A. B. STEWART, M. D.
ROOMS 1 AND 2 MOORE BLOCK

Case No. 3559. Fannie Barnhard. Vol. 24.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

Dear Doctor.

The Girl, Fanny Barnhart has been in the State School here Since about June first. Before that She had been having from one to four or five epileptic fits daily. Since then She has had but few, perhaps Six or eight. During the time She has been taking Bromides. Some of the time the Patassium alone, part of the time Pot. Brom. + Sod. Bro. with Liq. Pot. Arsen.

The number of attacks have been greatly lessened by the Medicine.

Yours Truly
A. B. Stewart.

very much

Careless,
Irregular,

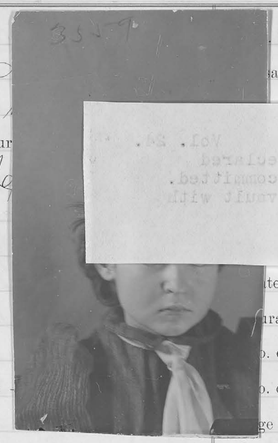
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, very poorly, has fits. Poor, Irregular,
PULSE, 80 Regular. RESP., 19 TEMP.,
CRANIAL MEASUREMENTS,

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 Fannie Barnhard

EBERT, PUSLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3559. for Year, 129.

Residence, Owatonna, [illegible]

Date Admission, 20th November [illegible]

Admitted by, Dr Kilbourne Hour [illegible]

How Sent, H. B. Chadwick, Je [illegible]

Sex, Female

Age, 9 years

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, — only a child

Degree Education, none

Profession Religion, not a church member

Habits, not stated

Nativity, Steele County (Parents also born there).

Physicians Committing, E. E. Bigelow & A. B. Stewart

Correspondents, none given in "papers"

Family Physcn. A. B. Stewart, Owatonna.

[illegible] Relatives, None (Father an Inebriate)

[illegible] Known

[illegible] te of this Attack, when a baby

[illegible] ration, all her life.

[illegible] o. of Attack, Has had several

[illegible] o. of Admissions, 1st

[illegible] ge First Attack, When a baby.

Time of Leaving, Nov. 14' 95

Time in Hospital, 1 yr. 11 mo 24 da.

Result, Unimp. 11/5/96

(Went to Faribault State School.)

EXAMINATION ON ADMISSION.

Ex by Dr Leyton Phelps Nov 13. 95. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Sluggish, Imbecile

Quick or Sluggish,

MEMORY: Much impaired

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull very

Correct or Illusive,

REASONING POWER: almost nil.

Ordinary Subjects,

Own Mental State, childish.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm, Generally quiet.

Indifferent,

Exalted,

Depressed,

DELUSIONS: None determined.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

Talks very little. Has defective speech. Impediment very childish in manner. Comprehends very little.

Personal and Medical History of Fannie Barnhard

OFFICE OF
A. B. STEWART, M. D.
ROOMS 1 AND 2 MOORE BLOCK

Owatonna, Minn., Nov. 20th 1895

Dr. F. Kilbourne M.D.

Dear Doctor,

The girl, Fanny Barnhart has been in the State School here since about June first. Before that she had been having from one to four or five epileptic fits daily. Since then she has had but few, perhaps six or eight. During the time she has been taking Bromides. Some of the time the patassium alone, part of the time Pot. Brom. + Gelsem. Bro. with Liq. Pot. Arsen.

The number of attacks have been greatly lessened by the medicine.

Yours Truly
A. B. Stewart.

MISSION.—(Continued.)

TICS.

NUTRITION, Good

Promptness Movement,

ion, Fair

Very much

Careless,

Irregular,

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, very poorly, has fits. Poor, Irregular,

PULSE, 80 Regular. RESP., 19 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

GIBBATT, PIDLAR & SHAMBERS, DAVENPORT, IOWA

Whole No. 3559.

Residence, Owatonna,

Date Admission, 20th Novembe

Admitted by, Dr Kilbourne Hour

How Sent, H. B. Chadwick, Jo

Sex, Female

Age, 9 years

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, — only a child

Degree Education, none

Profession Religion, not a church me

Habits, not stated

Nativity, Steele County (parents also

Physicians Committing, E. E. Bigelow

Correspondents, none given in pa

Family Physcn. H. B. Stewart, O



EXAMI

Ex by Dr Lyndon Phelps Nov 23.

MENTAL ACTIVITY:

Clear or Confused, Sluggish,

Quick or Sluggish,

MEMORY: Much impaired

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull very

Correct or Illusive,

REASONING POWER: almost nil.

Ordinary Subjects,

Own Mental State, childish.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

Talks very little. Has defective speech - Impediment very childish in manner. Comprehends very little.

Personal and Medical History of Fannie Barnhard

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 4 ft 8 inch. WEIGHT, 78 lb NUTRITION, Good.

WOUNDS OR ABNORMALITIES, None.

TONGUE, Tremors, Coatings, Heavily coated Promptness Movement,

PUPILS, Equality, Equal Size,

Response Light, normal Accommodation, Good

SIGHT, Seems good.

HEARING, Good.

COORDINATION, Arms, Impaired. Jerky movements

Legs,

TREMORS, Hands, Jerky movements. Tongue,

Facial Muscles, General,

REFLEXES, Patellar, 0

Other Reflexes, absent in both.

ARTICULATION, Hesitating, Slurred, very much

FACIAL EXPRESSION, very childlike, pleasant

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Seem in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, clean Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, very poorly, has fits. Poor, Irregular,

PULSE, 80 Regular. RESP., 19 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 Fannie Barnhard

EBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 This patient was received here at the hands of Sheriff Barnard, attended by Miss Barnard. with the following history of case. There is no history of consanguinity or heredity. This child comes from the Hospital at the State School. She is an Epileptic, has had many attacks, each one lasting about 10 minutes. First symptoms of disease were manifested when a baby. Attacks have diminished by treatment; (See attached letter for particulars of same). Her mind is now affected by this Epilepsy. She is not disposed to injure others, nor suicidal, nor filthy nor destructive. Father was an inebriate. Cause of disease is not known. On personal examination. She is very nervous & constantly talking. — — — —

Nov 20 Nov 20 93. Patient is in apparently good physical condition. Wasfirst at Al E. P. 74 R. 18 T. 98.

" Bodily condition: clean, no bruises except one scar on left arm.

21 Quiet & playful. Talk sensible. Appetite good. Sleep. good, had one fit during night. Cough: some. Bowels regular. No injuries P. 74 R. 18. T. 98.

22 Appetite good. Had 2 fits in the night.

23 Eats well. So quiet & playful. Had one fit during the night.

24 Appetite good. Sleeps well. Still coughs.

25 Appetite good. Sleeps well. Was not known to have any fits.

26. Eats & sleeps well. Is quiet & playful. No fits. Still coughs some.

27 About the same.

28 Eats well. Had 2 fits.

29 About the same. Had one fit.

30. Appetite good. Behavior quiet. Had fits.

Dec 1 Had several fits in the night.

2. Eats & sleeps well. Had fits. Is somewhat stupid for a short time after having a fit.

3 Is quite talkative & playful. Still coughs some.

4 About the same. Had five or six fits during the night.

30 Dec 30/93. Appetite good. Behavior quiet: is playful. Habits clean. Does not seem to have as many fits as she had the first 2 weeks. Makes no complaints. Seems quite contented here. —

1894 Jan 10/23 Jan 10/94. Keeps about as usual. Jan 22/94. Had one convulsion today. Jan 23/94. One fit, today. -

" 31 Jan 31/94. Is always quietly behaved. Was known to have had only 2 fits during the month. Does not change any.

Feb 15/28 Feb 15/94. No fits reported since Jany 23d last. Feb 28/94 - Mind seems to wander at times - pays no attention when spoken to. Otherwise no material change. Habits are clean & neat. In good health, for her. -

Mar 2 March 2/94. Patient was committed here under the "Law of 1893" recently declared unconstitutional. She was, today, Taken out and Returned under "new Warrant" from Olmsted County.

Mch 17 94. Had 2 fits. Mch 18 94 Had one fit. Mch 19 94 Had fits. Mch 20 94 Had fits. Mch 21 94 Had fits. Mch 22 94 Had fits Mch 29. 94 Appetite good. Sleeps well Clean in habits. Is very talkative. Has little red blotches on her body April 24 " About the same. Trans to C. H. May 22 94 Had 1 fit. May 23 94 Had 3 fits. Had fits on 25. 26. 27. 28 29. On May 30 Had 7 hard fits went to bed May 31. 94. Had fits all day. Had 4, 3rd June 1 94 Still in bed. Had seven fits all day June 2. 94 In bed had 7 fits June 7. 94 Out of bed heard Appetite poor. June 28. 94 Appetite fair. Habits clean Has fits. Removed to A. H. July 10. 94 Appetite good Bowels reg. Habits clean July 20 94. Had quite a hard fit this morning. Appetite good Bowels reg. July 31. 94 Had 2 fits today.

Personal and Medical History of Fannie Barnhard.

July 31 94 Appetite good Bowels regular Aug. 31 94. General health good. Has quite a number of fits. Behavior is some better of late. Sept 30 94 Is very hard to control at times Gen health good Does not have many fits.

Oct 15 94. Appetite very good Bowels regular Sleeps well Has not had any fits this month. Is quite noisy at times Goes walking and riding Oct 28 94. Appetite good Bowels regular. Has been having a number of fits of late. Trans to C. H. Nov 30 94 Appetite good Sleeps well Has not had any fits of late Goes out walking and riding Bowels regular.

Dec 1 94. No change. Jany 28 95 No change. Feb 19 95 Bowels constipated. Appetite good Had no fits

Febr 25 95. Appetite good Bowels regular. Sleeps well. Mch 8 95 Bowels reg: Appetite fairly good Goes out walking and riding. Mch 10 95 Had a hard fit. Apr 12. 95 Has a cough. Appetite good Does not sleep well May 15 95 Bowels constipated Appetite good sleeps well Gen health good Tidy in habits. Goes walking and riding. May 27. 95 Had 2nd hard fits quite

June 8 Appetite fair. Sleeps good. Quiet. Works in dining room. Goes walking & riding. Bowels usually constipated

June 14 Had fit during night July 3 Appetite good. Sleeps well. Had one fit during month.

Aug 14 Four had fits during night. Aug 15 Hypo. Nitro Glycerine. Aug 31 Appetite good. Sleeps well. Behavior quiet. Sept 8 Appetite fairly good. Sleeps well. Quite in behavior. Goes riding & walking. Bowels quite regular. Gen. Health good. Had two fits during month.

Oct 30 Appetite good. Sleeps fairly well. Works in dining room. Had no fits during month.

Nov 11 In seclusion 1/2 hour. Nov 14 Taken to Faribault by agent of State School Has been in Fair Health of late.

Transferred to Faribault. Nov. 14' 95.

Personal and Medical History of Carolina Person

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3561.

Residence, 1778 Minnehaha [illegible]

Date Admission, 22nd November

Admitted by, D. Phelps Hour,

How Sent, John B. Olivia, Jof

Sex, Female

Age, 36 years

Civil Condition, married

Children, 6

Age Youngest Child, 8 mos.

Occupation, Housewife / Mus

Degree Education, Lutheran Presb

Profession Religion, Lutheran

Habits, not intemperate

Nativity, Sweden, (Parents also born there).

Physicians Committing, Geo. F. Hanley M.D. A. Macdonald

Correspondents, Husband Edward Person, 1778 Minnehaha Ave.

No. for Year, 1314

Insane Relatives, None

Cause Exciting, Ill-health

Cause Predisposing, not stated

Form,

Accompanying Bodily Disorder, has a temperature of 100 ° F.

Suicidal or Not, Attempted it, by carbolic Acid.

Date of this Attack, last April

Duration, about 7 months

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 35.

Time of Leaving, Feb. 19th '94

Time in Hospital, 2 mos. 27 ds,

Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Ex. Nov 23/93 by Dr Linton Phelps

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused.

Quick or Sluggish, Sluggish

MEMORY: Seems good

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER: Impaired

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Headache a good deal for past year. Talks rationally & well. Thinks her mind & nerves are weak. Says is willing to stay here & be treated.

EMOTIONAL STATE:

Normal, Calm, Calm

Indifferent,

Exalted,

Depressed,

DELUSIONS: Seems to have many.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Says devils talk to her at night.

ILLUSIONS:

CONVERSATION: Partly coherent

Coherent or Incoherent,

Voluble or Reticent,

answers all questions readily.

Personal and Medical History of Carolina Person

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 5" WEIGHT, 146 lbs NUTRITION, Good

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Coatings, Heavily coated at edges & at Promptness Movement,

PUPILS, Equality, Size, normal

Response Light, Good. Accommodation, Good

SIGHT, Good.

HEARING, Good

COORDINATION, Arms, Impaired.

Legs,

TREMORS, Hands, Considerable fine Tongue,

Facial Muscles, General, Some

REFLEXES, Patellar, uncertain.

Other Reflexes,

ARTICULATION, Hesitating, Quite prompt Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Seem in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Poor Medium, Poor,

SLEEP, Good, Very poor Poor, Irregular,

PULSE, 84 Regular RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, } Healthy

Father or Pat. Relations, }

Brothers or Sisters, Sisters healthy.

Personal and Medical History of Carolina Person.

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Deputy Sheriff Haas, attended by Mr Rydberg, with the following history of case. No history of consanguinity or heredity. This is 1st attack, symptoms appearing last April: gradually growing worse, (nervous); disease seems increasing. Is not variable; no rational intervals. Since the last 4 days, she is violent at night. Thought she would go to hell. Is not disposed to injure others. Has attempted suicide, by Carbolic acid. Propensity now active. Is not filthy or destructive. There is no history of intemperance. She now has a Temperature of 100° F. Has been under personal restraint at home; held by men. Cause of disease is ill-health. Operation has been performed on perineum; effect bad. On personal examination, at first, refused to say anything; "thinks she belongs to the devil"; said the above. Remained quiet. Appearance & manner, those of an insane person. Other facts are, that She had to be continually watched &, at night, to be held. Also that she attempted to commit suicide.

Nov 22 Nov 23/93. On admission, is in fair condition. Has put on B[r].

Bodily Condition: No bruises, Rash broken out on her back Not very dirty.

23 Very quiet most of the day. Had to be undressed for bed & will not talk. Says God has forgotten her & that she does not care to live. Appetite very poor, ate but little. Slept 1 hr. Out of bed at 11 P.M. pounding door, quite noisy 1 hr. Bowels moved. P. 96. R. 20. Took any thing for the dinner & supper, has taken her med to day, otherwise the same. Slept 3 hrs awoke out of bed 11 P.M. Pounding door. Seemed much frightened. (masturbating)

24 The same.

25 The same. Restless & awake most of night. Slept 2 hrs.

26 The same. Restless sitting up in bed. Slept 1 hr.

27 The same. Rested quite well Slept 3 hrs.

28 The same. Restless and awake. Slept 1 hr.

29 The same. Rested quite well. Slept 4 hrs this morning

30 The same. Restless and awake. Slept 1 1/2 hrs.

Dec 1 The same. Slept 1 hr.

2 The same Rested quite well. Slept 3 1/2 hrs.

3 The same Slept 4 hrs.

4 The same Rested well.

5 Appetite fair Quiet most of the time Crying about home. Rested well

6 The same. Rested well. Dec 12 93 Appetite fair. Clean in habits. Quiet in behavior for past few days has been worrying about home. Is very good help in the dining room. Dec 29 93 Out of bed pounding door at 12 a m, Crying 1 hr wanting her children, slept 2 hrs. Dec 14 93 Out of bed, noisy 3 hrs, crying & talking at 2 a m Dec 15 93 Visited by sister, husband & enjoyed their visit. Dec 16 93 Awoke at 12 a m Out of bed Crying 1 hr. Dec 18 93 Crying about home most of the day. Dec 31 93. About the same Jany 1 94 Visited by sister. Jany 5 94 Out of bed, twice out on the hall. Asked to go home. Was quite noisy, restless 3 hrs. Jany 12 94 Very much depressed. Appetite very poor. Has taken very little nourishment to day Jany 14 94 Refused nourishment. Jany 28 94 Out of bed, out on hall at 12 M. Crying & wanting to go home. Restless 2 A.M. Jany 31 94 Appetite fair, but will not feed herself, has to be spoonfed. Habits clean. Worries about home & children all the time. Febry 4 94 Restless out in hall several times, slept 3 hrs Febry 8 94 Slept 3 1/2 hrs.

February 19 1894 Went home.

Personal and Medical History of Mary Davis

From p. 314

1899 in dining room. Nov 1 Face badly swollen from toothache. Nov 13 3 teeth extracted: much pus escaped & swelling subsided. Nov 5 Fell while getting out of bed & sprained left foot slightly. Aug 25 & Sept 26 Fought nurses in seclusion

Aug 26 Visited by several friends. Sept 1 - Feb 28 1900 Dr. Heyerdahl) Dirty in habits: Appetite good. Quite stubborn at times: Sleeps well. Bowels regular: Jan 13 Wt. 163 1/2 #.

Mch 1 - Nov 30 1900. General health good: untidy: very disagreable at times: Assists in dining room: Talks incoherently. Takes out door exercise. Mch 9 Two teeth & Two roots extracted. Apr 6 Visited by sister: Menstruates regularly. June 6 Refused to assist with work very irritable & profane. July 21 Vaccinated: Sept 25 Fought nurses this morning: assists in employés dining room: Mental condition seems much worse: appetite good. Takes out door exercise: Nov 26 Wt. 146.

Dec. Feb 28 1901. No change. Neat. at times violent Feb 25 Wt. 149 #.

Mar. to June 1901 May 28 visited by lady friends, no change in general condition. May 30 Wt. 157 #. June to Sept. Patients mental and physical health remains unchanged. Aug 31 Wt. 141 1/2 #. Sept. to Dec. General health good, untidy in habits, does some work on the ward Nov. 25 Wt. 148 #.

To Feb. 1, 1903 General health good: menstruates regularly: bowels regular: eats and sleeps well: takes out door exercise: at her best assists with the ward work: is usually quiet: subject to attacks of some violence during which she is cross and irritable. Nov. 29th, Wt 142 #.

Personal and Medical History of Golda Reider

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3566.

Residence, 854 Gauthier St. St. Paul

Date Admission, 24th November 1893.

Admitted by, Dr. Phelps Hour, 7 PM

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

Sex, Female

Age, 45 years

Civil Condition, married

Children, 7

Age Youngest Child, 10 years

Occupation, Housewife (Husband a furrier).

Degree Education, Limited to reading & writing.

Profession Religion, Jewish Church

Habits, no history of intemperance

Nativity, Germany (Prussia); Parents also born there.

Physicians Committing, Geo. J. Stanley & A.B. Ancker.

Correspondents, (husband) ~~Abraham~~ Reider ~~854 Gauthier St.~~
(Step-daughter) Mary Reider ~~854 Gauthier~~ "

No. for Year, 136.

Insane Relatives, not known

Cause Exciting, probably bad treatment, poverty & neglect.

Cause Predisposing, not stated (probably prev. attk)

Form,

Accompanying Bodily Disorder, (always sick in old Country).

Suicidal or Not, not.

Date of this Attack, no definite history obtained

Duration, probably some time

No. of Attack, not known

No. of Admissions, 1st

Age First Attack, not given

Time of Leaving, Sept. 3. 1894

Time in Hospital, 9 months 10 days.

Result, Died. – Dysentery

346. Minnesota St

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 Golda Reider

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,

TREMORS, Hands, Face, Legs,

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE.

Case No. 3566. Golda Reider. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

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 Golda Reider

EUBERT, FIDLAR & CHANDLER, DAVENPORT, IOWA

Whole No. 3566.

Residence, 854 Gauthier St. St Paul

Date Admission, 24th November 1893.

Admitted by, D. Phelps Hour, 7 PM

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

Sex, Female

Age, 45 years

Civil Condition, married

Children, 2

Age Youngest Child, 10 years

Occupation, Housewife (Husband

Degree Education, Limited to reading &c

Profession Religion, Jewish Church

Habits, no history of intemperance

Nativity, Germany (Prussia); parents also born there.

Physicians Committing, Geo. J. Hanley & A.B. Ancker.

Correspondents, (Husband) Adam Reider ~~no Gauthier St.~~
(Step-daughter) Mary Reider ~~" Gauthier~~ "

No. for Year, 136.

Insane Relatives, not known

Cause Exciting, probably bad treatment, poverty + neglect.

Cause Predisposing, not stated (probably prev. sick)

Form,

Accompanying Bodily Disorder, (always sick in old Country).

Suicidal or Not, not.

Date of this Attack, no definite history obtained

Time in Hospital, 9 months 10 days.

Result, Died. - Dysentery

346. Minnesota St

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 Golda Reider

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.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

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 **Golda Reider**

EARLEY, FICKLIN & SHOEBERG, DAVENPORT, IOWA

1893

Was brought here by Deputy Sheriff Haas, attended by Mr Fuhrman, with following history. As to history of consanguinity or heredity, nothing known. As to number of attack, or regarding first symptoms of this attack, no definite history obtainable. She was however, in C & C Hospital, St Paul from June 13th to July 3d 1893, with no marked improvement from treatment. The disease is not variable; no rational intervals. Derangement is now shown in that she has fears poison by husband; lies in bed continuously; often refusing food; generally filthy; she screams at night; cries loudly & frequently & has generally, the symptoms of pre-senile dementia. She is neither disposed to injure others, nor suicidal. Habits are filthy. There is no history of intemperance. Her daughter says, she was always sick in the old country. She has not been restrained or confined. Cause of disease is probably bad treatment, poverty & neglect. On personal examination she is found dirty, unkempt & ill-conditioned, generally. Clothing, to keep her from freezing, had to be furnished by the Sheriff's wife. She talked a little, but we are advised she is not understood by even her own people. She sat in a chair; talking & gesticulating; partook of sound nourishment, after some argument. Is badly nourished in appearance; at times, somewhat excited in manner, again, decidedly apathetic. It is learned that she has kept her bed for many months, apparently indifferent to surroundings & her condition.

Nov 24 Nov 24/93. On admission, is in a weak & feeble condition. Wash ton Co. P. 73. R 19. T. 98 2/5. Very dirty. Her head was covered with vermin. Nov 25 93. In bed. Is quiet. Cries at times. Talks very little German. Appetite poor. Sleep quite good. Cough none. Bowels constipated. Complaints none. P 74 R 18. T. 98. Nov 26 93 Is quiet. Gave Pills., bowels moved. No other change. Ate 2 good meals today. Drank about one pint of milk. Head still dirty. Gave full bath. Nov 27 93 Untidy in habits. Cries whenever any one enters the room. Appetite fairly good. Head much cleaner. Seems to have forgotten how to walk. Is not able to take a step without assistance. Full bath twice. Nov 28 93 Bowels regular. Bathed 3 times. Head much cleaner. Dirty habits. Appetite somewhat better. Sleeps well. Talks very little. Nov 29 93 Full bath. Bowels moved. Hair clipped. Took time T. 98 3/5. P 76. R 18. Slept well. Nov 30 93 Appetite has been good today. Patient very helpless. Dirty habits. Does not seem sick, only very weak. Dec 1 93 Refused to take tonic. It makes her sick, she vomiting after taking it. Appetite not very good. Slept well. Sitting up 2 hours today. Dec 2 93. Appetite poor. Can not take her tonic as it makes her sick. Bowels constipated. gave pills. Up and dressed 2 hours, cried all the time, while sitting up. Dec 3 93 Sitting up 2 hrs today, cried so hard, had to put her to bed again. Appetite has been good today. Sleeps well.

Dec 4 93 Bowels constipated, sitting up this morning. In bed this P.M. Bowels moved, bed changed twice. Ate good breakfast and dinner, took very little supper. Dec 5 93 Sat up 4 hrs, does not want to sit up, urinates very often, very little at a time. Appetite poor today, will not take her medicine. Night quiet. Slept well all night. Dec 6 93 Sat upon ward 6 hours, appetite poor. Cried some. Took 2 pills, Seems still very weak. 5 a.m. Slept well all night. Urinated, bed changed.

Dec 7 93 Appetite still very poor. Sat up 6 hrs today. Gave 2 pills. Still very weak. 5 a.m. very quiet & slept well during the night. Urinated, bed changed.

Dec 8 93 Has taken more nourishment today. Sat up 6 hrs, continues very untidy. Sat up

Personal and Medical History of **Golda Reider**

1893 cont'd

Dec 8 6 hrs. Talks some. Asks to go home. 7.45 a.m. Quiet during the night & slept well. Bowels moved. Urinated. Bed changed. Dec 10/93. Patient sits up about 5 hours a day. Appetite not very good. Habits very untidy. Dec 13/93. Today, asked for a knife to cut her throat; also attempted to choke herself by inserting her fingers down her throat. Dec 20/93. Is sitting up, all the time, now. Appetite is much better. Bowels are constipated, most of the time. Does not cry as much as formerly. Continues untidy in her habits. Dec 31/93. No particular changes to note. —

1894 Jan 3/94. Today, was transferred to A! East. Jan 31/94. Appetite is poor. Is, usually, quietly behaved, although she has "crying spells" - Is weak; not able to stand up alone. Requires a great deal of attention - Is very untidy in her habits. —

Feb 16 Feb 16/94. Bowels are constipated, but she refuses to take medicine - Still somewhat weak.

" 24 Feb 24/94. Patient was committed here under the "Law of 1893" recently declared unconstitutional. She was, today, Taken out and Returned under new Warrant from Olmsted Co.

Mch 30/94. Appetite poor. Very untidy in habits. Has crying spells quite frequently. Wants to go home.

April 30/94 Appetite poor. Habits untidy. Cries a great deal. Complains of Side & back ache.

May 30/94 Appetite poor. Is very untidy & quite noisy. Bowels constipated most of the time. Refuses to take medicine. Visited by Son. June 9 94 Visited by Son. Quiet, on ward most of the time. Appetite quite poor. Has to be fed. Bowels constipated. Frequently in bed. June 30/94. Appetite has been very poor the last week. Drinks some milk, but does not eat much. July 31/94 Appetite very poor. Refuses to take her med. Sleeps quite well. Bowels constipated. Untidy in habits. Does not care for herself. Is quite noisy at times. Aug 94 Is looking some better of late. Appetite improved. Bowels constipated. Habits dirty. Aug 31 94. Health quite poor. Has been in bed 6 days.

Sept 2 Has been sick in bed for several days with diarrhoea. Is very weak and takes no nourishment. Sept 3. 1894. Died at 11 20 P.M. 6 days.

Personal and Medical History of Eliza Standish

GIBBEY, FOLAN & CHAMBERS, DAVENPORT, IOWA

Nov 23. Letter from Superintendent of Insane asking records about this case, as Mrs Neal left a Will —

Whole No. 3567
Residence, 353 Aurora Ave, St Paul, Minn
Date Admission, 24th November 1893.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John B. Olivier, Jo P.O., Ramsey County.
Sex, Female
Age, 70+
Civil Condition, widowed
Children, none
Age Youngest Child, had one it died immediately after birth.
Occupation, Housewife
Degree Education, probably good; has taught music.
Profession Religion, Episcopal
Habits, not intemperate
Nativity, Ireland; parents also born there.
Physicians Committing, W. H. Witherow & A. B. Aucker
Correspondents, (Brother in law) Wm A. Law - 353 Aurora Ave St Paul. Minn
Family Physician Dr. Willis Witherow 549 Selby Ave

No. for Year, 137.
Insane Relatives, none
Cause Exciting, senility
Cause Predisposing, chronic
Form, Senile dementia
Accompanying Bodily Disorder, great weakness
Suicidal or Not, not
Date of this Attack, about 2 years ago
Duration, about 2 years
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 68
Time of Leaving, Nov. 21. 1896
Time in Hospital, 2 yrs 11 mo 27 das
Result, Died. Tuberculosis Pulmonales.

EXAMINATION ON ADMISSION.

Ex. by Dr Lenton Phelps

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Sluggish.
Quick or Sluggish, Confused.
MEMORY: Poor.
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER: Impaired much.
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Very restless and resists a good deal during Examination.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Depressed.
DELUSIONS: Seems to have many.
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Incoherent.
Coherent or Incoherent,
Voluble or Reticent,
Demented and childish).

Personal and Medical History of Eliza Standish

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 4 ft 10 in. WEIGHT, 68 1/2 lbs NUTRITION, Poor
WOUNDS OR ABNORMALITIES, Right curvature of spine.
TONGUE, Tremors, Coatings, Promptness Movement, coated.
PUPILS, Equality, Equal. Size, normal.
Response Light, Accommodation,
SIGHT, Seems good.
HEARING, Good
COORDINATION, Arms, Good

Case No. 3567. Eliza Standish. Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

ARTICULATION, Hesitating, Hesitating. Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds are normal.
LUNGS, Respiration quick.
EXAM. URINE.

GYNAECOLOGICAL EXAM., Backward displacement of uterus. Urethritis
MENSTRUATION, Ceased
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Poor. Medium, Poor,
SLEEP, Good, Poor Poor, Irregular,
PULSE, 108. RESP., 24. 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 Eliza Standish

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3567

Residence, 353 Aurora Ave, St Paul, Minn

Date Admission, 24th November 1893.

Admitted by, D. Phelps Hour, 1 PM

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

Sex, Female

Age, 70+

Civil Condition, widowed

Children, none

Age Youngest Child, had one it died immediately after birth.

Occupation, Housewife

Degree Education, probably good; Lattan

Profession Religion, Episcopal

Habits, not intemperate

Nativity, Ireland; parents also born

Physicians Committing, W. D. Wittum & A. B. [illegible]

Correspondents, (Brother in law) Wm A. Law - 353 Aurora Ave St Paul. Minn

Family Physician Dr. Willis Wittum. 569 Selby Ave

No. for Year, 137.

Insane Relatives, none

Cause Exciting, senility

Cause Predisposing, chronic

Form, Senile dementia

Accompanying Bodily Disorder, great weakness

Suicidal or Not, not

Date of this Attack, about 2 years ago

Duration, about 2 years

No. of Attack, 1st

No. of Admissions 1st

Insane, Patient from Apprehension of Guardians Bonds, about this date, as Mental Health —

EXAMINATION ON ADMISSION.

Ex. by Dr. Linton Phelps

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, x Sluggish.

Quick or Sluggish, Confused.

MEMORY: Poor.

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER: Impaired much.

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Very restless and resists a good deal during Examination.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Depressed.

DELUSIONS: Seems to have many.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Incoherent.

Coherent or Incoherent,

Voluble or Reticent,

Demented and childish).

Personal and Medical History of Eliza Standish

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 4 ft 10 in. WEIGHT, 68 1/2 lb NUTRITION, Poor

WOUNDS OR ABNORMALITIES, Right curvature of spine.

TONGUE, Tremors, Coatings, Promptness Movement, coated.

PUPILS, Equality, Equal. Size, normal.

Response Light, Accommodation,

SIGHT, Seems good.

HEARING, Good

COORDINATION, Arms, Good

Legs,

TREMORS, Hands, None. Tongue,

Facial Muscles, General,

REFLEXES, Patellar, Could not test.

Other Reflexes,

ARTICULATION, Hesitating, Hesitating. Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART, Sounds are normal.

LUNGS, Respiration quick.

EXAM. URINE.

GYNAECOLOGICAL EXAM., Backward displacement of uterus. Urethritis

MENSTRUATION, Ceased

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Poor. Medium, Poor,

SLEEP, Good, Poor. Poor, Irregular,

PULSE, 108. RESP., 24. 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 Eliza Standish

EGBERT, FICKLE & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Deputy Sheriff Haas, attended by Mrs Fuhrman, with following history
Nothing known as to Consanguinity. She has no near relatives. This is 1st attack; first symptoms were
manifested about 2 years ago, by Change in habits, manner &c &c. Disease seems increasing: but
she frequently talks quite rationally. Derangement is now shown in two subjects, in particular; she is
extremely garrulous; cries without provocation, dreams out at night &c. About 2 o'clock, the other
morning, she was found down-stairs, attempting to set fire to the house. She is neither disposed to
injure others, nor suicidal, but is neglectful of personal appearance & condition. There is no history of
intemperance nor of any severe disease or injury to head. She has not been restrained or confined.
Senility is supposed the cause of the disease. Has had no medical treatment. On personal exam^n
She has the appearance of a very nervous old woman. Was very garrulous. Said she was being
persecuted; that she had pains in her head, & was sleepless. She several times Cried out without
provocation. Walked about the rooms & talked, almost incessantly. Is restless, nervous, not well nourished.
Other facts are a decided Change in her habits, ideas, speech, personal appearance &c.

Nov 21/93. On admission, is in a feeble & weak condition. Was put to Bed.

Bodily condition. Quite clean. No bruises

25 Very restless both day & night. Talk is somewhat delusive. Appetite fair. Did not sleep well. No cough.
Bowels regular. Complained of a sore throat.
26. Appetite poor. Is very nervous restless. Seems to realize, but at the same time has strange imaginations
27 about the same. Complains of a sore throat.
28 Restless at night. Imagines that she will be put out of doors.
29 Appetite poor. Is very nervous & restless at night. Is also quite noisy.
30. Appetite poor. Is weak & nervous. Put on tonic.
Dec 1. About the same.
" 2 Still complains of sore throat; is taking medicine for it. Bowels regular.
" 3 Quite noisy both day & night & threatens to kill herself.
" 4 Snatched a knife from the dining room table & attempted to cut her throat. Also tried to choke herself
with a handkerchief. Put on suicidal ward. (B^3)
" 5 Appetite very poor. Very restless most of the day. Lying on couch at times. Complains some of stomach.
Rested quite well. Slept 4½ hrs, awake this morning, talking & coughing hard at times.
" 6 The same. Rested well.
" 7 Appetite poor. Very restless & seems to have a slight rise of temp. ~~Did not have a thermometer~~.
" 10 Awoke out of bed, quite noisy after part of night. Dec 10/93. Out of bed; quite noisy, most of night; slept but 3 hrs.
" 29 Appetite poor. Clean in habits. Is very nervous & restless all night. Constantly asks for tea & something to eat. Complains
of a sore throat & imagines that she is going to be put out doors. (The following is an itemized account during past 19 days)
Dec 11/93. Awake & talking noisily, last night; coughing quite hard, at times. Drank a glass of milk; slept 1½ hours.
Dec 12/93. Awake & noisy, all last night; slept none. Dec 13/93. Out of bed & talking noisily, nearly all last night, and
slept only 1½ hours. Dec 14/93. Restless & slightly noisy, last night. Slept but 3½ hours. Tried to strangle herself
with towels, to day. Dec 15/93. Quite noisy; talking most of the night and slept none. Dec 16/93. Rested
fairly well, last night, slept 4½ hours. Was noisy this morning. Dec 17/93. Was awake, out of bed several times,
and quite noisy all night. Slept but 2 hours. Dec 18/93. Out of bed once and quite noisy most of the

Personal and Medical History of Eliza Standish

1893

night; slept only 1½ hours. Dec 21/93. Restless and noisy 1st part of night. Slept only 3½ hours.
Dec 22/93. Rested quite well, last night, sleeping 5½ hours. Dec 23/93. Slept about 2 hours,
this morning; was restless and noisy the rest of the night. Dec 26/93. Was out of bed several times,
and noisy, most of the night; slept only one hour or so. Dec 28/93. Appetite good, but patient is still
very weak. Habits are clean. Moved today to (C^2). Dec 31/93. Patient is still somewhat weak.
Dec 31 Is rather troublesome on ward. Sleeps quite poorly.
1894
Jan 5/16 Jan 5/94. Is very troublesome. Talks of committing suicide. Jan 16/94. Transferred to B^2.
" 23/31 Jan 23/94. Put on tonic. Jan 31/94. Continues about the same.
Feb 22 Feb 22/94. Rests well, now at night. Appetite good. Is restless, most of the time. Habits
are clean, but she is not very tidy, in general appearance.
Feb 23 Feb 23/94. This patient was committed here under the "Law of 1893" recently declared uncon-
-stitutional. She was today Taken out and Returned under "New Commitment papers"
from Olmsted County. Mch 29/94 Continues about the same. April 24/94 M. Slaughter
Cleaning dining room & hit Mrs Standish on right eye, made quite a bruise & also a cut. Dressed wound & took
off of P. E. April 26/94 Appetite fair. Behavior quiet. Clean in habits. May 28/94 Appetite good
Sleeps well. Is quiet & clean in habits. Is quite feeble. No complaints. Sept 30/94 Patient
is very easily excited and worries considerably. Appetite quite good. Bowels reg. Sleeps well.
Oct 3 94 Appetite good. Bowels constipated. Sleeps quite well. Seems more quiet & contented of late.
Is nice and neat on ward. Nov. 15/94 Appetite quite good. Bowels regular. Cough is not any better.
Seems to be quite weak. Lies in bed the greater part of the time. Dec 13/94 Transf^d to Infirmary
Dec 26/94. Appetite good. Bowels reg. Patient seems much stronger. 1895 Jan 15/95 Sleeps well. General health good.
Jany 26/95. Health much improved during last month. Appetite good. Bowels regular. Feb 10/95 Seems stronger & appetite good.
Takes tonic. Feb 20/95 Gen health good. Sleeps well. Feb 21/95 Transf^d to B^2. Feb 28/95 Gen health good.
Sleeps better. Appetite good. No change otherwise. Mch 10/95 Appetite poor. Bowels reg. Lies on the bed most
of the day. Is very feeble, takes tonic. No change otherwise. April 1/95 Lies on bed most of the day. Appetite
poor. Takes Potassium. Sleeps well. Mar 13/95 Same as before. Apr 22/95 Bowels constipated. Cathartic
Wine 3 times a day. Very feeble. May 12/95 Appetite good. Sleeps part of the day then gets up
and says she has had no dinner; she is very trying at times. May 31/95. Appetite good. Has specials.
June 15 Very trying to get along with. Appetite good. Bowels regular. Sleeps most of day. June 15 Eats & sleeps well.
Has specials. Aug 31 Goes out for few hours in P.M. No change. Sept 5 Old & feeble. Lies on her
bed nearly all day. Appetite good. Bowels regular. Oct 22 Mrs Clark fought her & pushed her
over against bed cutting her slightly over left eye bruising side of face somewhat.
Oct 30 Appetite good - Bowels regular. Has specials. Nov 24 No change noticeable.
Dec. 15 Old & feeble & sleeps most of the day. Appetite good. Bowels regular. Has specials.
Mar 3 Had diarrhoea during night. Mar 4 Sick in bed today. Complains of head feeling light & pain
in stomach. T. 98.6 R 20 P 100 Has taken Cathartic Mar 5 In bed still but feeling better.
Appetite good. Has specials Mar 7 Dressed & up on ward part of day. Mar 9 Up all day. May 19 Has a
very bad cough. Medicine given for same. May 21 Sick in bed: Coughs quite a little: Resp rate T. 100 P 90 R 20
Has taken cathartics: Bowels moved: Coughs & expectorates a great deal: Appetite fairly good. May 23 Pgg. R 22 P 110
May 24 Dressed & sitting up on ward part of day. Appetite fairly good.

See Folio 328

Personal and Medical History of Jane Smith

GILBERT, FULLAM & CHAMBERS, DAVENPORT, IOWA

Whole No. 3578.
Residence, Anoka, Minn
Date Admission, 5th December 1893.
Admitted by, D. Phelps Hour, 1.30 PM
How Sent, M. Host. Jof D. Anoka County
Sex, Female
Age, 65
Civil Condition, widowed
Children, one
Age Youngest Child, — dead —
Occupation, House-keeper (husband was farmer)
Degree Education, Limited
Profession Religion, not a church member
Habits, unknown
Nativity, Tennessee (parents also born there).
Physicians Committing, D. Duncan & J. G. Aldrich
Correspondents, Thomas Ryan, Anoka (Grandson)
No family Physcn.

No. for Year, 148.
Insane Relatives, unknown
Cause Exciting, not known
Cause Predisposing, previous attack.
Form,
Accompanying Bodily Disorder, nervous & agitated
Suicidal or Not, not
Date of this Attack, some 5 years since
Duration, some 5 years.
No. of Attack, not 1st (was at St. Peter) —
No. of Admissions, 1st here
Age First Attack, probably about 60.
Time of Leaving, Feb. 20 '94
Time in Hospital, 2 mo 15 ds.
Result, Impr.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

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 Jane Smith

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2½ in WEIGHT, 110 pds 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.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
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 Jane Smith

ABBEY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Sheriff's Deputy, John Turney, attended by Wm D. Stobbs, with following history: no history of consanguinity; as to heredity, unknown; this is not 1st attack; was confined at St Peter Hospital for about 1 month, but without any benefit. Patient has not been really sane for years. Disease seems increasing, but is variable & there are rational intervals. Derangement is now manifested by hallucinations &c; sees angels, devils, spirits, good & bad; says "her boy (grandson) is dead"; but the fact is he is alive & well. She has shown a disposition to injure others; but is not suicidal nor filthy nor destructive. Previously, showed peculiarities as to temper, passions & religious impressions. — As to any history of intemperance, unknown. Has had no severe disease or injury to head. Cause of disease, not known. On personal examination, she said "Jane Smith sees Spirits"; talked about angels &c; was nervous & excitable; from other sources it is learned she is an unsafe person to be at large.

Dec 5 Dec 5/93. On admission, is in an aged & agitated condition. Vaccination A.E. (S.R. Hair, grey; eyes gray; no marks, scars, hernia &c. Bodily condition rather dirty. Cried & prayed, while bathing. Remarked, she had been here before.) P 97. R 20. T. 99. Bodily condition: Rather dirty. No injuries &c. First day. Cried and prayed all day. Talks quite fluently. Appetite poor. Did not sleep well. No cough. Bowels regular. No complaint. P 94. R 20. T. 98.6 Dec. 6 93 Appetite fair. Behavior quiet. Dec 7 93 Eats & sleeps well. Quiet all day. No complaint. Dec. 8 93 Quite nervous. Walked up and down the hall and sang.

Dec 9 93. Appetite fair. Cried nearly all day and was extremely noisy in the night. Dec. 10 93 More quiet than yesterday otherwise about the same. Dec. 11 93 Cried and prayed a great deal. Also has illusions. Dec. 12 93 Eats and sleeps well. Behavior quiet. No complaints. Dec. 13 93 About the same

Dec 14 93 Behavior quiet. Appetite fair. Dec. 15 93 Cried about half of the time during day and was quite restless in the night. Dec 16 93 Eats quite well. Rested well. Cried some during day

Dec 17 Was quiet all day. Dec. 18 93. Appetite fair. Slept well. Behavior quiet. No complaints.

" 21. Appetite fair. Cries a great deal and is restless at night. Dec 30 93 Appetite good. Clean in habits. Still has crying spells & is very contrary. Always refuses to bath. Talk somewhat delusional. Was put on tonic but refuses to take it. Jany 30 94 Appetite good. Habits somewhat untidy. Spits on the floor & walls of the room. Refuses to bath, & has to be forced. Has crying spells quite often.

February 20th 1894. Went home.

Personal and Medical History of Eliza Standish 3567.

1896 From Folio 321

June 26 96 Transferred to Infirmary: put to bed: Temp. 99 P. 100 R 24. Seems very weak & bowels are loose. Takes milk & tea: Tonic given. June 28 Bowels have been very loose: Continues weak: Temp. pulse & resp. normal. June 29 A glass of milk given every two hours: Bowels moved 3 times. July 5 Bowels moved twice daily. Pulse 108 Temp. normal R. 28. Sleeps fairly well. Takes milk: no other nourishment.

July 9. Is growing very weak: Temp. normal Pulse 104. R. 21. Continues to take milk & tonic. July 16 Has continued to take milk diet. Nine three times a day: Bowels regular. Is very weak: July 30 Has continued constantly in bed: Appetite very poor. Eats very little but takes milk: Wine 3 times a day. Aug 15 Patient remains constantly in bed: Temp. pulse & resp. continue about normal, Continues to take milk several times & wine 3 times daily; Is rather restless at night: Bowels moved.

Sept 1 Coughs & expectorates, very weak, Temp. about normal: pulse ranges from 90 to 100: Appetite poor: Takes tonic. Sept 18 Continues constantly in bed: Is gradually failing: Appetite poor: Wine given 3 times a day. Bowels move regularly.

Oct. Summary Nurse's Notes by Dr. E. L. Phelps: Seems about the same: coughs & expectorates considerably: bowels very loose: wine given every two hours: restless & out of bed a great deal: Nov 1: Gradually growing weaker: Appetite fair: pulse very weak:

Nov. 21 Has gradually failed in strength: pulse very weak. 6:15 P.M. Died.

Died

Personal and Medical History of Mary Ann Hagerty

EBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3591.
Residence, 544 Rear St. Paul.
Date Admission, 13th December 1893.
Admitted by, D Phelps Hour, 7 PM
How Sent, John B. Olivier Jof P. Ramsey County
Sex, Female
Age, 37 years
Civil Condition, widowed
Children, 5
Age Youngest Child, 5 years
Occupation, Housewife
Degree Education, fairly well educated
Profession Religion, Roman Catholic
Habits, no history of intemperance
Nativity, Canada; (parents born in Ireland).
Physicians Committing, H.A. Craig & J.A. Quinn
Correspondents, Mary Hagerty 544 Rear St Paul Michael Hafely, Murdock, Minn.
Family Physcn H.A. Craig. St Paul, Minn.

No. for Year, 161.
Insane Relatives, None
Cause Exciting, Loss of her husband
Cause Predisposing, not given
Form, acute mania.
Accompanying Bodily Disorder, great nervousness.
Suicidal or Not, not.
Date of this Attack, about 1½ years ago
Duration, about 1½ years
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 35.
Time of Leaving, June 22 94.
Time in Hospital, 6 months & 9 days.
Result, Died.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY: Very noisy
Clear or Confused, Confused
Quick or Sluggish,
MEMORY: Can not test.
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY: Ilusive.
Alert or Dull,
Correct or Illusive,
REASONING POWER: Impaired greatly
Ordinary Subjects,
Own Mental State, Does not realize anything.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Put to Bed in restraint

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Very wild & excited
Depressed,
DELUSIONS: Is constant motion seems
Systematized or Not, to talk in a very loud manner
Special Subjects, day & night.
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: very talkative Never
Coherent or Incoherent, sensible Incoherent & wild
Voluble or Reticent, Mimics very violent

Personal and Medical History of Mary Ann Hagerty

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2 in WEIGHT, 116 lbs NUTRITION, Fair
WOUNDS OR ABNORMALITIES, None.
TONGUE, Tremors, Constantly talking Coatings, Promptness Movement,
PUPILS, Equality, Equal Size,
Response Light, Accommodation,
SIGHT, Seems normal

Case No. 3591 Mary Ann Hagerty Vol. 24.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

General,
REFLEXES, Patellar, Can not test.
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Wild.
SENSIBILITY,
HEART,
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Dirty.	Clean,	Careless,
BOWELS, Normal,	Irregular	Constipated,	Irregular,
APPETITE, Good,	Poor	Medium,	Poor,
SLEEP, Good,	Very noisy at night	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 Mary Ann Hagerty

FARGEY, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3591.
Residence, 544 Rice St. St Paul.
Date Admission, 13th December 1893.
Admitted by, D Phelps Hour, 7 PM.
How Sent, John B. Olivier Jof P. Ramsey County
Sex, Female
Age, 37 years
Civil Condition, widowed
Children, 5
Age Youngest Child, 5 years
Occupation, Housewife
Degree Education, Fairly well educated
Profession Religion, Roman Catholic
Habits, no history of intemperance
Nativity, Canada; (parents born in Ireland).
Physicians Committing, H.A. Craig & J.A. Quinn.
Correspondents, Mary Ann Hagerty nee Rice Friend Michael Walsh, Murdock, Minn.
Family Physician H.A. Craig St Paul, Minn.

No. for Year, 161.
Insane Relatives, None
Cause Exciting, Loss of her husband
Cause Predisposing, not given
Form, acute mania.
Accompanying Bodily Disorder, great nervousness.
Suicidal or Not, not.

Time of Leaving, June 22. 94.
Time in Hospital, 6 months & 9 days.
Result, Died.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY: Very noisy
Clear or Confused, Confused
Quick or Sluggish,
MEMORY: Can not test.
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY: Illusive.
Alert or Dull,
Correct or Illusive,
REASONING POWER: Impaired greatly
Ordinary Subjects,
Own Mental State, Does not realize anything.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Put to bed in restraint

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Very wild & excited
Depressed,
DELUSIONS: In constant motion seems
Systematized or Not, to talk in a very loud manner
Special Subjects, day & night.
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: very talkative Never
Coherent or Incoherent, sensible Incoherent & wild
Voluble or Reticent, at times very violent

Personal and Medical History of Mary Ann Hagerty

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2 in. WEIGHT, 116 lbs. NUTRITION, Fair
WOUNDS OR ABNORMALITIES, None.
TONGUE, Tremors, Constantly protruding Coatings, Promptness Movement,
PUPILS, Equality, Equal Size,
Response Light, Accommodation,
SIGHT, Seems good
HEARING, Good
COORDINATION, Arms, Good.
Legs, Good
TREMORS, Hands, In constant movement Tongue,
Facial Muscles, General,
REFLEXES, Patellar, Can not test.
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Wild.
SENSIBILITY,
HEART,
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Dirty. Clean, Careless,
BOWELS, Normal, Irregular Constipated, Irregular,
APPETITE, Good, Poor Medium, Poor,
SLEEP, Good, Very noisy at night 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 Mary Ann Hagerty

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893

This patient was brought here by Deputy Sheriff Haas, attended by Mary Hagerty, with following history. There is no history of consanguinity or heredity. This is 1st attack; symptoms manifested about 1½ years ago, by failing memory. Decaie appears to be increasing, but is variable & there are rational periods, but not at regular intervals. Derangement is now shown by general confusion, melancholy, continuous talking, talking about her dead husband & children. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Previous to the accession of the disease, would sometimes get into a rage, for no cause. There is no family history of intemperance, nor has she been subject to any severe disease & or injury to head. No restraint or confinement has been employed. The Loss of her husband is the supposed cause of the disease. She has had no medical treatment; only home care. On personal examination She is found to be very nervous & melancholy, most of the time; does not speak connectedly; memory faulty. She talk about her money in the bank & about paying debts, which do not exist. Would not speak scarcely; sat with a vacant stare. Appearance & manner, dejected & void. Her daughter says She wanders aimlessly about the house, at night, and seldom slept.

Dec 13 — Dec 13/93. On admission, is in fair physical condition. Was put on B3. (S.R. Complexion dark; hair black; eyes gray; condition of skin good; no marks, scars or bruises. Bodily condition quite dirty; no bodily peculiarities noted; fought the Attendants when going to her room. Complained of her children not using her right) Ward 13! Height 5'2" Weight 116 lbs.

Dec 14 93 Quiet all day. Appetite good. No cough. Bowels regular. no complaints re. P. 44 R. 17. Temp normal.
" 15 Fought attdts & was moved to C4 Dec 16 93 Appetite good. Quiet all day. Habits dirty. Bowels constipated. Dec 17 93 Noisy all day & fought attdts. Appetite very good. Noisy all night. Received a severe
" 17 blow in the left eye. Dec 18 93. Somewhat quieter pm the afternoon. Habits very dirty. Dec 19 93 Tears clothing off. Requires constant watching. Eye very black. Has a scratch on the skin by one of the other patients
" 18/19 Torments the other ladies by undressing them & trying to make them keep still. At night is out of bed & pounding around. Empties her tick. Very filthy every night. Dec 20 93 Noisy & destructive in
" 20 forenoon Very quiet and wanted to sleep pm afternoon. Appetite good. Habits dirty. Noisy all night.
" 21 Destroyed her tick. Dec 21 93 Noisy all day, also destructive. Had to have 3 baths. Was kicked & struck by another patient. Appetite good. Habits very filthy. Requires constant watching, torments
" 22 the other ladies by destroying (pilfering) their clothing. Dec 22 93 Quieter. Sleeping on bench greater part of day. ate dinner & breakfast. Temp 103 1/5. Had high chills at 3. p m. Transf to C2. Was therefore Dec 22 93. f, very poor appetite. Suffered very much from insomnia; Was so noisy that she had to be put pm restraint, bowels moved quite regularly, loved milk or milk, Jany 3. 94. Looks brighter. Ate good dinner & supper. Was more quiet this P M, commenced to eat better. Had a bad

1894
Jan 5 — Fever Dressed on Jany 6. 94. Was very violent on Jany 7. 94. Sleep is getting better Jany 11/94
" 15 Abdomen swollen & hard, gave enema Soap & water, had hemorrhage from bowels. — Jany 16/94
" 16 Ate good breakfast. Up & dressed went in dining room & ate good dinner. For details see nurse records 'case' — Is noisy & untidy in habits. Transferred to B3. — Slept none; was ex-
" 17 -tremely noisy, all night; out of bed several times, singing, and using profane language. Jan 17/94 Was
" 18 given hypodermic at 10 P m. Afterward rested well & slept 5½ hours. Jan 18/94 Quite noisy 1½ hours; 9.30. P m. Noisy & talking — given hypodermic; was quiet the rest of the night, and slept 4½ hours.
" 19 Jan 19/94. Bowels badly constipated — given medicine. Is sick & vomiting; enema given. Bowels,

Personal and Medical History of Mary Ann Hagerty

1894

Jan 20 afterwards, moved freely. Jan 20/94. Was restless; last night & quite noisy & loud talking. Given
" 22 Sleeping dose. Slept 3½ hours. Jan 22/94. Last night, was quite noisy, talking until 10 P m.
" 23 Sleeping dose given. Then slept 5 hours. Jan 23/94. Was awake and quite noisy till 4 A m.
" 24 Slept only 1½ hours. Jan 24/94. Sleeping dose given at 9.30. at 1 P M. a hypodermic. She then
" 31 rested well, all night. Jan 31/94. Has continued nightly, noisy, sometimes extremely so, loud talking, frequently out of bed & occasionally pugnacious, sleeping only from 2 to 4 hours, each night, since last note. Has to be given either sleeping dose or hypodermic almost every night. By day, is extremely noisy, nearly all the time and has to be kept in the lower bay. Is very filthy in her habits.

Feb 8 — Feb 8/94. Complains of quite severe pains in bowels; given medicine. Scalded milk also given as nou-
" 10 -rishment. Feb 10/93. Behavior by night is about as above described. Sleep is very much broken.
" 20 Conduct by day, does not change any. Has also become destructive in her habits. Feb 20/93. Is very
" 22 Complaining again of bowel trouble — medicines given. Feb 22/93. Continues restless & noisy at night and Continues also to sleep very poorly. Conduct & behavior by day has not improved any.
" 24 Feb 24/94. This patient was committed here under the "Law of 1892" recently declared unconstitutional. She was today, Taken out and Returned under new Warrant from Olmsted County.

Feb 25/94 Struck in eye by C Fraseth. Feby 25 94 Rested well till 3 a m. Arose, out of bed & quite noisy. Singing. Slept 4½ hrs.
" 26. Out of bed quite noisy 10 P M Gave hyprd. as dir. Slept 4½ hrs. Feby 27 94 Very noisy. Gave hyprd at 10 P M. Slept 6 hrs
" 28. Visited by friends. Awake & quite noisy till 12 M. Sleeping dose at 11 P M. Slept 4½ hrs. Mch 1 94 Sleeping dose 10 P M. Slept 5 hrs awake & noisy at 4 a m. out of bed & quite noisy. Mch 2 94 Thumb on left hand hurt in some way. Mch 3 94 Sleeping dose 9.30 quite noisy till 11 P M. Slept 5 hrs awake at 4 a m. out of bed & very noisy. Mch 4 94 Sleeping dose 9.30 slept 5½ hrs awake at 4 a m. out of bed & quite noisy. Slept 5½ hrs. Mch 5 94 Out of bed. 9.30 P M quite noisy. Gave hyprd. Mch 6 94 Gave sleeping dose 9.30 Slept till 12 M. out of bed & quite noisy 2 a m. quiet till morning. Mch 7 94 Sleeping dose 11 P M quite noisy till 1.30 A M. Slept 3½ hrs awake out of bed 4 a m. Extry noisy ½ hr. Mch 8 94 Quite noisy 9 P M Gave hyprdorm. as dir. Slept 4½ hrs. Mch 9 94 Quite noisy 11 P M Sleeping dose as dir. Slept 5½ hrs. Mch 10 94 Extry noisy till 3. a m. Filthy in habits. Slept. Mch 11 94 Rested well till 3. a m. out of bed quite noisy. Gave hyprd as dir. Mch 12 94. Extry noisy till 11 P M gave hyprd 10 P M. Slept 3½ hrs. out of bed since 3 a m. Bowels moved twice. Gave med as dir. Mch 13 94 Rested well till 4.30 a m awoke quite noisy. Mch 14 94 Quite noisy till 10 P M gave hyprd 9.30 as dir. Slept 5 hrs. Mch 15 94 Out of bed & quite noisy most of night gave hyprd as dir. 10.30 P M. Slept none. Mch 16 94 Quite noisy till 9 P m Sleeping dose 9 P M slept 5 hrs. Mch 18 94 Rested well. Mch 19 94 Quite noisy till 9.30 gave sleeping dose as dir: Slept 5 hrs immediately. Mch 20 94 Out of bed & quite noisy till 2.30 a m Sleeping dose 10 P M. Slept 3½ hrs. Mch 21 94 Apparently good. Habits filthy. Extry noisy most of the time. Transf to C2.

May 4 94 Extremely noisy, violent & filthy. In seclusion at meal times. Apr 29 94 No change in mental condition. Bowels constipated. Apr 30 94 Pt. had bloody urine pm seclusion. Apr 17 94 Incoherently talks coherently. Talks to me. Noisy & violent Apr 18 94 Transf this morning. May 10 94 Put to bed in restraint.

May 25 — Transf to C2. For particulars of sickness see nurses records.

June 22 94 11 A M died.

Personal and Medical History of Mary Gallien

EBERT, FICKE & CHAMBERS, DAVENPORT, IOWA

Whole No. 3593.
Residence, Wasseca, Minn
Date Admission, 15th December 1893. —
Admitted by, D. Kilbourne Hour, 12 M.
How Sent, E. B. Collester, Jo P. Wasseca County
Sex, Female
Age, 58 —
Civil Condition, Divorced
Children, Three (3)
Age Youngest Child, 31 years old
Occupation, Housewife (Husband was Contracting Mason).
Degree Education, Liberally Educated.
Profession Religion, Methodist
Habits, no history of intemperance.
Nativity, Island of Guernsey; (Parents, Same Place).
Physicians Committing, D.S. Cummings & J.A. Swantwood
Correspondents, Self — Same as above
Family Physician Dr. Cummings M.D. Wasseca. Minn.

No. for Year, 163.
Insane Relatives, None
Cause Exciting, unknown.
Cause Predisposing, not given
Form,
Accompanying Bodily Disorder, None mentioned in history
Suicidal or Not, Said She intended once to drown herself.
Date of this Attack, about 6 months ago
Duration, about 6 months
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 57.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Ex. by Dr Linton Phelps

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish,
MEMORY: Good
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER: Impaired.
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS: Talks of her condition as hopeless. Wishes some one would kill her. Says she gave out all of a sudden that she is dead without she is all Marble.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Indifferent
Exalted,
Depressed,
DELUSIONS: Thinks she is dead, that she is Marble
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Despondent - No hope wants to die
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Mary Gallien

24/333 M Mary Gallien

Copy of Order for Hearing Petition of Wm. Gallien for 15th day 1901 at Wasseca, Minn for appointment of a as guardian for Mary Gallien of Wasseca Minn insane; served and service admitted April 29/1901.

(Papers filed with commitment papers.)

ADMISSION.—(Continued.)

TERISTICS.

NUTRITION, Rather poor

Promptness Movement,

Size, Normal

nmodation,

COORDINATION, Arms, Peculiar gait
Legs, Shuffling step

Case No. 3593 Mary Gallien. File No. 9

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

FACIAL EXPRESSION, Indifferent and rather Cross
SENSIBILITY,
HEART, Sounds are normal.
LUNGS, Seem in good Condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION, Ceased
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,		Clean,	Careless,
BOWELS, Normal,	Normal	Constipated,	Irregular,
APPETITE, Good,	Good.	Medium,	Poor,
SLEEP, Good,	fairly well.	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 of tuberculosis
Father or Pat. Relations, Father died of old age
Brothers or Sisters, 1 Bro 1 sister healthy as far as Known

Personal and Medical History of Mary Gallien

GIBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3593.
Residence, Waseca, Minn
Date Admission, 15th December 1893. —
Admitted by, D. Kilbourne Hour, 12. M.
How Sent, E. B. Collester, Jof P, Waseca County
Sex, Female
Age, 58 —
Civil Condition, Divorced
Children, Three (3)
Age Youngest Child, 31 years old
Occupation, Housewife (husband was contracting Mason).
Degree Education, Liberally Educat
Profession Religion, Methodist
Habits, no history of intemperance.
Nativity, Island of Guernsey; Parents, Jam
Physicians Committing, D.S. Cummings & J.A.
Correspondents, Self — same address —
Family Physician Dr. Cummings M.D. Waseca. Minn.

N
I

Duration, abont 6 months
No. of Attack, 1st
No. of Admissions, 1st

EXAMINATION ON ADMISSION.

Ex. by Dr Linton Phelps

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish,
MEMORY: Good
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER: Impaired.
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS: Talks of her condition as hopeless. Wishes some one would kill her. Says she gave out all of a sudden that she is dead with that she is all Marble.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Indifferent
Exalted,
Depressed,
DELUSIONS: Thinks she is dead, that she is marble
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Despondent - No hope wants to die
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Mary Gallien

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft WEIGHT, 95 lbs. NUTRITION, Rather poor
WOUNDS OR ABNORMALITIES, None.
TONGUE, Tremors, None Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, Normal
Response Light, Normal Accommodation,
SIGHT, Glasses.
HEARING, Good
COORDINATION, Arms, Peculiar gait
Legs, Shuffling step
TREMORS, Hands, Tongue,
Facial Muscles, General, Fairly well,
REFLEXES, Patellar,
Other Reflexes, Eyes tremble.
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Indifferent and rather Cross
SENSIBILITY,
HEART, Sounds are normal.
LUNGS, Seem in good Condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION, Ceased
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Normal Constipated, Irregular,
APPETITE, Good, Good. Medium, Poor,
SLEEP, Good, Fairly well. 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 of tuberculosis
Father or Pat. Relations, Father died of old age
Brothers or Sisters, 1 Bro 1 sister healthy as far as Known

Personal and Medical History of Mary Gallien

EBERT, FIDLER & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Sheriff St. Reynolds, attended by her son W. S. Gallien and Miss Parker, with the following history of case. There is no history of consanguinity or heredity. This is the first attack; Symptoms manifested about 6 months ago; She then began to act & talk unnaturally; imagined that her body was wasting; that her nerves were gone & that worms were consuming her body. (She was under treatment at Wauwatosa Sanitarium, near Milwaukee, from July 15/93 to Nov 15/93). Disease seems to be increasing; not variable; no rational intervals. Derangement is now shown by the belief that, while her mind is all right, her body is dead. Thinks she should have been in her grave one year ago. Patient is neither dispsed to injure others, nor filthy nor destructive. She admitted to her son that, on one occasion she went to a lake, with the intention of drowning herself. No peculiarities of temper, habits &c now previously shown. There is no history of intemperance nor of any venereal disease &c. Has had no medical treatment aside from that at Sanitarium, but she has been under the constant supervision of a nurse or Attendant, since July last. Cause of the disease is not known. On Personal Examination, there was nothing saw what was indicated by her conversation. She said "that her body was a corpse & was being consumed by worms". She wishes some one would kill her, so she could be put in the grave, where she belonged". She did nothing in particular.

Dec 15 Dec 15/93. On admission, is found to be in fair physical condition. Was put on Br. (SR. Complexion dark; hair gray; Eyes dark blue; Condition of skin normal: no marks, scars &c noted. Bodily condition very clean; is rather cross. Remarked she was not crazy and could wait on herself). Height 5 ft.
" 16 Weight 90 lbs. Dec 16/93 Appetite quite good. Very neat and quiet in ward. Rested well. Put on tonic.
" 17/18 Bowels moved. P. 84 weak. R 18. Dec 17/93 The same. Rested well. Dec 18/93 The same
Did not wish to go to chapel & asked very nicely to be excused. Did not seem to care for the extra furniture
" 19 said everything was plenty good enough & is pleased with what is done for her. Rested well Dec 19/93 The same
20/21/22 rested well. Dec 20/93 About the same. Rested well. Dec 21/93 The same. Rested well. Dec 22/93 Same
During this the second week, patient's condition remained the same. (Up to Dec 29/93 incl.)—
" 31 Dec 31/93. Appetite good. Is very quietly behaved. Talks rationally, when spoken to. At times, talks to herself.—
Jan 18/94 Jan 18/94. Attempted suicide, by trying to strangle herself with a handkerchief, today. Jan 21/94 Restless, and
" 31 awake a good deal of last night; slept but 3½ hours. Jan 31/94. Appetite fair. Talks but very little. Seems very much depressed; at times "wishes that some one would kill her". Has to be closely watched. Habits clean & neat
Feb 5/94 Feby 5/94 Visited by son and friend, today. Feb 12/94. Was struck in the eye, today, by a fellow-patient (Mr Wagner).
" 28 Feb 28/94. Appetite good, but patient does not seem very strong. Takes medicine (Tonics)—Seems very despondent most of the time; talks very little. Is neat & clean in personal habits.—
Mar 3 March 3/94. Patient was committed here, under the "Law of 1893", recently declared unconstitutional. She was, today, Taken out and Returned, under "new Warrant", from Olmsted County.—
Mch 29/94 Attempted suicide by trying to strangle herself Mch 29/94 Constantly trying to pull her hair out and pulling breaking off the ends of it—Up to day succeeded somewhat in destroying it entirely.
Mch 29/94 Not any change. Has to be closely watched both day & night to keep her from self-destruction
April 30 Not any change. May 29/94 Visited by Son. May 31/94 Very quiet. Sits in room a great deal. June 30/94 Very quiet. Stays in her room most of the time. Does not want to go walking. Eats quite well. July 6/94 Says she wants to kill herself. Seems very restless & uneasy. July 30/94 Behavior quiet. Does not talk much. Aug 3/94 Visited by Son. Aug 30/94 Appetite fair. Behavior quiet. Does not

Personal and Medical History of Mary Gallien.

walking. Does not talk much. Eats mostly dry food. Sept. 18 94 Appetite fair. Very quiet. Bowels regular. Goes out on lawn. Oct. 10 94 Does not want to go walking. Feels a great deal because she has to. Oct 31 94 Appetite fair. Behavior quiet. Bowels regular, lying down a great deal. Nov. 4 94 Appetite fair. Eats mostly dry food. Does not want to go walking.
Nov 30 94 Behavior quiet. Sleeps well. Reads quite a little. Lying down most of the time.
Dec 16 94 Behavior about the same. Appetite fair. Bowels reg: Refuses to go walking. Dec 31 94 Appetite and very good. Lying down most of the time. Does not talk much. Jany 25 95 Appetite some better. Very quiet. Bowels regular. In room most of time. Mch 10 95 Quiet in behavior. Appetite fair. Has many delusions.
Mch 31 95 Appetite about the same. Bowels reg: Quiet in behavior. Goes riding but never wants to go of his own accord. April 20. Complains of headache and of being weak. Does walking. May 17 95 No change.
June 6 Appetite fair. Stays in room most of time. Reads considerably. Expectorates some. Goes riding usually has to be forced to go out on lawn. July 7 Sick in bed. June 14 Up in room. Takes tonic.
July 20 Pale & thin. Aug 1 94 In bed since Aug 2. Appetite poor. Aug 19 Visited by Son. Aug 30 Married by Rev.
Sept 4 Sick in bed. Pale & thin. Takes tonic. Appetite poor. Oct 7 No change in patient. Has many delusions. Appetite fair. Still in bed. Oct 10 Shaves & Wsh. Oct 31 Appetite quite good. Bowels regular. Takes tonic. Nov 30 Looking some better. Appetite good. Bowels regular. Has many delusions. Dec 95 Very restless - Appetite good - Bowels
1896 regular. Still in bed - Sponge baths given - Takes tonic - Visited by son - J. 99 P. 80 R. 20
Jan 30 Remains about same - Has delusions. 98.8 P. 82 R 20 Talks but little - Takes tonic pills. Feb 78 Appetite good - Still on tonic. Talks sensibly but has delusions
Strup - normal. Mar 30 Appetite good: Bowels regular. Apr 20 Appetite quite good: bowels regular: Tonic given after meals: Sits up in bed to eat her meals
May 10 Appetite fair: Refuses tonic: Sits up in bed to eat. Bowels are regular:
Neat & tidy in habits.?
July Summary Nurse's Notes by Dr. E. L. Phelps:- Has many delusions: complains of being too weak to sit up, so is constantly in bed: Appetite fair: bowels regular: takes tonic:
Nov. Seems about the same: unable to sit up: in bed: complains of feeling weak: alcohol baths given: Feb 99 Condition about the same: Appetite fair: still weak
Strychnia given 1/40 gr. every 4 hours: May 30 Sat up two hours to-day: moans considerably of late: Seems very melancholy & talks about killing herself: Aug 99 Emaciated & pale: Very depressed most of time: quite weak: unable to sit up very long at a time.
Continued by Dr. Phelps Nov. 25/99 Visited by son: Patient uniformly very melancholy, has lain quietly in bed for a length of time exceeding that of almost any other patient here.
Complains of nothing except of her delusions: is always pale, & dull & quiet.
Sept 4 Visited by her son. Feb. 19 99 Still in bed & still behaves in exactly the same
1899 way. Has read several books this summer & once manifested sufficient
interest to discuss the contents quite intelligently. (Cont. by Dr. R. A. Webb.)
Mar. to Dec. Appetite variable: usually poor: sleeps well. Habits clean: very quiet
Remains in bed all of time: complains of being too weak to sit up.
Preoccupied most of time: reads some: sometimes converses readily.

(over to p. 340)

Personal and Medical History of Katie Kubista

ROBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3599

Residence, Sec 11. Hartland, Steele Co., Minn.

Date Admission, 20th December 1893.

Admitted by, Dr Phelps Hour, 7.30 Pm.

How Sent, M. B. Chadwick, J of P, Steele County

Sex, Female

Age, 27

Civil Condition, Divorced

Children, 5

Age Youngest Child, Eight months

Occupation, Housewife

Degree Education, Limited

Profession Religion, Catholic

Habits, probably intemperate

Nativity, Bohemia (Parents also born there).

Physicians Committing, J P Johnson & Geo. L. Hatch.

Correspondents, John & Louis Storza (brothers) Faith Jan Storza

Ho Family Physcn Mrs. Howard PO

No. for Year, 169.

Insane Relatives, None

Cause Exciting, Domestic troubles

Cause Predisposing, not given

Form,

Accompanying Bodily Disorder, Some fever at present

Suicidal or Not, Yes; attempted to drown herself.

Date of this Attack, December 19th 1893

Duration, about 1 Day.

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, 27.

Time of Leaving, Dec 24 '93

Time in Hospital, 4 days.

Result, Died, - Uraemia.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Joseph Kovars (brother-in-law) Owatonna Minn (Ap have correspondence with him)

Exam made by Dr Linton Phelps 20 Dec 93

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Sluggish

MEMORY: at times good

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Sometimes

REASONING POWER:

Ordinary Subjects, not good

Own Mental State,

Special Subjects,

EMOTIONAL STATE: Very much agitated

Normal, Calm, Tossing self about the bed

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Complains of severe

Coherent or Incoherent, pain in back and

Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:

At times talks coherently then very incoherent, shows some typhoid symptoms - This patient was carried in and put right to bed Temperature in morning 103 4/5

Personal and Medical History of Katie Kubista

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ WEIGHT, ✓ NUTRITION, Good

WOUNDS OR ABNORMALITIES, large blister on bottom of left foot

TONGUE, Tremors, Coatings, Dry pasty Moist Promptness Movement,

PUPILS, Equality, Equal Size, normal

Response Light, Accommodation,

SIGHT, seems good

HEARING, Good

COORDINATION, Arms, seems good in arms

Legs, Can not test.

TREMORS, Hands, Tongue,

Facial Muscles, Can not test. General,

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Wild, staring

SENSIBILITY,

HEART, Sounds are normal, but quickened

LUNGS,

EXAM. URINE. Containing large quantity of albumen

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,

PULSE, 120 RESP., Quickened TEMP., 103 4/6

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, unknown ONSET GRADUAL OR SUDDEN, unknown

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

Mother or Mat. Relations, Unknown

Father or Pat. Relations,

Brothers or Sisters, 1 Sister healthy

Personal and Medical History of Katie Kubrista

LEBERT, FICLAS & CHAMBERS, DAVENPORT, IOWA

1893

This patient was brought here by Sheriff J. Z. Pancard, attended by her 2 brothers, with following history. There is no history of consanguinity or hereditity. This is 1st attack. Symptoms manifested yesterday (Dec 19/93); ran away with a view to drowning herself. Not yet time to determine status of disease. Is not variable; no rational intervals. Derangement now shown by claiming she is a devil and wants to be killed. Patient has shown no disposition to injure others. She is, however, suicidal. Has attempted it by drowning). Propensity not now active. Is not of filthy or destructive habits. No peculiarities of temper as noted previously shown. There is found history of intemperance on mother's side. There is no history of any severe disease or injury to head. Has had to be confined for the last 2 days. Supposed cause of the disease is Domestic troubles. She has had no medical treatment. On personal examination, the following noted; intellect dull; expression of countenance listless; trembling of limbs; waving of body; patient would not or could not walk; was speechless. Circulation 120°; Respiration normal.

Dec 20 Dec 20/93. On admission, patient is in seemingly feverish condition (P 120). Has somewhat perverse & had to be carried up to the ward - B.S. - (S.R. Complexion light; hair brown; eyes gray; Condition of skin good; no marks or scars; a small bruise on back - was very dirty, but no vermin - left foot swollen & quite painful. Patient seems quite helpless.).

Dec 23 Rest on C. Opened blister on foot. Milk 3/ 1m/8. Face very much flushed. Complains of severe pain in back. Some tenderness of abdomen especially in right illiac region. Some rose spots on chest & abdomen. Tongue dry & parched. Heavily coated. Very large blister on bottom of L. foot. The whole foot swollen & L.E. Says came by getting it too cold. Dec 23 94 Foot dressed. Mouth cleaned with Listerine. Bowels constipated. Took 2 pills. Dec 23 94 Quite restless. Seems to be in pain. Morning wandering incoherently. Mouth washed. Dec 24 94 Very noisy. Refused to take brandy. Can't keep her in restraint. Pulse jerking, impossible to take it, also temperature. Out of bed 3 or 4 times. Put in restraint. Noisy all the morning until about 1 PM. Throat very sore. Refuses to swallow. Morning, face flushed, faced turned back, rattled in throat. Eyes changed 2.15 PM. For particulars see nurse's record.)

Died

Personal and Medical History of Mary Gallien

From p. 336.

1899 and talks quite sensibly; at times is irritable & refuses to speak:

July 4 Visited by son Sept. 1 - Feb 28 1900. Dr Heyendahl Jan 1900. Wt 69# Not in habits. Quiet. Kept in bed. Very feeble. Appetite poor. Bowels moved daily. Answers questions. Mch 1 - Nov 30 1900 In bed. Tidy. Does not converse very much. Takes daily paper & reads a great deal. Appetite good. Sleeps well. Bowels regular. June 4 Visited by daughter & son-in-law. Dec 1 - Feb 28. Remains in bed constantly. Wt 65#. Does not sleep well. Mar. to June 1901 Visited by son, no change in either mental or physical condition. Wt. 61#. June to Sept. Aug. 28 visited by son condition same as last reported. Aug. 30 Wt. 60 1/4 #.

Sept to Dec. Nov. 28 visited by son, neat in habits, remains in bed, Expresses the idea that she wishes she could die. Wt. 63 1/2 #.

Dec 1, 1901 to Feb 27 - 02 Wt 62 1/2 # No change. March 02 to July 1st No change visited by son. July 1st Wt 63# Sept 3rd Visited by son. Nov 23rd no change Wt. 60# Dec. 31 02 Patient confined to bed for several years: very melancholy: eats and sleeps fairly well: reads her paper daily. observes what goes on about her: converses very little.

Personal and Medical History of Ragnel Hansen

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3600.
Residence, Webster Township, Rice County
Date Admission, 20th December 1893
Admitted by, Dr. Phelps Hour, 7.30 PM.
How Sent, R. R. Mail, Jof P, Rice County.
Sex, Female
Age, 62 years
Civil Condition, Widowed
Children, 7
Age Youngest Child, 18 years
Occupation, Housewife (husband was laborer)
Degree Education, Limited to reading & writing
Profession Religion, Lutheran
Habits, not intemperate
Nativity, Norway, (Parents also born there).
Physicians Committing, A. J. Schmidt & H. A. Hunt
Correspondents, Son in law address?
No family Physcn

No. for Year, 170.
Insane Relatives, none
Cause Exciting, not definitely known
Cause Predisposing, not given
Form,
Accompanying Bodily Disorder, Partial Paralysis
Suicidal or Not, not.
Date of this Attack, 3 months ago
Duration, 3 months.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 62.
Time of Leaving, Jan 10-94
Time in Hospital, 21 days.
Result, Died

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exam made by Drs Rm & H. Phelps Dec 22. 93.

MENTAL ACTIVITY:
Clear or Confused, Confused.
Quick or Sluggish, sluggish.
MEMORY: Probably impaired
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY: Dull.
Alert or Dull,
Correct or Illusive,
REASONING POWER: Impaired.
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, Can not determine.
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: answers some questions
Coherent or Incoherent, but can talk very little
Voluble or Reticent, Incoherent.

Personal and Medical History of Ragnel Hansen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Fair
WOUNDS OR ABNORMALITIES, none
TONGUE, Tremors, none. Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, normal
Response Light, Respond normally Accommodation,
SIGHT, Good
HEARING, Good.
COORDINATION, Arms, Partial paralysis of whole right side.
Legs, Walks with great difficulty, cannot stand on foot. cond. impaired.
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Hesitating Slurred, Impediment Speech.
FACIAL EXPRESSION, Dull and demented.
SENSIBILITY,
HEART, Sounds are normal.
LUNGS, Respiration impaired.
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, careless, dirty. Clean, Careless,
BOWELS, Normal, Constipated, Constipated. Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 84 weak. RESP., Impaired. 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 Ragnel Hansen

1893

EARCAT, FISLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Sheriffs Deputy Will Hibbard, attended by her son-in-law with the following history. As to consanguinity not known; no insane relatives. This is the 1st attack, symptoms appearing 3 months ago; left home & wandered about; also was wandering in mind, talking irrelevantly. Disease seems increasing; is not variable; no rational intervals. Derangement now shown by nothing special. Patient talks little; is worse & more restless in mornings; tries to get from house through windows &c and requires constant attention. She is not disposed to injure others, nor suicidal. Habits are very filthy. No peculiarities of disposition were previously known. There is no history of intemperance as to patient; not known, as to her parents. For past 2 months, has had to be restrained & watched. Cause of the disease not definitely known. She has had no medical treatment. On personal examination, there is evidence of partial paralysis; partial loss of speech and motion on R. side. Idiotic expression. Had severe headaches Early in sickness. Only says "Yes" or "No". Patient lay in lounge, and, with assistance, walked across room, but would do nothing else. Is apathetic; at times, very restless. Her appetite is good, and she sleeps well. She is continually given to wandering about and restraint has to be used to keep her in-doors &c. &c.

Dec 20 Dec 20/93. On admission, is in a weak & paralyzed Condition. Had to be carried to Ward – B3 – (SR. Complexion light; hair brown; eyes gray; condition of skin, good; no marks or bruises. Bodily condition quite dirty. Right side paralyzed. Behavior quite good). P 84. R 18 T. 96 4/5. Dec 21. 93 Behavior quiet Can not talk any. Appetite good. Sleep good P 82 R 19. T 97. Dec 22 93 Behavior quiet Can not walk Sits in a chair. Must be assisted in getting up, otherwise will fall on the floor. Never talks. Appetite good Bowels moved. P 84 R 20. T 97. Dec 23. 93 Behavior quiet. Sits in a chair. Tried to get up by herself & fell on the floor. Never talks. P 80. Dec 24. 93 Seems restless. Fell several times on the floor Wants to lie on the floor. Appetite good Dirty in habits. Dec 25 93 Behavior quiet good. Bowels regular. Takes medicine. P 82. Dec 26. 93 No change. Dec 27 93 Behavior good Is very helpless. Fell out of her chair once. Appetite good P. 82. Dec 28 93 Behavior quiet. Appetite good Can't walk at all P. 80. Dec 29 93 Behavior quiet. Can't use her feet. Appetite good P. 84. Dec. 30 93 Same. Dec 31. 93. Behavior quiet. Never talks. Appetite good Has to be fed P 82 January 1. 1894. No change Jany 2. 94. Behavior quite helpless. Dirty in habits. Can't walk. Makes efforts to talk, but can not talk sensibly. Jan 3 94 Appetite good. Takes tonic. No change Jan 6-1894 Taken suddenly sick and put to bed Jan 7 Sick in bed. 8 & 9 in bed. Jan 10 Died quite suddenly

Died

Personal and Medical History of Maggie Flynn

From Folio 364.

Sept 1 – 1898 1900 (Dr Heyerdale) Sept 15 Complains of feeling sick to stomach also had convulsion. Oct 23 Trans. to B1. Oct 27 Has frequent convulsions & today had four bruises on knee & one on fore head: probably done during convulsion.

Jan 18 Wt. 266 lbs Pts 23. Sits quietly about part of time: Occasionally talkative: Bowels regular: Sleeps well: Has frequent convulsions Mch 1 – Aug 31 1900 (Dr Linton) untidy & disagreeable at times: Talks to an imaginary people: Sits in chair most of day: Bowels regular. Sleeps well: appetite good: Eats from tray because inclined to take food from other patients. Mch 4. Taught nurses. Mch 9. Had convulsion: Apr 9 Had three convulsions: Apr 17. Had two Apr 24. One. Apr 30 one May 1. Two. May 4 three. July 16 Vaccinated Sept 1 – Nov 30 1900 Oct 1 – 17. Confined to bed with diarrhoea. grim medicine – Appetite good: Eats from tray: Menstruates regularly: Has many convulsions Nov 16 Wt 231 lbs Latter part of November hysterical & noisy: laughed & cried &c. Dec 1 – Feb 28. General health good. No change: Mch 1 Wt 230 lbs

March 1 – June 1 – 1901 General condition unchanged. May 29 Wt. 219 3/4 #

June to Sept. 1901. No change in either mental or physical condition. Sept. 2 Wt. 213 #. Sept. to Dec. No change Nov. 27 Wt. 207 #.

to Feb. 1, 1903 General health good: appetite good: bowels regular: sleeps well: menstruates regularly: is clean and neat in habits and appearance: subject to epileptic convulsions: attends no amusements: takes exercise when willing: at times answers questions sensibly: preceding the epileptic attacks she is quite disturbed and restless running wildly up and down the hall. at other times is quiet. Nov. 27th Wt. 197 #.

Personal and Medical History of Kate Ryan

GIBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3607.
No. for Year, 177.
Residence, South Stillwater, Minn.
Insane Relatives, none
Date Admission, 30th December 1893.
Cause Exciting, Sequelae of La Grippe
Admitted by, D. Phelps Hour, 7 P.M.
Cause Predisposing, not given
How Sent, Rudolph Schmicker, Jof P. Washington County
Form,
Sex, Female
Accompanying Bodily Disorder, None Mentioned
Age, 34
Suicidal or Not, Not
Civil Condition, Single
Date of this Attack, December 8th 1893
Children, —
Duration, about 3 weeks.
Age Youngest Child, —
No. of Attack, 1st
Occupation, Housework. (father Stone-mason).
No. of Admissions, 1st
Degree Education, Common School
Age First Attack, 34 years.
Profession Religion, Catholic
Time of Leaving, July 5th 95
Habits, not intemperate.
Time in Hospital, 1 year. 6 mos. & 5 Days
Nativity, Canada (parents born in Ireland).
Result, Died — Nov 6/95 — autopsied
Physicians Committing, W. H. Laine and H. H. Pratt.
Correspondents, (Sister) Mrs Mary Burns. S. Stillwater, Minn
Family Physician H. H. Pratt. res. Stillwater, Minn

EXAMINATION ON ADMISSION.

Exam. Jany 24. 94 by Drs. A. M. & L. Parker.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Sluggish.
MEMORY: Can not test.
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER: Can not test.
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS: Refuses to talk.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Depressed.
DELUSIONS: Probably has.
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Will not talk.
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Kate Ryan

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2 in WEIGHT, 124 lbs. NUTRITION, poor
WOUNDS OR ABNORMALITIES, none.
TONGUE, Tremors, Coatings, Promptness Movement, sluggish.
PUPILS, Equality, Equal Size,
Response Light, Accommodation,
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good

Case No. 3607. Kate Ryan. Vol. 24.

The Law of 1893 having been declared unconstitutional this patient was recommitted. New commitment papers in box file in vault with the original ones.

mk.

FACIAL EXPRESSION, worried and anxious.
SENSIBILITY,
HEART, Sounds normal
LUNGS, Respiration shallow some dullness on percussion.
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, at times Clean, Careless,
BOWELS, Normal, Constipated, rather Irregular,
APPETITE, Good, Medium, Very Poor, requires feeding.
SLEEP, Good, well 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, Unknown
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Kate Ryan

BARRETT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3607.
Residence, South Stillwater, Minn.
Date Admission, 30th December 1893.
Admitted by, D. Phelps Hour, 7 PM.
How Sent, Rudolph Lehnicke, Jot P. Washington County
Sex, Female
Age, 34
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Housework. (father Stone-mason)
Degree Education, Common School
Profession Religion, Catholic
Habits, not intemperate.
Nativity, Canada (parents born in Ireland).
Physicians Committing, W. H. Laine and H. H. Pratt.
Correspondents, (Sister) Mrs Mary Burns. S. Stillwater. Minn
Family Physician H. H. Pratt. mst. Stillwater, Minn

No. for Year, 177.
Insane Relatives, none
Cause Exciting, Sequelae of La Grippe
Cause Predisposing, not given
Form,
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, not
Date of this Attack, December 8th 1893
" 3 weeks.
Time in Hospital,
Result, Died — Nov 6/94

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exam Jany 24 94 by Drs. A. M. & S. C. Phelps.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Sluggish.
MEMORY: Can not test.
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER: Can not test.
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS: Refuses to talk.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Depressed.
DELUSIONS: Probably has.
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Will not talk.
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Kate Ryan

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2 in WEIGHT, 124 lbs. NUTRITION, poor
WOUNDS OR ABNORMALITIES, none.
TONGUE, Tremors, Coatings, Promptness Movement, Sluggish.
PUPILS, Equality, Equal. Size,
Response Light, Accommodation,
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs, Good.
TREMORS, Hands, none Tongue, none
Facial Muscles, General, none
REFLEXES, Patellar, Both. q.
Other Reflexes,
ARTICULATION, Hesitating, Slurred, Does not talk.
FACIAL EXPRESSION, Worried at anxious.
SENSIBILITY,
HEART, Sounds normal
LUNGS, Respiration shallow some dullness on percussion.
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, at times Clean, Careless,
BOWELS, Normal, Constipated, rather. Irregular,
APPETITE, Good, Medium, Very Poor, requires feeding.
SLEEP, Good, well 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, Unknown to Mr Mustons
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Kate Ryan

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Sheriff A.L. Gillespie, attended by Cora Mercier, with the following history of case. There is no history of Consanguinity or heredity. This is 1st attack, first symptoms appearing December 8th following an attack of La Grippe: She left the house wandered off through the snow. Disease seems stationary; but is variable time and rational intervals, but not at regular periods. Derangement now shown in that she imagines she has committed a crime for which she may be hung. Patient is neither disposed to injure other, nor suicidal. Habits somewhat destructive, tearing her clothing. No peculiarities of disposition is now previously shown. There is no history of intemperance, nor of any epilepsy, or head-injury &c. During the last three weeks, She has been under restraint. Supposed cause of the disease is Sequelae of La Grippe. Has been under treatment for the primary disease, La Grippe, and conditions following. On personal examination, She is in a dull condition; no disposition to converse; Pulling her hair & frequent rubbing of head. Would not enter into a conversation with either physician or the members of the family, during examination. She moved hands and arms above her head very frequently. Appearance & manner, very dull and stupid. From others also, we learn of this hallucination (?) of having committed some crime (this from family); and of her disposition to escape & wander away alone.

Dec 30 Dec 30/93. On admission, patient is found to be in fair physical condition. Was put on B3 (S.R. Complexion dark; hair brown; Eyes gray; Condition of skin good. No marks or scars. Right arm bruised & quite painful. Bodily Condition quite clean. No bodily peculiarities noted. Is very quietly behaved. Arm hurt by falling out of a window). Pulse 86 weak. Dec 31. 93. Behavior very quiet. Lying at the floor at times. Has not talked any. Has not taken any nourishment; slept about 3 hrs quietly, but restless the balance of the night. P 84 R 20.

1894
Jany 1 About the same. Has not taken any food. Was restless 2 hrs. Rested well the balance of night.
" 2 Has not taken any solid food. Drank milk & eggnog, as dir. Bowels very constipated. Gave enema as dir. Bowels moved. Has been in bed most of the day. Put on tonic. Gave her a sleeping dose. Rested well all night. Slight movement of the bowels during the night. Jany 3. 94 Gave milk and eggnog. Gave dose of salts. moved to C 2nd. Milk 3 11/17. Gave enema, castor oil and glycerine. Bowels moved freely. Took 2 eggnogs. Milk 3 11/17. very restless this morning. P 87. R 18. T 99 3/5. Jany 4. 94 Slept well all night. Ate all her meals well, took 2 eggnogs, complains of sore throat. Out of bed most of the day, lying on floor part of time. Lay over the side of bed & held her throat until she was black in the face. P 72. R 18. T 98 4/5.
Jany 5. Out of bed most of the night. Slept about 3 hrs. Upon ward. Appetite good. Takes 2 eggnogs per day. On tonic. P 72. R 18. T 98 3/5. Does not talk. Jany 6. 94 Slept quite well all night. Requires constant watching. Holds her throat until her face is black, pulls the sick patients out of bed. Appetite good. T 98 3/5. P 18. P 72. Extremely noisy 1/2 hr. rolling on floor & screaming. Took quieting dose. Jany 7. 94 Very quiet and slept well all night. Ate good breakfast. Took eggnog. Pulse 74. T 98 3/5. R 18. Transfer to B 2nd. Jany 8 2 10 and 11. Pulse well
Jany 12 Appetite fair, but will not feed herself; quiet most of the time. Has to be watched all the time. While bathing
" 13 tried to drown herself in the bathtub. Out of bed at 10 30. Restless most of the night. Slept 2 hrs. Jany 13. 94 About the same. Restless and awoke since 1 15 A.M. very much excited, tried to strangle herself, today. Had to be held.
" 18 in lower bay for 2 hours. Was given quieting dose, as directed. Jan 18 94. Was out of bed at 2. A.M.; restless until
" 19 morning; slept but 4 hours, last night. Jan 19. 94. Threw herself against heater and bruised right shoulder. Is mending.
" 20/29 Jany 25 94. Has slept very poorly the past 2 nights. Restless & frequently out of bed. Jan 29. 94. Again was very
" 31 restless last night & slept poorly. Jan 31. 94. Appetite is good, at times. Feeds herself. Has to be closely watched all the time; tries to get off by herself & then exhibits suicidal tendencies. Does not talk any. Habits are clean. —

Personal and Medical History of Kate Ryan

1894

Feb 19 Feb 19/94. Restless in early part of night; was given sleeping dose; then slept about 4 1/2 hours. —
" 23 Feb 23/94. Out of bed about midnight; quite noisy for an hour & so disturbing fellow patient (Mrs Bear). —
" 28 Feb 28/94. Continues, nightly, restless and noisy; frequently out of bed, rapping on door, talking loudly to self, hallooing; and has slept very poorly. Appetete is poor. Habit very untidy. Spits about on floor and on herself. At times, destructive to clothing. Had to put lock on shoes to keep them on. Will take off her clothing unless closely watched. ——— "———
Mar 2/4 Mar 2/94. Tried to strangle herself with an apron, today. Mar 4/94. Has continued restless & noisy each night; frequently out of bed, rapping on door: cannot be kept in bed. Was put in a single room. Has been sleeping very poorly, only about 4 hours, each night. Has been given hypnotics, quite often.
" 8 Mar 8/94. Conduct & behavior, at night, continue about as above described. Patient sleeps very poorly. Is also frequently noisy by day; habit untidy. Imagines there is a snake in her throat "and she tries to choke it out. Still requires constant & close watching. Mar 13/94. Ingenuous today: again tried to strangle herself. During the past few nights has been noisy & restless, sleeping about 3 hours each.
" 16/20 Mar 16/94. Has rested well, the past 2 nights: has not required a sleeping dose. Mar 20/94. Has again become restless at night; frequently out of bed and has slept very poorly during the past 2 nights.
" 21 Mar 21/94. Patient was committed here under "Law of '93", recently declared unconstitutional. She was, today, Taken Out and Returned under "new warrant" from Olmsted County.
" 24 Out of bed Restless from 12 till 2 30 a.m. Quite noisy 5 A.M. Mch 25 94. Awoke & slightly noisy since 2 A.M. out of bed
" 26 Slept 4 1/2 hrs. out of bed & restless from 3 a.m. Mch 29 94 No change Mch 31 94 Out of bed slightly noisy from 3. a.m. till morning April 1 94 Out of bed at 2 a.m. Restless 2 1/2 hrs. April 2 94 Awake at 12 M. Quite noisy 1 hr. Not any change mentally. May 1 94. Not any change May 31 94. No change. June 3 94 Quite at times. Tries to get out.
Is very resistive July 31 94 Has been more quiet of late. Does not eat on floor. Does not eat well. Tries to run away, when out walking. Seems to be improving. Aug 31 94 Eats quite well. Behavior quiet. Goes out walking & riding. Seems to be improving. Very resistive at times. Sept. 18 94. Appetite good. Very resistive about going to dining room. Tries to run away when out walking. Noisy at times. Bowels regular.
Sept 27 94. Menstruating. Quite noisy during period. Screams and asks to get out.
Oct 10. Noisy all day screaming and trying to get out. Oct 31 94. Appetite good. Bowels regular. Goes walking.
Nov 2. Fought this morning very noisy all forenoon. Nov 4 94 Noisy all day. Nov 8 94 Fought with attendants had to be held one hour. Nov 24 94 Tried to run away when riding. Nov 30 94. Appetite fairly good. Bowels regular. Very resistive in going to dining room. Dec 4 94 Complains of nausea. Some emesis. Bowels constipated. Gave enema. Bowels moved but little. Menstruating. Dec 15 94 Enema given. Bowels moved quite freely. Resists about going to dining room. Dec 31 94 Goes walking & riding. Behavior about the same. Jany 20 95. Quiet most of the time but very resistive. Feb. 2 95 Talks of killing herself. Menstruating. Feb 20 95. Appetite good. Bowels reg: Resists about going to dining room.
Mch 10 95. Appetite good. Bowels reg: Works some on ward. Is very anxious to go home. Tries to run away when out walking. Apr 1 95. Transfer to B 2. Crying this evening wants to go down stairs again.
Apr 2 Transfer to B 2. Apr 10 95. Menstruating. Has a good appetite. Bowels reg. Goes walking & riding.
May 10. Does not seem as well of late. Talks to herself a good deal. May 23 95. Fought and threw a chair when asked to go out. Very quarrelsome all day. Menstruating. May 31 95 Seems much better. Quiet in behavior. Jan 12 & 18 95 Visited by friends & sister. July 5 95 Went home.

Personal and Medical History of Susan Miller

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3608. 178.

Residence, Richland, Minn. es, one brother.

Date Admission, 4th January 1894 ; Influenza

Admitted by, D. Phelps — Hour, 4 P.M. osing, Previous attack

How Sent, R. R. Mott, Jof P., Rice

Sex, Female. Bodily Disorder, none mentioned

Age, 50 (about) t, not.

Civil Condition, married ttack, 5 weeks ago

Children, 9 5 weeks.

Age Youngest Child, 23 years ck, 2nd probably (one about 20 yrs ago)

Occupation, Housewife; (husband a sions, 1st here (was before at St. Peter)

Degree Education, Common School Attack, about 3 o years.

Profession Religion, Methodist Time of Leaving,

Habits, no history of intemperance. — Time in Hospital,

Nativity, New York; (parents also born there) Result,

Physicians Committing, L. N. Jackson and D. McCool.

Correspondents, Emma Fuller — Address

Family Physician L. N. Jackson

EXAMINATION ON ADMISSION.

Exam Jan 5 94 by Dr Linton Phelps

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish.

MEMORY: Recalls fairly well, though

Past Events, impaired

Recent Events,

Special Subjects,

PERCEPTIVITY: Dull but partially correct

Alert or Dull,

Correct or Illusive,

REASONING POWER: Impaired.

Ordinary Subjects,

Own Mental State, does not realize clearly

Special Subjects,

GENERAL DESCRIPTIVE REMARKS: Mind apt to wander from one thing to another

Complains of dyspepsia. Pain in stomach.

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Indifferent.

Exalted,

Depressed,

DELUSIONS: Harmony.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: At times talks sensibly

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Susan Miller

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet WEIGHT, 105 lbs. NUTRITION, Poor, Pale.

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Slight Coatings, Pale reddish coat Promptness Movement,

PUPILS, Equality, Equal Size, normal

Response Light, Respond slowly Accommodation, same

SIGHT, Impaired, especially left eye

HEARING, Good.

Case No. 3608. Susan Miller. File No. 10.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

eals weak when standing

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Dull, dreaming.

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Seeming in good condition but weak

EXAM. URINE.

GYNAECOLOGICAL EXAM., Rectocele - Cystocele Prolapsus 1st degree Laceration cervix

MENSTRUATION, Ceased -

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, clean Careless,

BOWELS, Normal, Normal Constipated, Irregular, irregular

APPETITE, Good, Medium, Medium Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 67 weak. RESP., 20. TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, a few months. ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, were healthy

Father or Pat. Relations, Grandfather had nervous spells

Brothers or Sisters,

Personal and Medical History of Miller

EBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3608.

Residence, Richland, Minn.

Date Admission, 4th January 1894.

Admitted by, D. Phelps — Hour, 4 P.M.

How Sent, R. R. Mott, Jo P. Rice

Sex, Female

Age, 50 (about)

Civil Condition, Married

Children, 9

Age Youngest Child, 23 years

Occupation, Housewife; (husband a

Degree Education, Common School

Profession Religion, Methodist

Habits, no history of intemperance. —

Nativity, New York; (parents also born there)

Physicians Committing, T. N. Jackson and D. McCool

Correspondents, [illegible] Address??

Family Physician T. N. Jackson



3608

178.

Insane Relatives, one brother.

Cause Exciting, Influenza

Cause Predisposing, Previous attack

[illegible]ying Bodily Disorder, homesickness

[illegible] Not, not.

[illegible]s Attack, 5 weeks ago

5 weeks. —

[illegible]ck, 2nd probably (one about 20 yrs ago)

[illegible]ssions, 1st there (was before at St. Peter)

[illegible] Attack, about 30 years.

Time of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

Exam Jan 5 94 by D. Linton Phelps

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish.

MEMORY: Recalls fairly well, though

Past Events, impaired

Recent Events,

Special Subjects,

PERCEPTIVITY: Dull but partially correct

Alert or Dull,

Correct or Illusive,

REASONING POWER: Impaired.

Ordinary Subjects,

Own Mental State, does not realize clearly

Special Subjects,

GENERAL DESCRIPTIVE REMARKS: Mind apt to wander from one thing to another

Complains of dyspepsia. Pain in stomach.

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Indifferent

Exalted,

Depressed,

DELUSIONS: Harmony.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: At times talks sensibly

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Susan Miller

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet WEIGHT, 105 lbs. NUTRITION, Poor, Pale.

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Slight Coatings, Pale reddish coat Promptness Movement,

PUPILS, Equality, Equal Size, normal

Response Light, Respond slowly Accommodation, same

SIGHT, Impaired, especially left eye

HEARING, Good.

Case No. 3608. Susan Miller. File No. 10.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

[illegible] heals weak when standing

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Dull, dreaming.

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Seeming in good condition but weak

EXAM. URINE.

GYNAECOLOGICAL EXAM., Rectocele - Cystocele Prolapsus 2nd degree Laceration cervix

MENSTRUATION, Ceased -

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, clean Careless,

BOWELS, Normal, Normal Constipated, Irregular, irregular

APPETITE, Good, Medium, Medium Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 67 weak. RESP., 20. TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, a few months. ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, were healthy

Father or Pat. Relations, Grandfather had nervous spells

Brothers or Sisters,

Personal and Medical History of Susan Miller

ESSERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3608. 178.

Residence, Richland, Minn. es, one brother.

Date Admission, 4th January 1894 s; Influenza

Admitted by, D. Phelps — Hour, 4 P.M. osing, Previous attack

How Sent, R. F. Mott, Jof P. Rice

Sex, Female. g Bodily Disorder, none mentioned

Age, 50 (about) t, not.

Civil Condition, married ttack, 5 weeks ago

Children, 9 5 weeks.

Age Youngest Child, 23 years

Occupation, Housewife; (husband a

Degree Education, Common School

Profession Religion, Methodist

Habits, no history of intemperance.

Nativity, New York; (parents also born the

Physicians Committing, L. N. Jackson and D. McCool.

Correspondents, (Susan Miller) Common Knowledge — Address

Family Physician L. N. Jackson

EXAMINATION ON ADMISSION.

Exam Jan 5 9 94 by Dr Linton Phelps

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish.

MEMORY: Recalls fairly well, though

Past Events, impaired

Recent Events,

Special Subjects,

PERCEPTIVITY: Dull but partially correct

Alert or Dull,

Correct or Illusive,

REASONING POWER: Impaired.

Ordinary Subjects,

Own Mental State, does not realize clearly

Special Subjects,

GENERAL DESCRIPTIVE REMARKS: Mind apt to wander from one thing to another. Complains of dyspepsia. Pain in stomach.

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Indifferent.

Exalted,

Depressed,

DELUSIONS: Harmony.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: At times talks sensibly

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Susan Miller

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet WEIGHT, 105 lbs. NUTRITION, Poor, Pale.

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Slight Coatings, Pale red with white coat Promptness Movement,

PUPILS, Equality, Equal Size, normal

Response Light, Respond slowly Accommodation, same

SIGHT, Impaired, especially left eye

HEARING, Good.

COORDINATION, Arms, Tremble a little

Legs, unsteady

TREMORS, Hands, Slight Tongue, Slight.

Facial Muscles, General, Says feels weak when standing

REFLEXES, Patellar, Both absent.

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Dull, dreaming.

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Seeming in good condition but weak

EXAM. URINE.

GYNAECOLOGICAL EXAM., Rectocele-Cystocele Prolapsus 2nd degree Laceration cervix

MENSTRUATION, Ceased -

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, clean Careless,

BOWELS, Normal, ~~Normal~~ Constipated, Irregular, irregular

APPETITE, Good, Medium, Medium Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 67 weak. RESP., 20. TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, a few months. ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, were healthy

Father or Pat. Relations, Grandfather had nervous spells

Brothers or Sisters,

Personal and Medical History of Susan Miller

EMBLEY, PIDAN & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Wm G. Beardsley and Miss Emma Miller, with the following history. There is no history of Consanguinity, but some of heredity, one brother being insane. This is not the 1st attack; one occurred about 20 years ago, when she was sent to St Peters Hospital; was improved by treatment there and given into charge of her husband. (This not states how long she was at that hospital). Patient had Influenza about 6 weeks ago, and, 5 weeks ago, she became insane. Disease seems to be increasing: is not variable; no rational intervals. Derangement now shown in that she worries about family, when absent; fears they are being injured. Hallucinations and pretty constant. She is neither disposed to injure others, nor suicidal, but is disposed to destroy her clothing. No peculiarities of distortion &c noted previously shown. There is no history of intemperance nor of any severe disease &c. Careful oversight has been shown by family for past 6 weeks. The supposed cause of the disease is Influenza. She has received treatment for LaGrippe and Broncho-pneumonia. Has nutmeg & comium. Refused any medicine for last 2 weeks. On personal examination, patient is simple, hysterical. She said nothing special; answered questions in an hysterical fashion. Laughed immoderately; appearance & manner, hysterical & demented. There is a corroboration of foregoing facts by family & neighbors.

Jany 4 Jan 4/94. On admission, is in fair physical condition. Has pustule At East. (S.R. Complexion dark; hair dark brown; Eyes blue; condition of Skin normal. There is a small scar on chest. Bodily condition not very clean. Very quietly behaved. Admits she has been in St Peter Hospital before). P 90. R 19. T 98.

5 Very nervous & noisy. Restless at night. Sleeps scarcely any. Talk: Very delirious. Appetite poor. Sleep scarcely any. Cough: none. Complaints: none. P 91. R 18. T 98.

6 Very nervous & noisy. Tried to get out, when outside door opened. Would take off her shoes and pound the walls. Had to hold her nearly all afternoon. Jany 7 94 Ran up and down the hall, upsetting the beds and everything else in her way. Had to be watched closely. Jany 8 94 Appetite poor. Was put on tonics. Behavior the same. Jany 9 94. Was a little more quiet to day. Appetite somewhat better. Rested quite well. Jany 10 94 Appetite fair. Bowels regular. Was restless both day & night. Jany 11 94 Did not eat well to day. Eats more some days than others. Still very nervous. Jany 12 94 Appetite fair. Behavior a little more quiet than usual.

" 13 Did not eat nor sleep well. Behavior quite noisy. Jany 14 94. About the same. Jany 15 94

" 16 Appetite fair, more quiet than usual. Slept quite well last night. Jany 16 94 About the same

" 17 as yesterday, although quite restless in the night. Jany 17 94 Eats quite well. Is still nervous

" 18 restless at night. Jany 18 94 About the same. No complaints. Is on tonic

" 31 Jan 31/94. Patient continues quite noisy & restless at night. Appetite fair. Talk very delirious also incoherent in speech. Complains somewhat of a "pressure" in the stomach. Is on tonic. Habits clean.

Feb 20 Feby 20/94. Sleeps quite well. Appetite good. Is more quiet, of late. Works a little in ward, dining-room.

" 28 Feb 28/94. Patient was committed here under the "Law of 1893" recently declared unconstitutional. She was today, Taken out and Returned under a new Warrant from Olmsted County.

Mch 22nd 94 complains of head-ache & stomach trouble, Mch 24 appetite fair, clean, has not been feeling very well, for the past week, complains as above, at times works in ward & K. Apr. 13 94 is noisy, seems very nervous, Apr 25 94 appetite good, works a little on ward, has talked somewhat delirious.

Personal and Medical History of Susan Miller

May 1st 94 is worse. noisy & destructive, May 16 Transferred to C-1, 23rd is very noisy, had to be held about one hour to day, behavior usually quiet, is untidy, takes tonic. May 24 94 is very quiet to day. June 1 94 Appetite fair. Tidy in habits. Bowels reg. Does no work. Talk: incoherent. Behavior quite noisy at times. Past age of menstruation.

June 3 Noisy all day. Talking silly & incoherently. June 7 94 Visited by her daughter today. June 17 94 Complains of headache, put to bed, but would not lie still. Up in chair. July 1 94 Has been very disturbed & excited of late. Noisy & mischievous at times. Appetite improving. July 27 94 Very disturbed all morning. Destroyed bed clothes. PM

Aug 1 94 Singing & violent this morning. Had to be held in chair. A.M. Aug 2 94 Extremely noisy all forenoon. Complains a great deal of headache. Bowels constipated. Aug 3 94 Is very excitable. Sept 4 94 Appetite fairly good. Sleep poor. Behavior noisy at times. Helps in dining room. Talks silly at times, while at other times she talks quite sensibly. Tidy and clean in habits. Sept 10 94 Put to bed. Has attendant. Pulse very weak. Seemed to revive at once. Sept 16 94 Spent about the ward this morning. Seems quite well again. Oct 1 94 Clean and tidy in habits. Bansfo to Cr Oct 29 94

Oct 29 94 Bansfo to Cr Nov 6 94 Appetite good. Bowels regular. Talks a great deal at night. Is very noisy at times. Helps in the dining room. Nov. 16 94 Fighting some this morning. Very noisy and quarrelsome. Bansfo to Cr Nov 30 94 Appetite good. Quite noisy at night. Does not stay in bed. Dec. 10 94. Appetite good. Sleeps well. Has delusions. Has spells of crying. Wants to go home. Usually is very nice one day and the next one has spells of crying and quite noisy at times, destroys clothing. Works in dining room. Bowels reg: Gen health good. Jany 25 95: General health good. No change. Feb 15 95 Appetite very poor. Bowels reg: Does out walking & riding. Feb 25 95 Bansfo Cr

Mch 15 95: Visited by her daughter to day. Mch 29 95 Very noisy some days. Talking & scolding. Neat and clean in habits. Has delusions. Appetite good. Bowels regular. Does riding & walking. Does no work. Apr 6 95 Very noisy to day

Apr 29 95. Very noisy at times. Has delusions. Appetite quite good. Gen. health good. Bowels reg. Neat and clean in habits. Does walking. Does no work. May 13 95 Fainted twice this forenoon, has to be put to bed. May 14 Rested all day.

May 29 At times very noisy. Has not been feeling very well during the last few days. Appetite quite poor. Bowels reg: Very noisy during the night at times. Goes out riding & walking. Neat and clean in habits.

June 29 Not as noisy as usual during past month. Has not complained of feeling bad. Assists with work. Went walking & riding. Quiet & agreeable. Appetite fair. Bowels regular. Clean in habits.

July 31 Very noisy all day. Crying & scolding. Talks incoherently. Aug 31. Very quiet of late. No other change. Sept 30 Visited by daughter. Very nervous & quite noisy today. Oct 27 Very nervous. Talks incoherently. Talks to herself & is quite noisy at times to day.

Oct 29 Very noisy some days. Incoherent. At times appetite is fair at others very poor. Bowels regular. Goes walking & sometimes assists with work. Nov 27 Usually quiet. Tidy in dress & habits & assists some with work. Goes riding & walking. Does not struggle. Has no delusions. Appetite generally fairly good. Bowels regular. Sleeps quite well. Gen. health does not seem very good. Jan. 15 Very restless & noisy last few days. Feb. 27 Very quiet & agreeable some days, on others noisy & contrary. Has delusions & talks incoherently. Is neat & tidy in dress & habits. Assists some in dining room. Goes riding & walking. Appetite good. Bowels regular. Sleeps quite well. General health not very good. May 19 Very quiet & agreeable at times at others noisy & quarrelsome. Neat & clean in dress & habits. Assists some with dining room work

See Page 360

Personal and Medical History of Inga Johnson

previously Committed as "Inga Hansen"

EBBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3610.
Residence, 666 Wells St. St Paul
Date Admission, 4th January 1894.
Admitted by, Dr Phelps. Hour, 7 P.M.
How Sent, Jno. B. Oliver, Jof C. Ramsey County.
Sex, Female.
Age, 43.
Civil Condition, Married
Children, None
Age Youngest Child, —
Occupation, Housewife & Missionary (husband, Laborer).
Degree Education, Common School.
Profession Religion, "God's Church".
Habits, Probably good
Nativity, Sweden (Parents also born there).
Physicians Committing, J. M. & Gravel & G. J. Hanley
Correspondents, (Sister) Mrs Anna Larson, 1060 Arcade.
No Family Physician.

No. for Year, 180.
Insane Relatives, Brother; Father Intemperate
Cause Exciting, Religion
Cause Predisposing, previous attk; heredity also.
Form,
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, not.
Date of this Attack, probably sometime ago
Duration, Probably Sometime.
No. of Attack, 2nd probably (one abt 7 years ago).
No. of Admissions, 2nd (Re before Oct 11/87 to Oct 3/88)
Age First Attack, about 36 years.
Time of Leaving, Feb. 16th 1894
Time in Hospital, 1 mo, 12 ds.
Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Ex. by Dr. Linton Phelps. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, Quick
MEMORY:
Past Events,
Recent Events, Good.
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert.
Correct or Illusive,
REASONING POWER: Impaired.
Ordinary Subjects, " "
Own Mental State, " "
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Pleasant pr manner. Neat and tidy little in appearance.

EMOTIONAL STATE: Excitable but usually calm
Normal, Calm,
Indifferent,
Exalted,
Depressed,
DELUSIONS: Many on religious matters.
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent.
Voluble or Reticent,

Personal and Medical History of Inga Johnson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 4in WEIGHT, 156 lbs. NUTRITION, Extra good.
WOUNDS OR ABNORMALITIES, None.
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Normal Size,
Response Light, Accommodation,
SIGHT, Good.
HEARING, Good.
COORDINATION, Arms,
Legs,
TREMORS, Hands, None Tongue,
Facial Muscles, General, None
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Normal Slurred,
FACIAL EXPRESSION, Normal. Pleasant
SENSIBILITY,
HEART, Good condition
LUNGS,
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Well 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 Inga Johnson

HERBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA

1894

Was received here at the hands of Deputy Sheriff M. N. Goss, attended by Mr Akers, with following history of case. There is no history of consanguinity but there is of heredity; a brother being insane, father also intemperate. This is not 1st attack; She had one about 9 years ago, (see note below) when she was sent to this (Rochester) Hospital for about 1 year; subject religion. When first symptoms of this attack were manifested is not stated. Disease seems increasing, but is variable; as to intervals, unknown. Derangement now shown by "Genral delusions & hallucinations; "hears voices of God". Patient is neither disposed to injure others nor suicidal, nor filthy nor destructive. Previously, showed peculiarities re acts religion. There is no history of any severe disease &c. Supposed cause of the disease is religion. Unknown if patient has been under treatment. On personal examination says that "She hears the voice of God Every night". She wanted to go to Parkwood & to Stillwater. Her appearance & manner were those of an insane person.

Nov 8 This patient was here before, under name of "Inga Hanson", from October 11/87 to October 3/88. During her then stay, she plainly showed delusions, on religious subjects; had a fainting spells while here. Was full of religious ideas, when taken home by her relatives. Physical health was good. Was, at times of previous commitment, suicidally inclined - See Vol 9. page 27. No 1457

Jan 4 Jany 4 94. On admission, is in fair physical condition. Has pulse 132 Heart (S.R. Complexion light; hair light brown; eyes blue; condition of skin good. No marks or bruises. Bodily condition quite clean. No bodily peculiarities observed. Behavior is good. Talks quite rationally). Height 5 ft 4" Weight 156.

5 Behavior restless. Talking of home, quite rationally. Appetite good Rested well at night. Bowels regular. P Bet R 18. Jany 6. 94 Has same Rested well Jany 7. 94 Until the same Rested well till 4 30 A M, awoke talking and singing. quite noisy. Jany 8. 94 Awoke the same Rested quietly. Very quiet. Moved to B 1. Jany 9. 94 Appetite good Quiet all day Slept well Jany 10 94 Appetite good Slept well Quiet all day. Jany 11. 94 No change

Jany 13 94 In bed part of the day. Jany 13. 94 Up and took all her meals to day Seemed quite well

" 14 Went to Chapel to day Refused the medicine that was sent for her to take

" 15 Went to work in the Laundry to day Jany 16 94 Worked in laundry to day. Appetite good Sleeps well Jany 18. 94. Appetite good. Sleeps well. Had delusions Works in laundry. Removed to 9 2

Jany 21 Appetite fair Sleep generally good Excitable on religious topics. Works in laundry.

Feb 2 Went home to day with husband.

Disch.

Personal and Medical History of Bridget Donahue

June 27 Seems more disturbed. Tried to strangle herself during night. Complains of headache. vomited during night. Took a seidlitz powder. Inbed all day. Trans. to B 2.

July 5 Noisy at times. Appetite good. Bowels regular. Sleeps well. Goes riding & walking.

Aug 14 In bed all day. Complains of head ache. Aug 16 Has diarrhea. Refuses medicine

Aug 21 Quite noisy. Physicians note - Patient has a complexus of symptoms which have been thought to indicate fatty heart. No Bright has been demonstrated

Sept 4 Patient quite disturbed, Taught nurses. Has diarrhoea. Has delusions.

Sept 8 Visited by her sons. Sept 9 Patient vomiting. Sept 21 & 22 Has diarrhoea gave Hyp. Morphine 1/8 gr. Complains of pain in back & limbs. Quiet 1 hr. quite noisy during night. Sept 23 Upon ward to-day Sept 25 Had diarrhoea in night. Sept 26 In bed Morphine 1/8 gr. given. Sept 28 Bowels moved freely during night. Sep. 30 In bed most of day. Hyp. Morphine 1/8 gr. Oct 7 Vomited several times during night.

Oct 20 Complained of pain in lungs & kidneys. In bed all day Temp. 98. Bowels moved freely.

Nov 8 Bowels regular. Sleeps well. Appetite quite fair. Complains of pain in back. Very noisy at times. Nov 12 Inbed today. Complains of difficulty in breathing. Pulse very weak. Temp. Normal. Resp 24 Abdomen swollen. Nov 19 Up on ward.

Nov 27 28 29 In bed vomited during nights. Dec 16. In bed - Appetite fair - Has been sick several times going to bed - once vomited - Goes to bed occasionally

Feb 5 Went to bed this afternoon Hypo. morphia gr 1/8. Feb 6 Up on ward. complains of blind feeling.

Feb 14 Sick in bed. Has many delusions - Feb 17 Up on ward. So very noisy. Feb 19 In bed Nov. 1/4 gr. Hyp. Complains of pain in abdomen. Vomited several times

Feb 20 Up on ward. Feb 29 No change in behavior Mar. 30 Sleeps very well.

Very Noisy at times: Sick in bed. Apr 14 Complains of backache

Apr 16 Sleeps well. Very noisy at times: Has delusions: Sick in bed.

" 21 Complains of backache May 8 Sick in bed today: Taught. May 10 Sick in bed four days. Trans. to Infirmary ward. May 30. Has been in bed most of time since of last note. Seems about the same - does not improve much: Appetite poor: Bowels constipated: enemeta & Cathartics given as needed June 1/96 Has been steadily confined to bed. At times slight discharge of blood from bowels: It has been necessary to return to liquid diet entirely. July 4 Is now able to eat light diet again: Bowels move. July 7 Temp & bowels normal last few days: Very restless.

July 9 Some bloody discharge: Remains constantly in bed. Eats light diet: Strych. given hypodermically every 4 hours. July 19 Has remained in bed most of time: Takes very little food: Takes wine, lemonade & juice of orange occasionally: Bowels moved: Sat up in Chair during afternoon for a short time. July 20 Up & dressed right along: Eats solid food Temp. about normal most of time. Summary Nurses Notes by Dr. G. L. Phelps: July 10 Quite stupid at times: appetite fair: some emesis occasionally: Sleeps well: Nov 9 no change

Jan. 97 Appetite good: Has diarrhoea almost constantly: Has rectal abscess with foul smelling discharge: Very obstinate & refuses all medicine: Has many delusions:

Apr. No change: June 97 Still has diarrhoea: complains of pain in stomach & abdomen Very dull & stupid at times: Aug 97 The same.

(Continued on p. 368)

Personal and Medical History of Anna Clark
(probably Anna)

GILBERT, RICHAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3612.
Residence, South Park, Minn.
Date Admission, 5th January 1894.
Admitted by, D. Phelps Hour, 7 PM
How Sent, Thos. P. Moran, Jof P. Dakota County.
Sex, Female
Age, 65
Civil Condition, Widowed
Children, Three
Age Youngest Child, 32 years
Occupation, Housewife (husband was a Wheelwright)
Degree Education, moderate.
Profession Religion, Congregational
Habits, no history of intemperance.
Nativity, Connecticut (parents also born there).
Physicians Committing, A. VanBeeck, & N. A. Finch
Correspondents, (Son) A. D. S. Clark - South Park, Minn.
Family Physician A. W. Lufkin.

No. for Year, 182
Insane Relatives, Mother said to have been deranged
Cause Exciting, Maternity
Cause Predisposing, previous attacks & prob. heredity
Form,
Accompanying Bodily Disorder, Excessive Nervousness
Suicidal or Not, not
Date of this Attack, about a week ago
Duration, about a week
No. of Attack, several probably –
No. of Admissions, 1st here (was in Hosp.l at Hartford, Conn)
Age First Attack, about 20.
Time of Leaving, Mch. 1894
Time in Hospital, 2 mos. 9 dys.
Result, Rec.

Crossed off from Absentee List, April 1st, 1897, because illegally committed.

EXAMINATION ON ADMISSION.

Exam by Dr Lenlow Phelps Janry. 1894

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear now
Quick or Sluggish, Quick
MEMORY:
Past Events, Good
Recent Events, Good.
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, correct, but illusive at first
REASONING POWER:
Ordinary Subjects, Good
Own Mental State, Good
Special Subjects,
GENERAL DESCRIPTIVE REMARKS: Inclines to get a little excited in conversation. 1 year ago very sick. Malarial fever & chills. Very sick abed. Says had some Kidney trouble. Afraid it is in the family. Deranged several times during her life & had mental trouble.

EMOTIONAL STATE:
Normal, Calm, Calm, but Easily Excited.
Indifferent, when she often cries.
Exalted,
Depressed,
DELUSIONS: None now
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Coherent Very talkative.
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Anna Clark

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 4 ft 8 in WEIGHT, 102 pds NUTRITION, Good.
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, None Coatings, dusky & coated Promptness Movement,
PUPILS, Equality, Equal Size, dilated slightly
Response Light, Good Accommodation, Good
SIGHT, Impaired, near sighted, glasses.
HEARING, Good
COORDINATION, Arms, Impaired some tremor
Legs, Weak, unsteady
TREMORS, Hands, Slight Tongue,
Facial Muscles, General, some uncertainty
REFLEXES, Patellar, Equal +.
Other Reflexes,
ARTICULATION, Hesitating, Normal Slurred,
FACIAL EXPRESSION, Normal. Pleasant.
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,		Clean,	Careless,
BOWELS, Normal,	Normal	Constipated,	Irregular,
APPETITE, Good,	Good	Medium,	Poor,
SLEEP, Good,		Poor,	Irregular,
PULSE, 96 -		RESP., 21	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 at 44 consumption
Father or Pat. Relations, father healthy died at 84
Brothers or Sisters, 2 brothers not well

Personal and Medical History of Anna Clark

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1894

This patient was brought here by A.D.S. Clark, her son, with the following history of her case. There is no history of consanguinity but some of heredity, her mother said to have been deranged; this is not the 1st attack; she had the first one about 45 years ago, (others at various times since.) for 15 months. Has been in Asylum in Hartford, Connecticut, twice; cannot find out for how long; the result of treatment there was good. First symptoms of this attack were manifested about 1 week ago, by singing loud, talking, stamping feet & running about in the night. The disease seems stationary; is variable, and there are rational intervals, but not at regular periods. Derangement now shown in the way of financial troubles, excitement. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. There is no history of intemperance nor of any severe disease or injury to head. Has had no treatment, except while at Asylum. On personal examination, Patient is excessively nervous, incoherent in her stories, alternating with excitement & depression; hysterical. Spoke of her difficulty serving the Lord, difficulty with her daughter-in-law, difficulty in adjusting her father & husband's estate. She laughed & cried alternately; talks a great deal.

Note by D.P. Patient, on admission, gives a remarkably clear and intelligent account of her own case. Says she has been in an Asylum 2 times before; gives details. Says, did not think it necessary to come here, except could not get right care and treatment at home. Says, has not been so before since age 30, though had some slight "spells". Says "dont do anything very bad, except to sing & laugh & talk &c." — "

Jan 5 Jan 5/94. On admission, is in fair physical condition. Wasp. to 13² / S.R. Hair gray; eyes are brownish gray; condition of skin, normal. Bodily condition very clean. Behavior, very quiet). — Said "She enjoyed her bath and felt refreshed." Jany 6 94. Restless most of the time & at times noisy. Talk quite rational. Appetite good. Out of bed twice. Restless until 4 A.M. Slept 2 hrs. Talking & crying 4 hrs. Bowels: Complains of constipation. Given med. bowels moved O 84 A 18.

" 7 Restless from 2 a.m. Talking. Slept 4 hrs. Jany. 8 94 Out of bed 1/2 hr. restless till 4 am

" 9 Restless 2d night talking from 3. A.M. Jany 10 94 Restless 2d & talking till 11 PM. Jany 11 94 Rested well

" 12 Rested well. 1/13/94 Rested well. 1/14 94 Very quiet most of the time. Attended chapel.

" 15 Restless 3d & walks quiet x 15. Out on hall 4. A.M. Jany 16 94 Very nice & quiet on ward. Appetite good. Very tidy in habits & neat about self. Talks rational. Moved to ward E.

" 17 Quiet and ladylike. Says she does not sleep so very well. Appetite fair. Bowels act O.K. constipated. No cough but complains of catarrhal trouble. Jany 18 94. No special change. Was not talking quite so much to day. Is quite restless however. Jany 19 94 Appetite good. Sleeps generally well. Is less nervous but still talking considerably. Bowels quite regular now. Using spray for catarrh in head. On tonic.

Mch 13 94 Has been seemingly very much improved of late. Very quiet.

March 16 94. Went home to day. Had become quiet & ladylike. Helped in the sewing room. Also worked at her own clothes. Neat in appearance.

Dr's dk.

Personal and Medical History of Susan Miller.

1894 From Page 352

Nerve struggles: Goes riding & walking; Appetite fairly good: bowels regular: Sleeps poorly: General health quite good: May 14 Went Home for a visit. Returned June 23 1894. Summary Nurse's Notes by Dr. S.P. Phelps:- July 96 At times is quite sensible: Has regular spells when she is quite disturbed & violent: Scolds a good deal: General health rather impaired: Nov 96 no change: Jan 97 At present quiet: Has noisy & excited spells at regular intervals: When quiet talks fairly well: Appetite fair: bowels regular:

1897 May. No change. Aug 97 At times very irritable: Appetite good: usually sleeps well: works in ward dining-room. Continued by Dr. McPhelps. Patient is now as she has been for a good while; at times rather restless & silly in talk, at others comparatively quiet. Oct 27 M. 129# Feb 8 98 Patient today in bed, complaining of headache & sore throat. Jan 27 99 Patient's general condition unchanged. Continued by Dr. R.A. Belt

1899 to Sept. Appetite variable: receives specials part of times: bowels regular: Mar. takes out door exercise: at times is extremely noisy both day & night when mentally disturbed is often up greater part of night: Slight cold & sore throat: takes medicine: assists with dining room work at times: Aug 16 Visited by two daughters: Sept 1 - Feb 28 1900 (Bd Hyderdale) Noisy at times day & night. Appetite fair: Bowels regular: Goes riding & walking: Assists some in dining room & on ward. Jan 14 Wt. 125#. Mch 1 - Nov 30 Appetite fair: Sleeps quite well: Bowels regular: Goes riding & walking: Neat: Has special diet very much excited & noisy at times: Scolds a good deal: From Apr 20 - May 27. - sleepless & noisy: & excited - May 13. Dress to 6 2. May 27. Quiet on ward. July 3 Vaccinated. Appetite fair: on special diet Noisy at times. Aug 10. Right eye inflamed: readily improved under treatment. Nov 16 Dec 20 1901 - Feb 28 1901. (Dr Linton) Dec. 20. Much disturbed: given Trional 3 x d. Jan. 10. Sick in bed: General health good: Bowels regular: goes riding & walking - When not in spell appetite fairly good. goes riding & walking: & assists in dining room. When in spell noisy: incoherent: profane: excited & active: seems to have no control of herself & is destructive & sometimes threatens violence. More or less disturbed from Dec 20 to Feb 13. Feb 28. Wt. 121# Mar 1 - June 1 1901 Mar. 16 patients left eye swollen and inflamed, small abcess about the inner canthus of eye opened and treated with per oxide and boric acid daily. Was treated through out the month of March when the condition was removed. General condition mentally and physically unchanged. May 28 Wt. 121#.

June to Sept. No change in condition, Aug. 31 Wt. 123#. Sept. to Dec From Oct. 6th. to 27th. was very much disturbed was kept in seclusion a greater part of the time, trans. to B.1. No change in condition. Nov. 22 Wt. 114#. Up to Feb. 1 1903. Genl health fairly good: appetite good: bowels regular: habits clean & tidy: sleeps well when not disturbed: converses quite sensibly: at her best assists with dining room work: subject to attacks of considerable disturbance during which she is destructive & noisy requiring hypnotics: at other times is very pleasant and agreeable: attends Chapel & amusements

Personal and Medical History of Maggie Flynn

SEBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3620.
Residence, Rochester, Minn.
Date Admission, 11th January 1894.
Admitted by, D. Phelps Hour, 4 Pm
How Sent, Thomas Fraser, Jct P, Olmsted County
Sex, Female
Age, 25 years
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, House-keeper.
Degree Education, None.
Profession Religion, Catholic.
Habits, Not Known.
Nativity, Wisconsin; (Parents born in Ireland).
Physicians Committing, A.W. Stuckfield & Chas. L. Gaynor
Correspondents, (Mother's address) Ellsworth, Noblee County.
Family Physician, not known.



No. for Year, 190.
Insane Relatives, not known.
Cause Exciting, not known
Cause Predisposing, Epilepsy.
Form,
Accompanying Bodily Disorder, Epilepsy.
Suicidal or Not, Not.
Date of this Attack, 13 years ago
Duration, 13 years.
No. of Attack, 1st. (Seems continuous for 13 years).
No. of Admissions, 1st
Age First Attack, about 12 years.
Time of Leaving,
Time 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:

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 Maggie Flynn

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6½ WEIGHT, 135½ lbs. NUTRITION,
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Size,
Response Light, Accommodation,
SIGHT,
HEARING,
COORDINATION, Arms,

Case No. 3620. Maggie Flynn. File No. 10.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
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 Maggie Flynn

EGBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3620.
Residence, Rochester, Minn.
Date Admission, 11th January 1894.
Admitted by, D. Phelps Hour, 4 PM
How Sent, Thomas Fraser, Jct P., Olmsted County
Sex, Female
Age, 25 years
Civil Condition, single
Children,
Age Youngest Child, —
Occupation, House-keeper.
Degree Education, none
Profession Religion, Catholic.
Habits, not known.
Nativity, Wisconsin; (parents born in Ireland).
Physicians Committing, A.W. Stinchfield & Chas. J. Gaynes
Correspondents, (Mother's address) Ellsworth, Pollock County.
Family Physician, not known.



No. for Year, 190.
Insane Relatives, not known.
Cause Exciting, not known
Cause Predisposing, Epilepsy.
Form,
Accompanying Bodily Disorder, Epilepsy.
Suicidal or Not, not.
Date of this Attack, 13 years ago
Duration, 13 years.
[illegible] 1st (Seems continuous for 13 years).
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:

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 Maggie Flynn

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 Feet 6½ WEIGHT, 135½ 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.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
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 Maggie Flynn

1894

GIBERT, PUGAR & SHAMBERG, DAVENPORT, IOWA.

This patient was received here at the hands of Sheriff's Deputy John P. Posey, with the following history of her case. Here is no history of Consanguinity; ~~no~~ heredity, unknown. This is 1st attack; seems continuous. Has not previously been in hospital. First symptoms of this attack manifested thirteen years ago. Disease seems increasing; is variable & there are rational intervals, but at irregular periods. Derangement is now shown by defective intelligence, from Epilepsy. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Do not know if any peculiarities of disposition were shown previous to accession of disease. There is no family history of interference given. Accompanying bodily disorder is Epilepsy. She has not been restrained or confined. Cause of disease is not known. She is said to have been treated, but without any result. — — —

On personal examination, there is observed a faulty intellect. She made incoherent statements. Was restless or dull and stupid. Appearance & manner that of stupidity. From other sources it is learned she shows no delicacy or care for exposure.

Jan 11 Jan 11/94. On admission, is in fair condition. Temperature C³. (S.R. Complexion fair; hair dark brown; eyes gray; Condition of Skin, Normal; has some scars on her lip; some bruises on her right leg; Head is very dirty. Is very quietly behaved. Said she had been sick & felt very weak and had a bad taste in her mouth).

12 Appetite very poor, bowels moved. Complains of aching all over & had sleeping well. Vomited some.

13 Ate out-meal for breakfast, Bowels moved, ate but little dinner. Refused supper. Drank cup of milk-tea & ate slice of bread

Jany 14 to 16th incl. Ate very poorly, never ate a full meal, sometimes only took a few mouthfuls & ate slice of bread

Received on C³ Pat Obed T 99 P 93 R 23. Slept well all night. Jany 17.94 Very restless & extremely irritable. Coughing at intervals. Eats very poorly. Jany 18.94 Is quieter & better this morning – ate quite a good dinner, at times trembling & rocking. Jany 19/94. Very quiet & slept quite well all night. Eats irregularly. Jany 20.94 Slept well all night. Ate less & did not eat any supper. Jany 21.94. Slept well all night. Appetite better. Jany 22.94 Very restless until 2 A.M. Had to hold while bathing. Resisted & fought. Extremely irritable. Must be watched.

23 Slept very quietly all night. Jany 24/94. Very much better but cried for ½ hr.

25 Very irritable. Slept well. Jany 25.94 Slept well all night. but is very irritable & at times will not do anything at all

26 Restless & crying. Appetite very changeable. (See Nurse's record's Case) – Is sitting up, part of time.

31 Jan 31/94. Appetite is somewhat better. Is complaining of something, all the time. Habits are regular. —

Feb 1 Febr/94. Appetite much improved & is now quite good. She has been helping some with dining room work.

" 4 Febr/94. Patient had a very severe convulsion today. Feb 6/94. Dull & stupid. Wants to stay in bed, all the time. Appetite is good. Feb 7/94. Had a fit last night. Was transferred to C³, today. —

" 11 Febr/94. Very cross & disagreeable; was pugnacious and had to be locked in a room. Feb 28/94. There is nothing special to report in regard to patient since last note. No fits have been noted, of late. —

Mar 10 March 10/94. Is very violent this morning. Throwing chairs about; also broke the Sofa. March 12/94. Had a very severe convulsion today, after which she was quite violent, for a time. Mar 16/94. Has been quietly behaved since the 12th. No convulsions have been reported since that latter date. Habits are regular.

" 22 Mar 22/94. Patient was committed here under the "Law of 1893", recently declared illegal. She was, today, Taken Out and returned under "New warrant" from Olmsted County.

Personal and Medical History of Maggie Flynn

April 94 Appetite good. Behavior violent. Bowels reg. Goes out walking. May 3 95. About the same.

June 94 Appetite good. Works in dining room. Clean in habits. July 1/94 Appetite good. Very quiet. Clean in habits. Works in dining room. Has quite severe fits. Talks quite sensibly. Aug 94 Behavior quiet. Has had several hard fits during month. Aug 29/94 Temp 98.2

Aug 20 94. Menstruating. Aug 31 94 Behavior quiet. Appetite fairly good. Talks quite sensibly. Sept. 1. 94 Appetite fairly good. Sleeps well. Has been very quarrelsome of late. Goes out walking. Take medicine. Bowels usually constipated. Untidy at times. Sept. 19 94 Fighting in dining room. Wants to lie down all the time. Fights when interfered with. Sept 20 94. In seclusion all day. Refused breakfast and dinner.

Sept 21. Taken to C⁴ for to day. Sept 22/94 Transf to C⁴ to day. Sept 30. 94. Nearly most of the time refuses food says there is poison in it. Is very disagreeable and hard to manage. Bowels constipated. Habits dirty. Violent at times. Oct 30 94 Quieter. Appetite poor. Sleeps well. Habits clean. Nov 30 94 Quiet. Appetite good. Habits untidy. Bowels irregular.

Feb 27 95. Cross and disagreeable. Complains of pain in head. Appetite good. Sleeps well. Bowels constipated.

March 30. Appetite quite good. Sleeps well. Fits occasionally. Is very cross and disagreeable. Bowels usually constipated. April 30 95. Very cross. Eats and sleeps well. Habits clean generally. Bowels constipated.

May 23 95. Appetite good. Sleeps well. Habits clean usually. Has fits occasionally. Is cross and disagreeable most of the time. Goes riding and walking. Bowels constipated. June 30 95 Very cross generally. Appetite good. Sleeps well. Bowels constipated. Has fits occasionally. July 14 95 Had a fit in the morning and fell striking her forehead on the heater. Has two very black eyes caused from the bruise.

Sept Oct & Nov Quiet most of time but occasionally violent. Eats & sleeps well. Habits usually clean. Goes riding & walking. Bowels usually constipated. Dec 24 Quiet in behavior. Goes riding & walking. Appetite good. Bowels regular. Has had fits for past three days.

Dec 6. Trans. to C. 2. Feb. 8 Patient is Menste. Feb 29 Bowels constipated. Appetite good. Sleeps well. Behavior the same. Had six hard fits during month. Goes walking & riding. Mar 6 & Apr 15 Menste. Appetite good. Bowels regular. Clean in habits. General health good. Is growing very fleshy. Helps in dining room. Takes out door exercise. May 28 Menste.

1896

July. Summary Nurse's Notes by Dr. A. E. Phelps: Had fits the 9th – 11th – 12th. Appetite good: bowels regular: no mental change. Nov '96 No change: Jan. '97 Appetite good bowels regular: usually dull & does no work but at times helps in the dining room: talks childishly: Has fits almost every week. Apr '97 No change: Aug. '97 Very disagreeable the past few days: fought nurses: Has fits quite often.

Continued by Dr. A. Phelps Sept 29/97 Of late quite clean in habits, rather stubborn & inclined to be violent. Somewhat confused at times. Feb 29 '98 Fell on the floor & bruised her forehead.

1899 Feb 25 99. Wt 225. Very large & fleshy is rather feeble-minded. (Cont'd. by Dr. A. A. Bell)

Mar 8 Dept. Appetite good. Bowels & menstr. regular. Very untidy in appearance but neat in habits. occasionally takes out door exercise. Quiet: reads a good deal: Has many delusions and talks incoherently. Frequently has convulsions: medicine given: Aug. 99 Wt 226 ½ #

See Folio 344.

Personal and Medical History of Inga Frettem or Fredham

HERBERT, PIGLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3525.

Residence, Kenyon, Goodhue Co., Minn

Date Admission, 16th January 1894.

Admitted by, D. Phelps Hour, 1 P.M.

How Sent, O. D. Anderson, Jof P. Goodhue County

Sex, Female

Age, about 37 years

Civil Condition, married

Children, 6

Age Youngest Child, born 22d Febry 1893.

Occupation, Housewife; husband a farmer

Degree Education, Common School

Profession Religion, Lutheran

Habits, probably good.

Nativity, Norway (Parents also born there).

Physicians Committing, B. Jacking and H. L. McKinstry

Correspondents, none mentioned in papers

Family Physcn Dr O. Overholt, Kenyon.

No. for Year, 195.

Insane Relatives, None (previous history states = Brother).

Cause Exciting, had much headache prior to these attacks

Cause Predisposing, heredity & previous attacks

Form,

Accompanying Bodily Disorder, has possibly found head injury.

Suicidal or Not, not attempted, but threatened

Date of this Attack, January 7th 1894.

Duration, about a week.

No. of Attack, 4th

No. of Admissions, 2nd here.

Age First Attack, 25 Years.

Time of Leaving, Apr 24th 94

Time in Hospital, 3 mos 8 ds

Result, Impvd.

Crossed off from Absentee List, April 1st, 1894, because illegality committed.

EXAMINATION ON ADMISSION.

Exam. Jany 24-94 by Drs. Rhs & Phelps

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Quick

MEMORY: Can not test.

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: Noisy, restless and irritable. Violent at times, so that it requires 4 nurses to manage her.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Exalted.

Depressed,

DELUSIONS: Has many.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Talks incoherent

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Inga Frettem or Fredham

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5 in WEIGHT, 143 lbs NUTRITION, Good

WOUNDS OR ABNORMALITIES, R. breast larger than left.

TONGUE, Tremors, none Coatings, Promptness Movement,

PUPILS, Equality, Equal. Size,

Response Light, Accommodation,

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Good. Legs,

TREMORS, Hands, none Tongue,

Facial Muscles, General,

REFLEXES, Patellar, about 8.

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Rather staring

SENSIBILITY,

HEART, Sounds are normal but weak

LUNGS, Seem in good condition

EXAM. URINE.

GYNAECOLOGICAL EXAM., Laceration cervix - Erosion or Laceration perineum

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, constipated Irregular,

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, very Poor, noisy most of the night. Irregular,

PULSE, 70 slow RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Can't get history

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Inga Frettem or Fredham

1894

This patient was brought here by J. Anderson, attended by Clara Anderson, with the following history. There is no history of consanguinity but some of heredity. Previous history states she has a brother insane. This seems to be her 4th attack - The 1st one, about 12 years ago, in Norway; 2nd 7 years ago in Goodhue; another 3 years ago. During 1st attack, was treated in Norway; duration 9 months; during 2nd attack, was under treatment at this (Rochester) Hospital; duration 6 mos (see note below +). 3rd attack was mild, and she was not then sent to Asylum. Recovery seemed complete, of each attack. First symptoms of this present one were manifested a week ago, January 7th 1894. Becomes very hilarious without cause. Laughed & sang; later, she became violent & destroyed her clothing & tried to injure others. The disease appears to be stationary. She has been a little more rational today (15th inst); the first time since the attack. Derangement is now shown as no subject in particular. Is hilarious at times and shows melancholia at others. Has struck at her husband & tried to put her children into the stove. Is of filthy and destructive habits. Has not attempted suicide, but has threatened to do so. Previous to the occasion of the disease, showed an irascible temper. Has a brother who drinks to excess. She was struck on the head before the first attack & developed symptoms of insanity immediately. Patient had much headache prior to these attacks. She has been restrained by hands mostly. Her hands were tied once for about 2 hours. Has had no medical treatment. On Personal Examination, it is found Patient had other attacks after ~~or during~~ location & lactation. Physical condition is good. Expression Cheerful. Says "She feels strangely and thinks that she sometimes does things which she ought not to do." She danced & laughed & seemed very happy. Seemed to know the object of her visit here. Her appearance was that of a patient who is conscious of her condition.

Note + Patient was here before from Nov 14th 86 to April 8th 87. During here then stay, she was, at first, acutely maniacal for some days; noisy, fighting destructive & at times, violent, and requiring to be restrained - Gradually she became more quiet; left improving slowly & steadily. Began working in sewing room, and, after being here about 5 months, was taken home by her husband, untried. (See Vol 7. Page 173. No 1253).

Jan 16 Jan 16/94. On admission, is in fair physical condition. Weight on B[r] (S.R. Complexion light; hair light brown; eyes gray; condition of skin fair. Has several bruises on left arm and right hip. Bodily condition quite clean. Behavior (good). In ward: Behavior restless and noisy, disturbes the other ladies in lower bay by pulling their hair and also pulling them off the benches on the floor. Ate supper. Slept 4 hrs awoke at 12.30 extremely noisy and destructive, broke bedstead all apart, called attdts, took bed out of room, threw herself on floor. Bowels constipated. P 72. R 18. Jany 17/94 Extremely noisy & fighting all day. Ate dinner & supper. Does not talk English. Gave hypodermic at 8.30 awoke and extremely noisy all night; pounding door, tore end of mattress at 1.30 a.m. had to take it out of room and gave strong blankets. Jany 18/94 Extremely noisy & fighting. In seclusion. Ate breakfast. Gave salts as dir., moved b C 4

Jany 19, 94. Quite stupid in the morning, very noisy and fighting all P.M. did not eat supper & violent during Evening. Jany 20/94 Violent all day, seclusion during meal hours and very destructive appetite good.

Jany 21 94. Violent and noisy before dinner, ate good dinner, a little stupid after dinner at 4 P.M. Extremely noisy and violent. Jany 22/94. Quieter. Appetite good. Bowels constipated. Slept all night.

" 23 Quiet most of the day. Some bruises on face. Jany 24/94 Appetite good. Quiet most of the time.

" 25 Quiet in forenoon. Noisy and crying part of the afternoon, fought attdts a evening.

" 26 Noisy and fighting most of the day, noisy all night, appetite good, Bowels constipated.

Personal and Medical History of Inga Frettem or Fredham.

1894

Jany 27 Noisy & fighting most of the time, appetite good, bowels constipated. Destructive at times.

" 31 Patients' appetite good. Noisy at times. Habits dirty usually. Requires constant attention. Destructive as violent at times.

Feb 26 Bowels constipated. Feby 26/94 Not quite so noisy otherwise the same.

March 30 March 30/94. Patient is noisy at times: sleeps well; works in the ward some. Habits clean; is violent, at times -

April 20 April 20/94 Sleeps well, at night. Appetite is good. Cares for herself, usually. Habits are clean. Works some in the

" 21 ward. Is noisy, at times. April 21/94. Patient was committed here under the "Law of 1893" recently declared unconstitutional. She was today Taken out and Returned under "New Warrant" from Olmsted County.

Entered under a new Case No (3704) In Vol 26 Page 93 =

Bridget Donahue

From p. 356.

1899 (Certified by Dr. R. M. Phelps) Nov. 29/99 Complains at times of some physical trouble - rather vaguely: usually of late, however, seems to be in fairly good health: sits quietly: Jan 29/99 weight 209 lbs.: Feb. 28/99 Patient quite fatty yet for the past year or so there have been no signs of heart failure

Mar. to June. is rather inactive in her habits seldom getting any exercise (Certified by Dr. R. C. Betts) Appetite good: sleeps quite well: usually clean in habits: quite noisy at times complains of pain in abdomen. July 1/99. Last few days has been troubled with diarrhoea: some blood passed with each movement. Trans to Infirmary: Is very weak: bowels very loose: more about every 20 minutes: has pain in abdomen: Starch enema given: turpentine stupes applied: July 2 Stupes continued: seems some what better.

Aug 3 During first week had mild rise of temperature - 98[3] to 102[2]: pulse 80 to 130 Resp. 20 to 36. Receives liquid nourishment: at times refuses food: medicine given also stimulants: bowels move about 4 or 5 times daily: Second week temp. about normal: pulse less rapid: High enema of hot water also medicated enema given: some days seems very weak: no special change during 3rd week: Slept well: Bowel movements dark & somewhat watery - some blood. Patient is very irritable: scolds a great deal: often refuses nourishment & medicine:

July 3 99. Appetite fair: patient quieter: Aug. 6. commenced to sit up: Gradually improved: Aug 11 Emesis: no other change: Aug 16 Slight rash over abdomen: Aug. 19 Bowels still slightly dark with blood at times: patient up & gradually improving - Sept- 30/28/1900 (to Waverly) Dec 20 Appetite fairly good: Habits clean: Sleeps well: Bowels regular: quite Noisy at times. Jan. 18 Wt. 176½. Mch 1- Nov 30 1900 Eats & sleeps well Bowels regular: Extremely noisy at times: June 1st goes riding. Bowels regular: July 23 Vaccinated: July 27 - Visited by son & daughter (Dr Linton) Sept 1- Nov 30 Eats & sleeps well: bowels regular: Is at times extremely noisy: Exercises very little: Generally sits all day long in one place: Does not converse: Will sometimes answer questions.

Sept 30. Visited by friends Nov 16. Wt. 193[#] Dec 1- 1901 Genral health good. Attends chapel & amusements: Answers questions at times: at times is incoherent: Has delusions. 1902 Wt. 195[#]

Trans. Bk. A 39

Personal and Medical History of Elizabeth Rush

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No, 3626.

Residence, Canton, Minne

Date Admission, 17th January 189

Admitted by, Dr Kilbourne Hour,

How Sent, E. V. Farrington, Jof C.

Sex, Female -

Age, 53 years

Civil Condition, single

Children, —

Age Youngest Child, —

Occupation, None; (father a

Degree Education, not educat

Profession Religion, not a church member

Habits, Not known.

Nativity, Wisconsin (Parents born in Pennsylvania) -

Physicians Committing, J. H. Phillips & G. A. Love

Correspondents, "as given in papers"

Not family Physician

No. for Year, 196.

Insane Relatives, None

Cause Exciting, Epilepsy

Cause Predisposing, not given -

Form,

Accompanying Bodily Disorder, Epilepsy since 18 yrs old

Suicidal or Not, not

Date of this Attack, about 35 years ago

Duration, about 35 years.

No. of Attack, 1st probably (Continuous)

No. of Admissions, 1st

Age First Attack, about 18 years

Time of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

Exam. by Dr Linton Phelps. Jany 26 94

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Somewhat confused.

Quick or Sluggish, Sluggish.

MEMORY: Impaired.

Past Events,

Recent Events,

Special Subjects, Says impaired

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER: Impaired.

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE: Rather demented.

Normal, Calm, Dull

Indifferent,

Exalted,

Depressed,

DELUSIONS: None determined

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Talks slowly but quite sensibly

Coherent or Incoherent,

Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS: Has had fits ever since. Has them every week. Generally 2 or 3 one day then goes for a week then 2 or 3 more. She thinks the fits have weakened her mind.

Personal and Medical History of Elizabeth Rush

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 1 in WEIGHT, 110 lbs NUTRITION,

WOUNDS OR ABNORMALITIES, Face injured by a fall on the ice 2 years ago causes pain in left side also left leg was hurt and bothers her.

TONGUE, Tremors, Coatings, none. Promptness Movement,

PUPILS, Equality, Equal Size,

Response Light, Normal Accommodation,

SIGHT, near sighted

HEARING, Impaired considerably

COORDINATION, Arms, not good

Case No. 3626. Elizabeth Rush. File No. 10.

The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

ARTICULATION, Hesitating, Hesitating Slurred, slurred

FACIAL EXPRESSION, Demented.

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Seem in good cond

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Inclined to be loose Constipated, Irregular,

APPETITE, Good, Medium, Poor, poor

SLEEP, Good, Poor, Irregular,

PULSE, 76 strong. RESP., 19 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 Elizabeth Rush

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No, 3626.
Residence, Canton, Minn
Date Admission, 17th January 189
Admitted by, Dr Kilbourne Hour,
How Sent, E. V. Farrington, Jof C.
Sex, Female
Age, 53 years
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, none; (father a
Degree Education, not educate
Profession Religion, Not a church member
Habits, Not known.
Nativity, Wisconsin (Parents born in Pennsylva
Physicians Committing, J.H. Phillips and G.A. Love
Correspondents, one given in papers
Ns family Physcn

No. for Year, 196.
Insane Relatives, None
Cause Exciting, Epilepsy
Cause Predisposing, not given
Form,
Accompanying Bodily Disorder, Epilepsy since 18 yrs old
Suicidal or Not, not
Date of this Attack, about 35 years ago
Duration, about 35 years.
No. of Attack, 1st probably (Continuous)
[illegible] 5th

EXAMINATION ON ADMISSION.

Exam. by Dr Linton Phelps. Jany 26 94

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Somewhat confused.
Quick or Sluggish, Sluggish.
MEMORY: Impaired.
Past Events,
Recent Events,
Special Subjects, Says impaired
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER: Impaired.
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS: Has had fits ever since. Has them every week. Generally 2 or 3 in one day then goes for a week then 2 or 3 more. She thinks the fits have weakened her mind.

EMOTIONAL STATE: Rather demented.
Normal, Calm, Dull
Indifferent,
Exalted,
Depressed,
DELUSIONS: None determined
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Talks slowly but quite sensibly
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Elizabeth Rush

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 1 in WEIGHT, 110 lbs NUTRITION,
WOUNDS OR ABNORMALITIES, has injured by a fall on the ice 2 years ago causes pain in left side also left leg was hurt and bothers her.
TONGUE, Tremors, Coatings, none. Promptness Movement,
PUPILS, Equality, Equal Size,
Response Light, Normal Accommodation,
SIGHT, near sighted.
HEARING, Impaired considerably
COORDINATION, Arms, not good
Legs, " " can't stand a test, unsteady gait.
TREMORS, Hands, slight Tongue,
Facial Muscles, General, fascitari movements.
REFLEXES, Patellar, Eq +
Other Reflexes,
ARTICULATION, Hesitating, Hesitating Slurred, slurred.
FACIAL EXPRESSION, Demented.
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good cond
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Inclined to be loose Constipated, Irregular,
APPETITE, Good, Medium, Poor, poor
SLEEP, Good, Poor, Irregular,
PULSE, 76 strong. RESP., 19 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 Elizabeth Rush.

1891 EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Sheriff's Deputy Hans Olson, attended by Martha Olson, with the following history of her case. There is no history of Consanguinity or heredity. This is probably the 1st attack (Continuous). Epilepsy began at 18 years of age & she has been insane Ever since. The disease appears to be stationary; not variable and there are no rational intervals. Derangement is now shown in many ways. Patient has threatened to injure others, but is not suicidal. There are no filthy or destructive habits. She has not been restrained or confined. It is not known if she has been under medical treatment. On personal examination, the patient's whole appearance & conversation indicate insanity: She can make no intelligent reply to any question: did nothing, in particular. Appearance & manner, those of a demented person.

Jan 17 Jan 17/94. On admission, is in poor physical condition. Has puton C³ (S.R. complexion dark; hair black; Eyes gray. No marks or scars; a bruise on left arm. Bodily condition very clean. Behavior is quite good). On ward: Was quite violent part of the day. Does not talk much, but quite sensibly when she does. Appetite fair. Sleeps quite well. Cough none. Has diarrhoea. 97, P 80, R 18. Has diarrhoea. T. 98⁶ P 80. R 20. Complains of feeling sick at stomach. Rec'd on C² Put to bed. 5 PM T. 98 4/5 P 80. R 20. Jan 20 94 7 a.m. Ate breakfast, bed changed T 98⁶ P 84 R 19. 12 M. Boiled milk & bread 7 PM boiled milk & bread. Ate all day. Very quiet has not talked any. Tonic ✓ 21/94 Transf to C³ Very quiet. Is on tonic. Jan 22 94 Seems quite well. Does not talk much. Takes medicine. Jan 23 94 Behavior about the same. Appetite good. Jan 24 94 Very quiet and nice. Jan 25 94 Had a fit at 1 PM not a very hard one. Behavior about the same. No difference in behavior noticeable. Is on tonic. Jan 27 94. Complains of headache. Seems about the same. Jan 28 94 No change. Jan 29 94 The same. Jan 30 94 Complains of diarrhoea and sick feeling all over the body. Appetite good. Is very quiet.

Jan 31/94. Appetite good. Behavior quiet. Had 2 fits (but very light ones); Complains of headache. Is a tonic. Habits clean.

Feb 1 Feb 1/94. Had 2 fits today; bruised her forehead, while in one of them. Feb 2/94. One fit repeated today. Is very cross, and irritable. Sleeps well at night. Appetite is fair. Complains of some pain in her hand, today. —

Feb 28/94. No fits have been observed during last week. Patient keeps about as usual. —

Mar 2 Mar 2/94. Patient was committed here under the "Law of 1893" recently declared unconstitutional. She was, today, Taken out and Returned under "new Warrant" from Olmsted County.

Mch 11/94 Had a fit in morning. Behavior very cross. At times quarrels with patients. Appetite good. Clean in habit. Had 3 fits during month. April 30 94. Appetite good. Behavior irritable. Clean in habit. Takes medicine as directed. May 31. 94 Behavior about the same. June 1 94 Behavior quiet. Appetite good. July 1 94 Behavior quiet. Appetite fair. Had 2 fits today. Sleeps well. July 28 94 Removed 6 to 2. Has been very ugly. Fought when retired with. Appetite good. Had a fit today. July/Aug 94 Transf to C³. Aug 2 94 Behavior quiet. Clean in habits. Appetite fair. Aug 4 94 Transf to C². Aug 8 94 Patient's appetite is fairly good. Quiet in behavior. Bowels constipated.

Sept 94. Behavior quiet. Sleeps well. Appetite good. Goes out walking. Sept 20 94 Had one fit. Oct 1 94 Appetite good. Sleeps well. Quiet in behavior. Does no work. Goes out walking. Bowels regular.

Nov 30 94 Appetite good. Sleeps well. Behavior quiet. Goes out walking and riding. Does not work any. Has had 4 or 5 fits during month, bowels regular. Dec 26 94. Had 3 fits during month. In bed 2 days.

Jan 26 95. Appetite good. Sleeps quite well. Behavior is quiet. Talks sensibly. Has fit quit hard. Is usually quite feeble for several days after she has had a fit. Feb 23. 95 Sick in bed, complains of headache

Personal and Medical History of Elizabeth Rush.

Feb 25 95. Bowels reg. Appetite very poor. Goes out walking and riding. Sleeps well. Feb 26 95 Had 3 fits.

Mch 95 Appetite poor. Bowels reg. Goes out walking & riding. Sleeps well. Has fits quite often.

Mch 11. Complains of headache. Appetite good. Apr 27 95 Appetite good. Bowels constipated. Does not sleep well. Has fits quite often. May 25 95. Appetite not very good. Bowels reg. Goes walking and riding. Gen health poor. Has fits often. Complains of headache.

June 1 / July 31 Appetite fairly good. Sleeps well. Bowels usually constipated. June 23 Fought with N. Lane. Appetite good. Bowels constipated. Excitement. Goes walking & riding. Works in d.r. Aug 3 Appetite good. Sleeps well. Dirty. Had two hard fits during month. Works in d.r. Sept Oct Appetite fairly good. Sleeps quite well. Does not have fits very often. Bowels usually constipated. Behavior very cross. Does not menstruate. Takes medicine. Goes riding & walking.

Dec 1896 Had three fits during month. Jan 31 Had four fits during month. Feb 29 Appetite very good. Sleeps well. Bowels regular. Very disagreeable at times. Had nine fits during month.

May 10 Appetite good. Bowels regular. Untidy in personal appearance. Quiet in behavior. Takes out door exercise.

Aug Summary Nurse's Notes by Dr. G.E. Phelps: Has fits quite often: appetite good: bowels regular: Dull & demented: no change: Jan '97 Has 3 or 4 fits a week: very light fits: very demented: answers only a few questions. May '97 About the same: July '97 does not change.

Nov Continued by Dr. B.M. Phelps. Sept 1897 Patient appears very frail; at times seems to have considerable heart weakness. Still her condition does not change & is quite uniformly the same. Jan 1897 Wt. 114# Appears to be exceedingly weak but does not grow worse in any way. Oct 25 98 Trans. to 1³. Feb 25. Wt. 110# Has had one or two spells of dyspnoeic character. Seems to have trouble to catch her breath. Heart weakness being somewhat notable. For the greater part of time, however has manifested no change for many years. (Cont'd by Dr. R.A. Webb)

1899 Mar to Sept. Quite feeble but general health much improved: appetite fair bowels regular: takes out door exercise: usually neat: rather careless in appearance: quiet - rarely speaks: difficult to understand her: respiration is gasping and labored: has convulsions: talks & moans quite frequently during night. Aug 29 Wt. 119½# Sept 1 Feb 28 1900 (Dr. Wigendale) Oct 1900 Had convulsion during night: untidy: when spoken to or approached: strikes: Appetite poor: does not sleep well: rarely goes out doors: Nov 25 Threw dishes about & struggled with nurses ½ hour. Nov 2 Trans to 3¹ Nov 16. Large swelling noticed on left cheek due to suppuration of roots of a couple of molars. Nov 17. Tooth extracted. Nov 22 Failing in health: at times can scarcely walk: Has occasional convulsions. Appetite & sleep good. Mch 1 - Aug 31 (Dr. Linton) Quite feeble: Has convulsions: Sits in chair most of day. Has to be urged to eat. Bowels regular: Sleeps well. Usually quiet but occasionally disagreeable: Has delusions: At times irritable: Goes out occasionally for exercise. July 16 Vaccinated. Sept 1 - Nov. 30 - Oct 23 Left knee hurt during night: No dislocation nor fracture but patient disinclined to use it. Put to bed for a time. Moderate gross & knee bandaged. Nov 16. Wt 114#

See Folio 376

Personal and Medical History of Amelia Muske

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3330.
Residence, Winona, Minn.
Date Admission, 18th January 1894.
Admitted by, Dr Phelps Hour, 7 PM.
How Sent, H. L. Bucks, Jail P. Winona County
Sex, Female
Age, 46
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, Housekeeper; (father wagonmaker & Gardener).
Degree Education, Common School.
Profession Religion, German Presbyterian.
Habits, not intemperate —
Nativity, Germany; (parents also born there).
Physicians Committing, Edward D. Sleyes and J B McLaughry
Correspondents, Sister Mary Fischer (address?)
No family Physician.

No. for Year, 200.
Insane Relatives, none, so far as known.
Cause Exciting, troubles in church; quarrels with clergyman
Cause Predisposing, not stated
Form,
Accompanying Bodily Disorder, none mentioned.
Suicidal or Not, not.
Date of this Attack, Shortly after new years
Duration, about 3 weeks.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 46
Time of Leaving, February 7th 1894
Time in Hospital, 20 days.
Result, Died.

EXAMINATION ON ADMISSION.

Exam by Dr J L Phelps. January 18

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, confused.
Quick or Sluggish, quick.
MEMORY: Can not test
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, much exalted.
Depressed,
DELUSIONS: many
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: —
Coherent or Incoherent, very incoherent
Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS: Very noisy and loud in her talk. Very restless. Throws herself around on the floor in a restless manner. Requires constant attention

Personal and Medical History of Amelia Muske

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 1 in WEIGHT, 153 lbs. NUTRITION, Good
WOUNDS OR ABNORMALITIES, none
TONGUE, Tremors, Coatings, white Promptness Movement,
PUPILS, Equality, Equal Size, round
Response Light, Accommodation,
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs,
TREMORS, Hands, none Tongue,
Facial Muscles, General,
REFLEXES, Patellar, about 6.
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, staring as if afraid
SENSIBILITY,
HEART, Sounds are normal
LUNGS, seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, dirty. Clean, Careless,
BOWELS, Normal, Constipated, const. Irregular,
APPETITE, Good, Medium, Poor, poor
SLEEP, Good, Poor, Irregular,
PULSE, 90 Reg. 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 Amelia Stuske

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Sheriff Eay, accompanied by Mary Fischer, her sister, with the following history of case. There is no history of consanguinity, and none of heredity, so far as known. This is 1st attack; (has never been in hospital); first symptoms of this attack were manifested shortly after New Years; she broke into Clergyman's house; talks incessantly. The disease seems to be increasing; not variable; no rational intervals: theis, however, less violent at some times, than at others. Derangement is now shown by her being afraid of her Clergyman; says "he will hang her" - the says - Devils are outside of the windows". Has shown a disposition to injure others. But is not suicidal, nor filthy, nor destructive. Previously she was always excitable. There is no history of intemperance, nor of any severe disease, nor head-injury. She has not been restrained or confined. Disease is supposed to be caused from trouble in Church; quarrels with clergyman. She has been under care of physicians; no particulars; no effects. On personal examination, patient is wild; throws her arms; talks incoherently. She said "You do not have the pass-word; get out; Do not let them hurt me". She screams; tries to leave room; raves against visitors; appearance & manner greatly excited; frantic. From others, also, it is learned that she sleeps little; she talks incessantly.

Jan 18 On admission, patient is in fair physical condition. Was put on B2. (S.R. Complexion light; hair brown; eyes gray; condition of skin good; one bruise noticed on right hip; bodily condition very dirty. Fought while bathing; talked about being converted & about her sister being crazy instead of herself). After being in ward about an hour, she became so noisy, excited & violent, that it was found necessary to transfer her to B4, which was accordingly done.

Jany 19. Bowels constipated. P 100. R. 28. Jany 20 94. Extremely noisy, also very excitable, will run and throw herself with full force against the floor or wall. Jany 21 94. Somewhat more quiet in behavior, in seclusion during the forenoon, appetite poor, seems to have some difficulty in swallowing food. Jany 22 94. Annoys the other patients unless watched. In seclusion part of the forenoon. Began menstruating this morning. Jany 24 94. / Jany 25 94. Somewhat quieter in behavior, not so noisy but very annoying. Is always getting into trouble with other patients. Was kicked in the back by another patient. Jany 26 94. Quiet in behavior, almost stupid at times. Eats very little solid food. Jany 27 94. Extremely noisy all day, singing and yelling, stays in bed. Jany 28 94. Violent in behavior, biting and striking other patients, bowels constipated, has been given an enema.

Jany 29. Behavior about the same: violent & extremly noisy, takes no food excepting milk. Jany 30 94. Has taken no food today. In seclusion part of the forenoon, and quite as noisy but very annoying to the other patients, will tear their clothing and strike them, has bitten her own arm. Jany 31 94. Ate nothing today. Behavior about the same. Mouth is in a very foul condition. Tongue and teeth covered with heavy brown coating. Has catarrh badly. Breath bad. Mouth washed three times with Listerine. Febry 1 94. In seclusion part of the forenoon annoys the other patients, unless someone is right with her, has bruised herself from pounding and throwing herself. Took no food today. Mouth washed out 3 times. Febry 5 94. Was taken sick this P.M. Pulse very weak. Face pale and was unable to stand. Put to bed and gave stimulants. Deglutition very difficult. Pulse improved somewhat. Sent for sister. Febry 6 94. Sister came. Patient very weak. Moved to sick ward. Sister remained with her during the night. Patient failed steadily until 6 am Febry 7 when she died.

Died February 7th 1894.

Personal and Medical History of Elizabeth Rush

From Folio 372

1900

During latter part of November recovered from injury to knee: walked as well as usual. Appetite fair: Sleeps well: Bowels regular. Takes out door exercise. Sits in chair most of day: Untidy in appearance: clean in habits. Has convulsions at times profane & accords to herself. Seems quite weak & unsteady on feet. Dec 1 - Feb 28 1901. Appetite good: no change of note. Disagreeable & noisy at times & often strikes & scratches: Does not attend amusements nor does she read: can answer questions but does not converse: March 1 - Wt. 110#

March - June 1 - 1901 General condition unchanged. Patient quite forgetful: has to be taken to her meals: indifferent to surroundings: does not converse; does not seem to realize much of anything; Generally stays by herself. Has occasional epileptic fits. May 29 Wt. 106#. June to Sept. No change Sept. 2 Wt. 106#.

Sept. to Dec No change Nov. 22 Wt. 104½#.

Dec to Feb 1, 1903 General health good considering her age: is feeble: generally has a good appetite: bowels regular: sleeps well: does no work; has a rule does not exercise: is generally quiet: does not converse: incoherent in speech: sometimes disagreeable on the ward: untidy in habits and appearance. Oct 16th: received a slight bruise in the head being pushed over by a fellow patient. Nov. 24th. Wt. 105#.

Personal and Medical History of Nattie Golden (mulatto woman)

HERBERT, PUGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3636.
Residence, Chicago, Ills.
Date Admission, 22nd January 1894.
Admitted by, Dr Phelps Hour, 4 PM.
How Sent, John D. Olivier Jo P. Ramsey County.
Sex, Female
Age, 36.
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, janitor-work (father, teamster).
Degree Education, Common School
Profession Religion, not a church member
Habits, not stated - not intemperate.
Nativity, U.S. (Parents also born there). -
Physicians Committing, Geo. J. Hanley & Jas. C. Markoe
Correspondents, friends { Mr John Godfrey - 1180 Thirteenth Ave. St Paul. John Golden 1625 Palmer Ave. Chicago Ill.
Has no family Physician.

No. for Year, 206.
Insane Relatives, none
Cause Exciting, possibly some ovarian trouble
Cause Predisposing, Chronic
Form,
Accompanying Bodily Disorder, possibly ovarian trouble
Suicidal or Not, not
Date of this Attack, about 3 years ago
Duration, about 3 years
No. of Attack, 1st
No. of Admissions, 1st here (was in Detention Hosp. Chicago).
Age First Attack, about 33.
Time of Leaving, Feb. 21 '94
Time in Hospital, 29 ds.
Result, Imp.

Crossed off from Absentee List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Exam by Dr Lenton Phelps Jany 26 '94

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Quick
Quick or Sluggish, somewhat confused
MEMORY:
Past Events, } seems good says not as good as formerly.
Recent Events, }
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive,
REASONING POWER: Fair
Ordinary Subjects,
Own Mental State, Fair
Special Subjects,
GENERAL DESCRIPTIVE REMARKS: Says has been sick about 6 weeks came to the hospital for treatment

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not,
Special Subjects, Bothered some by hearing voices
Transitory or Not, not so much now as when at home in her head in the night
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Talks coherently, answers all questions
Coherent or Incoherent, fairly well.
Voluble or Reticent,

Personal and Medical History of Nattie Golden

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 3 in. WEIGHT, 109 lbs. NUTRITION, Good
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, none Coatings, pale Promptness Movement,
PUPILS, Equality, Equal Size, normal
Response Light, normal Accommodation, normal
SIGHT, Good
HEARING, Good
COORDINATION, Arms, some trembling
Legs, Good
TREMORS, Hands, slight Tongue, none
Facial Muscles, General,
REFLEXES, Patellar, Exag. normal
Other Reflexes,
ARTICULATION, Hesitating, Prompt Slurred,
FACIAL EXPRESSION, normal
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM., Endometritis with discharge
MENSTRUATION, Irregular
OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean Clean, Careless,
BOWELS, Normal, Constipated, Constipated Irregular,
APPETITE, Good, very 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, died Typhoid pneumonia
Father or Pat. Relations, healthy.
Brothers or Sisters,

Personal and Medical History of Nattie Golden

Personal and Medical History of

1894 GIBERT, FULTON & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Paul C. Chapel, attended by Wm Chamberlain with the following history of case. As to Consanguinity, not known; no history of heredity. This is the 1st attack. first symptoms manifested about 3 years ago, by Sleeplessness & various aberrations of mind. The disease appears to be increasing: not variable; no rational intervals. Derangement is now manifested by claiming she has wheels in her head, and that she has been injured by someone exerting occult influence over her. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. There is no history of any previous peculiarities &c having been shown, nor of intemperance, nor of any severe disease &c of injury to head. She has been in the Detention Hospital, at Chicago. The Cause of the disease is possibly some ovarian trouble. She has had no medical treatment.—

On personal examination, She shows an exhausted appearance. Says she has a wheel in her head and she has been poisoned by some one smoking poison. Of nothing in particular. From other sources, it is learned that she has wandered away from her home in Chicago and now wanders about the house at night, in an endeavor to find the source of the poisonous influence affecting her.

Jan 22 Jan 22/94. On Admission, Patient is in fair physical condition. Has put on 3 lbs (S.R.) mulatto woman hair, black: eyes black - No marks, scars or bruises noted. Bodily condition clean). Quietly behaves, while in office. Shows the delusions, above mentioned. Jany 23 94 Very nice and quiet. Rational. seems to realize her condition. Appetite fair. Rested well. Complains of constipation. P. 72 weak R 20. Temp 98.4
Jany 24 Rested well. Gave doz salts. Bowels did not move. Jan 25 94. Bowels constipated. Gave med & d. & gave enema. Bowels moved. Restless till 12 P.M. Out on hall several times. Complains of Constipation
Jany 26 Restless & awake till 1 A.M. on hall several times. Slept 3½ hrs. Jany 27 94 Restless awake till 12 Pm Slept 4 hrs.
" 28 Complains of Constipation. Rested well. Gave salts. Bowel moved. Out of bed & restless 11 P.M.
" 29 Rested well. Jan 30 94 Rested well during the night. Jany 31 94 Appetite good. Very nice & quiet in habits. Habits clean. Talks rationally. Moved to C. 3 Febry 1. 94 Very quiet. Works in dining room. Appetite good. Has delusions. Febry 2 94 Behavior about the same. Has delusions. Febs 3 4 5 Same. Urine treatments given every other day. Very quiet & lady like in her behavior. Talks sensibly & pleasantly. Is under treatment. Works quite well on the ball. Gen. health seems good. Febry 12 94 Appetite good. Behavior good. Complains of heart trouble. Removed to B. Removed to C. 2 Febry 13 94 Febry 17. Complaining all the time, thinks she does not have as much attention as she should have. Febry 18 94 Is menstruating

February 20 1894. Went home.

Personal and Medical History of Mary Masterson

EGBERT, FICKAR & CRANDELL, DAVENPORT, IOWA

3709
3645



Whole No. 3640.
Residence, 300 St Anthony Av
Date Admission, 25th January 189
Admitted by, D. Phelps Hour, D
How Sent, John B Olivier, Jef C, Ca
Sex, Female
Age, 25.
Civil Condition, married
Children, Three.
Age Youngest Child,
Occupation, Housewife; husba
Degree Education, good; abont 7 yea
Profession Religion, Methodist.
Habits, not intemperate -
Nativity, Illinois U.S. (father's New Jersey U.S.; mother's Holland).
Physicians Committing, Arthur B Ancker and McCandlish
Correspondents, Husband - Frank P. Masterson, 300 St Anthony Ave. St Paul Minn / Wife - Miss Cornelia Allen - 707 S 16th St. Omaha Nebraska
D. Edgar S. Schmidt, Family Physician

No. for Year, 210.
Insane Relatives, None.
Cause Exciting, probably puerperal mania.
Cause Predisposing, not stated.
Form,
Accompanying Bodily Disorder, great nervousness.
Suicidal or Not, not.
Date of this Attack, September 24th 1893.
Duration, about 4 months.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, abont 24+
Time of Leaving, Oct. 19th 94
Time in Hospital, 2 ms 25 dys.
Result, Imp.

Crossed from Discharge List, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exam by Dr Linton Phelps Jany 26 94

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, Quick.
MEMORY: Seems good
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Seems correct.
REASONING POWER: Impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS: Pleasant in manner answers all questions. Says is perfectly well in every way says has a guard at home is all that is the matter.

EMOTIONAL STATE:
Normal, Calm, Calm but becomes excited in conversation
Indifferent,
Exalted,
Depressed,
DELUSIONS: No definite ones.
Systematized or Not, Delusive ideas.
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Seems coherent
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Mary Masterson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 1 in WEIGHT, 128 pds NUTRITION, Good
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, None Coatings, none Promptness Movement, Prompt.
PUPILS, Equality, Equal Size, normal
Response Light, normal Accommodation, normal
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good
Legs, Good
TREMORS, Hands, None. Tongue, None
Facial Muscles, None General, None.
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Prompt Slurred,
FACIAL EXPRESSION, Pleasant. normal
SENSIBILITY,
HEART, No murmurs but a little irregular
LUNGS, Seem in good condition
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean	Clean, clean	Careless,
BOWELS, Normal,	normal	Constipated,	Irregular,
APPETITE, Good,	Very	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, Brother died when patient 8 years old
Father or Pat. Relations, healthy.
Brothers or Sisters, healthy

Personal and Medical History of Mary Masterson.

1894

This patient was brought here by Deputy Sheriff A.W. Chapek, attended by Miss Cornelia Allen, with the following history of Case. As to consanguinity, unknown. Hereard no insane relatives. This is 1st attack; first symptoms manifested about 3 months before birth of child Dec 24/93. The disease seems stationary; apparently rational intervals but at irregular periods. Derangement now shown by hallucinations and some religious excitement. She attacked the nurses in the Hospital, where she also attempted to throw her infant out of the window. Patient is not suicidal, nor filthy nor destructive. No peculiarities of disposition to be noted previously known. There is no history of intemperance, nor of any severe disease nor of any injury to head. She has not been restrained. Cause of disease is probably puerperal mania. She has been under care of Dr Arthur Sweeny and Dr L.E. Riggs at the City and County Hospital for about 3 months. On personal examination, patient is found to be well-nourished in appearance, but nervous & talkative. She spoke of her hallucinations particularly, but sat still, most of the time; appearance & manner, nervous. She was examined in the Probate Court Nov 2/93, by Drs Edgar J. Schmidt and James C. Markoe and pronounced insane. Her child was born December 24th 1893; she was admitted to the City & County Hospital, as an insane, about 2 months before that, and was taken home by her husband on the 17th of January 1894.

Jan 25 Jan 25/94. On admission, is in fair physical condition. Was put on B2. (S.R. Complexion, light; hair light; eyes gray; no scars or bruises noticed; bodily condition very clean; no bodily peculiarities noted; is well-behaved; talks quite rationally). Jany 26-94. Very quiet most of the day, was excited when asked to take her med. refused to take same. Has delusions. Appetite fair. Rested well. Constipated. Did will not take med. P 72. R 18. T 98⅘

Jany 27 Violent & very noisy. Gave hypod Morphine Hyoscine. Was quiet 1/2 hour. Fighting again at bedtime. Appetite good. Tidy in habits. Rested ~~Restless~~ noisy well in A.M. at night Jany 28.94. Very noisy & quiet most of the day. Appetite good. ~~Refused~~ Will not take med. ~~noisy till 11 at night~~. Rested well. ~~Restless~~. Jany 29.94. About the same. Restless till 10 30 PM. Complains of pain in back. Jany 30.94 About the same. Rested well. Jany 31.94 About the same. Rested well

Febry 1. About the same. Rested well. Febry 2.94. Restless. Slightly noisy 11 30 P.M. Febry 3.94. Rested well

" 4. About the same. Noisy on the hall. Rested well. Febry 7.94. About the same. Awoke after part of night noisy 1/2 hr. Singing. Febry 10.94 Restless & noisy, laughing and talking till 2 30. Slept 3 hrs. Febry 22.94 Awake & restless from 12 till 4 30. Febry 24.94 Moved to B1. March 1.94 Was quite noisy for a while this morning talked very obscenely.

Mch 3.94 Ran away from laundry. Fought Attdts. Removed to B4. Mch 3. Mch 10.94. Quiet in behavior. Neat in appearance. Makes no trouble. Removed to B2. Mch 20.94 Demanded her clothing so she could walk home & when refused commenced to fight. Kept on lower bay for 2 hrs. Mch 29.94 Appetite good. Habits clean. Very sarcastic & fault finding most of the time. April 1.94. Talked to Asst to-day to be recommitted. She was not well enough to be discharged. Very excitable and apt to scold and become quite angry.

Discharged

Personal and Medical History of Maria Parsons.

From Jo 396 No 3653.

1894

To 103: Apr 14 39 Temp 96⅘ Pulse 90 to 130: Resp 16 to 35: Respiration is very labored and jerky: bowels inclined to be constipated: sleep is much disturbed: About a week before death slept little: quite restless greater part of time.

Apr 19 Unable to swallow even milk. Continued very low all that day and died at 11 pm

Died.

Under "Old Law"

Personal and Medical History of Lena Charlson.

HERBERT, PUGLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3043 -

Residence, Goodhue, Goodhue Co

Date Admission, 27th January

Admitted by, Dr Kleberonne Hour, C

How Sent, O.D. Anderson, Jof C,

Sex, Female.

Age, 38 years

Civil Condition, Single.

Children,

Age Youngest Child, —

Occupation, Domestic

Degree Education, not stated

Profession Religion, Lutheran

Habits, Good at present; in younger day inclined the "wrong"

Nativity, Sweden -

Physicians Committing, Geo. C. Wellner and B. Dearborn

Correspondents, J.L. Gill. Goodhue, Minn

No. for Year, 213.

Insane Relatives, None.

Cause Exciting, assault upon her by Man, with intent to Commit

Cause Predisposing, probably former bad habits

Form,

Accompanying Bodily Disorder, Hernia

Suicidal or Not, not known.

Date of this Attack, about 17 January 1894

Duration, about 10 days.

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, Probably 36 years.

Time of Leaving, Oct 23 '95

Time in Hospital, 1 yr. 8 mo 7 da.

Result, Rec.

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 Lena Charlson.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 3 in WEIGHT, 127 lbs NUTRITION,

WOUNDS OR ABNORMALITIES, ; Hernia.

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.

GYNAECOLOGICAL EXAM., Hernia of right labia - (Inguinal -

MENSTRUATION,

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 Lena Charlson.

1894 LOBLEY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by deputy Sheriff Adolph Grosse, attended by Josie Anderson, with the following history of her case. Habits are good, at the present time; in younger day, was rather inclined to be "loose". She has no insane relative. This attack commenced some days after a criminal assault, by a man, a year & a half since, with intention of committing rape. Form of attack is acute, paroxysmal, depressed. Patient has hernia. Symptoms of disease were more particularly marked about 17th January 1894 (10 days ago). Those first manifested were a marked confusion in her ideas, so as to be noticed by others. This is the 1st attack. Her mind now reverts to the criminal assault and causes great depression. Patient has shown no disposition to injure others; if suicidal, not known. Is not filthy or destructive. No history of any Epilepsy or injury to head. She has not been restrained or confined. She has had female trouble and nephrectomy performed June '93. Examining physicians think the female difficulty has a great deal to do with her present condition.

Jan 27 Jan 27/94. On admission, was put on B2. (S.R. Complexion light; hair light brown; Eyes are gray; condition of Skin good; has quite bad eruptions; no bruises noticed; is very clean. Behavior good. She talked quite sensibly). P 88. Jany 28 94 Very restless & nervous all the time. Has to be closely watched. Restless & noisy. Out of bed Sept 2 hrs. Talks of dying, wished for a knife to cut hand off. Appetite fair. Out of bed Restless from 3. a m till 5 a m. Bowels moved freely. Complains of headache & sick at stomach. P 88 R 18 T 98. Jany 29 94 About the same. Rested well. Jany 30 94 Very nervous restless most of the day. Appetite fair. Talks of dying most of the time. Takes med without any trouble. Rested well.

Jan 31 Complained of headache. Gave med as dir: Nervous & restless most of the day. Appetite good. Habits clean. Talk rational. Rested well. Febry 1 94 Seems somewhat brighter. Has not been so restless as usual. Febry 2 94 About the same. Rested well. Febry 3 94 Had chill & to bed during the afternoon. Otherwise the same. Feby 4 94 Complains of headache. Rested well. Febry 5 94 Very nervous restless most of the day. Appetite fair. Tidy in habits. Quiet in behavior. Rested quite well.

Feby 6 Appetite good. Restless & nervous. Always tries to be alone or go to room. Says she must die. Someway. Asked for razors to use. Has a cold. Complains of headache. T 100. P 92 R 22. Gave med as dir. Rested well.

Feby 7 Seems some better to day. Appetite good. Rested well. Febry 8 94 About the same. Restless from 11 30 till 1 a m. Sick at stomach. Pushing head & vomiting. Febry 9 94 Appetite good. Habits clean. Has to be watched closely at times will take off part of clothing. Talks of dying most of the time. Wanders about the ward. from one place to another in a restless way. P 92 T 98 4 p m.

" 14 Shut herself in room and could not be made to come out of it. Febry 17 94 Restless out on hall. Slept 4 hrs. Febry 19 94 Restless on hall 10 P.M. Much frightened. Febry 26 94 Appetite good. Habits clean. Very restless most of the time. Will help some in dining room sometimes. Talks but very little. Febry 28 94. Restless awake from 1 till 3 A.M. out on hall twice.

Mch 1 Very nervous. Mch 1 94. Sick. Complains of headache, also of aching of limbs. Gave med as dir. 9 a.m. T 101 2 P 120 R 28. Bowels moved twice freely. Mch 1 94. Awake at 3 A.M. Coughing hard & vomiting. Mch 2 94 Seems much better. Up most of the day. Normal.

Mch 2 94 Awake at 2 30 A.M. out of bed & fighting & quite noisy. Tried Mrs Forberg while calling help. Moved in single room. Mch 10 94. Seems excited & fighting & destructive & clothing. Mch 28 94 Restless slept 4 hrs after use of knife. Mch 29 94 Appetite good. Habits clean. Behavior quiet. Helps in dining room. Has delusions. Mch 30 94 Sleeping out on hall. Out of bed

Personal and Medical History of Lena Charlson.

& quite noisy at 11 PM fighting. Moved in side room. Slept 4 hrs. Mch 31 94 Fighting & Willing

Apl 1 94 Out of bed. Restless & quite noisy. Laughing 10 30. Apl 2 94 Noisy & restless since 3 30 a.m.

" 3 Appetite good. Very destr. & clothing, at times violent. In seclusion 1 hr. May 6 94 Menstr.

May 17 Visited by friend. May 18 94. General health good. Noisy at times & destructive & violent.

May 22 Inbed greater part of day. Complained of headache. Gave med. May 29 94 Very noisy

Swearing and crying about her. Always talking about her clothes.

May 29 94 Found Mrs Heyman. Very noisy, crying and swearing. June 2 94 Complained of headache. In bed all afternoon.

" 30 More quiet of late. Wants to go home. Helps on ward. Goes out walking. Aug 2 94 Stamped to Bl.

Sept 25 Has been quite restless and quarrelsome the first part of the month, but has been very agreeable lately. Assists with wood and dining room work. Has suffered some with cold the last few days. Appetite good. Sleeps well. Bowels regular. Goes riding and walking. Sept 30. No change.

Oct 30 94. Has been very agreeable in behavior. Goes riding and walking. Works in wards & kitchen. Appetite quite good. Sleeps well. Bowels regular. Not feeling very well at times complaining of weakness and tired feeling. Nov 2 94 Complains of headache at times. Works in centre dining room. Appetite good. Very agreeable. Neat in person. Quiet in behavior. Bowels constipated at times. During the last week has had a bad cold, coughs some. Menstruated. Dec 2 94 Is sick in bed to day. Sleeps quite well. Works in the E.D.R. Aug 23 & 4 - 95 Sick in bed with bad cold and headache. Mentally seems quite well. Talks sensibly. Pleasant and quiet in behavior. Jany 28 95 Feeling better of late. Does not complain as much. Works steadily in E.D.R. Appetite good. Sleeps well. Febr 25. Menstr from 20 - 25. No change in any way.

Mch 25 95 Has a fair appetite. Sleeps quite well. Fairly rational, but rather feeble in mental action. Nov 30 95 Appetite good. Sleeps well. Bowels reg. Behavior quiet. Goes walking and riding. May 30 95 Good appetite. Complains of not sleeping well. Takes out-door exercise. Neat in habits. Works in the E.D.R. Is very irritable at times. June 95 Inguinal hernia of right side has developed of late. July 2 95 Transferred to Infirmary.

July 3 1895 Operated for double inguinal hernia by Dr N & Cl. Mays - Took ether well. Reaction good. Made a quick and good recovery. Up on ward July 27 - Apt 29 95 Appetite good. Sleeps well. Bowels regular. Quiet and well balanced. Has been working last few days.

Oct 2 95 Went home alone today. Was quiet in behavior. Mental health was good. Had been working daily. Was very anxious to go.

Personal and Medical History of Fredericka Wilkins

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3645

Residence, Winona,

Date Admission, 30th January

Admitted by, Dr Phelps H

How Sent, W. L. Buck, Jof C

Sex, Female

Age, 51

Civil Condition, Widow

Children, Five

Age Youngest Child,

Occupation, Housewife

Degree Education, probably

Profession Religion, attends church; not a member

Habits, Good; except appearance & immorality when insane

Nativity, Germany

Physicians Committing, J. B. McGaughey & A. Lichtenstein

Correspondents, William Wilkins 307 E. Wabasha St Winona, Minnesota

No. for Year, 215.

Insane Relatives, none, so far as known

Cause Exciting, not known.

Cause Predisposing, previous attack

Form, Acute mania

Accompanying Bodily Disorder, none mentioned.

Suicidal or Not, not

Date of this Attack, nearly one year ago

Duration, nearly a year

No. of Attack, 2nd probably

No. of Admissions, 1st here (was in St Peter 16 Mar 90)

Age First Attack, about 35.

Time of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Quick but confused.

Quick or Sluggish,

MEMORY:

Past Events,

Recent Events, Impaired.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull.

Correct or Illusive,

REASONING POWER: Impaired.

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Appears in a good physical condition
Refuses to be examined.

EMOTIONAL STATE: Exalted

Normal, Calm,

Indifferent,

Exalted,

Depressed,

DELUSIONS: Harmany.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Very Cross, profane and very

Coherent or Incoherent, irritable.

Voluble or Reticent,

Personal and Medical History of Fredericka Wilkins

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2½ in. WEIGHT, 159 lbs. — NUTRITION, Good.

WOUNDS OR ABNORMALITIES, None.

TONGUE, Tremors, Coatings, Promptness Movement,

PUPILS, Equality, Size,

Response Light, Accommodation,

SIGHT, Seems good

HEARING, Good

COORDINATION, Arms,

Legs,

TREMORS, Hands, None Tongue,

Facial Muscles, General,

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Cross and indifferent.

SENSIBILITY,

HEART, Will not allow an examination

LUNGS,

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor 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 Fredericka Wilkins

HERBERT, VOLAS & CHAMBERS, DAVENPORT, IOWA

1894

Was brought here by Deputy Sheriff Stengel, attended by her son & daughter, with following history. There is no history of heredity, so far as known. Cause of this attack is not known: form epileptic and paroxysmal. There is no accompanying bodily disorder. First symptoms of the disease manifested nearly one year ago. She follows people on street in a threatening manner. Sometimes becomes person etc. This is not 1st attack; she having had one in 1877, when she was confined for seven months in the Asylum at St. Peter. Insanity now shown by her following persons on the street; exposes her person; is noisy. Is disposed to injure others, (at least so reported), from sudden passion. Is not suicidal, nor filthy nor destructive. Not subject to any bodily disease, so far as known. Has not been under medical treatment. ——

Jan 30 Jan 30/94. On admission, was put on B.T. (S.R. Complexion light; hair part gray; eyes gray; condition of skin good; no marks or bruises noticed. Bodily condition very clean. Is very contrary).

" 31 Very nice and quiet on hall. Helped in dining room. Speaks very little English. Appetite good. Sleep rested well all night. Pya. P 18. T 98. Febry 1 94 Rested well during the night. Febr 3 94 Refuses med. Rested well Is restless and cross when disturbed. Febr 4 94 Rested well. Febr 5 94 Quiet during the day. Restless & noisy since 3 a m, talking. Febr 6 94 Restless awake from 1 till 4 a m. Quite noisy 1 hr. Talking

Febr 7 Rested quite well. Slightly noisy when opening door during the night. Febr 9 94 Appetite good. Habits clean Rather contrary in behavior. Quiet most of the time. Does not talk. Rested well. Febr 10 94 Continues about the same. Rested well. Feb 13 94 Appetite good. Behavior quiet most of the time. Very excitable, if you try to care for her in any way. Thumb on left hand quite swollen. Habits clean. Rested well

Febr 14. Hand more inflamed today, used med as directed. Febr 17 94 Stock Yd restless from 3 a m and quite noisy, talking

" 26 Appetite good. Habits clean. Behavior very contrary when taken care of her very noisy at time. Talking to self. Does not talk English. March 3 94. Appetite fair. Habits clean. Talks quite loud at times. Not but little English. March 3 94 Transf to B. Apr. 6. 94. Appetite good. Habits clean. Quiet at times at other times talks very loud. Apr 18 94. Appetite good. Has delusions. Clean in habits. Works in mending room. May 6 94 No change to any way. May 16 94. Transf to Ch. B. May 28 94. Appetite good. Sleeps well. Gen behavior quiet. Works in the mending room: At times talks to herself. June 24 94 Very cross and irritable. Very seldom speaks to any one. Works in the mending room every day. Appetite good. Bowels reg. July 6 94 Has been quite excited for about 2 weeks. Does not go to the mending room. Is quite noisy at times. July 31 94 Appetite good. Bowels reg. Is very much excited. Talks incoherently. Aug 8 94 No change. Sept 30 94 Is very much excited at times. Scolds a great deal. Goes walking and riding. Helps in the dining room. Oct 30 94. Appetite good. Sleeps well. Bowels regular. Has been more quiet of late. Is good help in the dining room. Nov 27 94 Appetite good. Bowels regular. Works in dining room. Scolds a great deal of the time. Goes out walking & riding.

Jany 7 95. Still has spells of scolding through is usually quiet. Gen: health is good. Jany 14 95. Transf to Infirmary

Jany 26 95. Assists with dining room work. Scolds a great deal at times. Appetite good. Bowels regular.

Feb 24. 95 Helps in the dining room. Scolds at times. Has good appetite. Bowels regular. March 20 95 Appetite good. Sleeps well. Clean in habits. Behavior good. Works in dining room. April 25 95 Quiet in behavior. Appetite good. Sleeps well. Bowels reg. Rest in bed. Works in dining room. Goes walking and riding. May 14 95. Gen. health good. Appetite good. Clean and tidy in habits. Works in dining room. Goes out walking.

Personal and Medical History of Fredericka Wilkins

June 26 Appetite good. Bowels regular. Noisy at times. Clean & tidy. Works in d. r. goes riding & walking

July 2 Trans. to A. 2. Aug 30. No change. Sept 94 Appetite good. Sleeps well. Bowels regular. Quite noisy at times. Very cross. Scolds a good deal. Works some on ward. Goes walking.

Oct & Nov. No change since last note. Jan 95 Pay neat in personal appearance. Usually quiet but has spells of talking & scolding to herself. Has delusions. Appetite good. Sleeps well. Bowels regular. At times assists in dining room.

Apr 96 Neat in habits. Talks incoherently. Appetite good. Sleeps well. Bowels regular. Takes out door exercise. Assists with ward work.

June Summary Nurse's Notes by Dr. S. L. Phelps. Neat. Talks incoherently. often scolds. Appetite good. bowels regular. Nov 96 Genl health good. no change. Jan 97 Works every day. usually quiet but at times scolds very noisily. very incoherent. Genl physical condition good

1897 May. No change. July Talks & scolds to herself. visited by son. genl health good.

Continued by Dr. B. M. Phelps. Nov. 15 97 Patients general health good. Is rather incoherent & rambling in talk & inclined to be easily agitated; on the whole, however, gets along quite quietly. Feb 98 Wt. 166. Jan 24 99 Patients general health during intervening period shows no change in any way. (cont. by Dr. R. A. Bibb) Nov & Dec 99 Appetite usually quite good. bowels regular. sleeps well. habits neat. untidy in appearance. takes out door exercise. Is excitable & fault finding. at times noisy, laughing & talking to self. & scolding a great deal. conversation is incoherent. remains unoccupied. July 24 Visited by friends.

Sept 1 - Feb 28 1900. Dr. Ph Generally quiet on ward. occasionally scolds & talks loudly to self. Takes neat. Takes out door exercise. Eats & sleeps well. Bowels regular. Dec 20 Visited by son & his family. Jan 14 Wt 127 lbs. March 1 - Nov. 30 Mch 30 Last Note Occasionally scolds. July 17. Vaccinated successfully. Aug 31 Visited by friend. No change.

Sept 1 - Nov. 30. Dr. Linton Sept 1 - Visited by friend. Appetite good. usually sleeps well. General health good. Habits clean. Irritable & noisy at times at others pleasant & agreeable. Talks to herself. Nov. 23. 164½ lbs. Dec 1 - Feb 28 1901 No change. imagines that nurses & others wear her clothes. Mar 1 - June 1 - 1901 April 27 visited by friends. General condition unchanged. May 31 Wt 147½ lbs

June 1 to Sept 1. July 4 visited by friends, Aug. 28 visited by son. Sept. 3 Wt 141 lbs.

Sept 1 to Dec. No change during this quarter. Nov. 30 Wt. 147 lbs.

Dec 1 to Feb 1, 1903 General health very good: appetite good: bowels regular: sleeps well: assists with the ward work: clean and neat in appearance usually quiet and agreeable but at times talks and scolds to herself in a noisy incoherent way. Sept. 30th visited by friends. Dec. 1st Wt. 153 lbs. July 2 2nd visited by friends: Aug. 29th visited by friends.

Personal and Medical History of Melissa Blighton

ROBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3646.
Residence, Austin Co Mower Co. Minn.
Date Admission, 31st January 1894.
Admitted by, Dr Kilbourne Hour, 7 PM.
How Sent, J.S. Washburn, Jof P, Mower County.
Sex, Female.
Age, 57
Civil Condition, married
Children, Eight
Age Youngest Child, —
Occupation, Housewife
Degree Education, Probably good.
Profession Religion, Baptist
Habits, Good.
Nativity, New York
Physicians Committing, Alex. Macdonald & E.A. Washburn
Correspondents, C.A. Blighton, Austin, Minn

No. for Year, 216.
Insane Relatives, Sister.
Cause Exciting, Not known.
Cause Predisposing, Heredity.
Form,
Accompanying Bodily Disorder, Hernia & paralysis &c
Suicidal or Not, Not
Date of this Attack, 5 Years ago
Duration, 5 Years.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 52.
Time of Leaving, February 27 1894
Time in Hospital, 27 days.
Result, Died.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish,
MEMORY:
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY: Seems Correct.
Alert or Dull,
Correct or Illusive,
REASONING POWER: Seems good
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Right side partly paralyzed Quite bed. Very helpless.

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS: Does not express any
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Talks with great
Coherent or Incoherent, difficulty but seems
Voluble or Reticent, possible, very helpless

Personal and Medical History of Melissa Blighton

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, — WEIGHT, — NUTRITION, Fair
WOUNDS OR ABNORMALITIES, Paralyzed
TONGUE, Tremors, Coatings, Promptness Movement, movement very irregular
PUPILS, Equality, Size,
Response Light, Can not test. Accommodation,
SIGHT, Impaired
HEARING, Good
COORDINATION, Arms, Can not help herself at all
Legs, Can not stand or walk
TREMORS, Hands, Tongue,
Facial Muscles, General, General
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Very slurred Slurred, can hardly talk at all
FACIAL EXPRESSION,
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

GYNAECOLOGICAL EXAM.,
MENSTRUATION,
OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal, Normal	Constipated,	Irregular,
APPETITE, Good, 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 Melissa Blighton

1894

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

Was brought here by her husband and Deputy Sheriff Hildreth, with the following history. There is history of heredity, a sister being insane. Cause of this attack is not known: form is chronic. Patient has a right sided hernia, were ache head, also paralysis of lower limbs, and some cord trouble. First symptoms of the disease were manifested 5 years ago, by failure of intellectual faculties. This is 1st attack. No hallucinations; illusions or delusions noted. Patient has shown no disposition to injure others, nor is she suicidal, but is of filthy and destructive habits. She has not been restrained or confined. Has had medical treatment; no results.

Jan 31 Jan 31/94. On admission, was put on C.V. (S.R. Complexion light; hair part gray; Eyes blue; has bedsores and her nose is bruised; hernia on right side; bodily condition clean; is paralyzed on left side.) T. 98. R 20. P 90. Febry 1.94. Very quiet. Slept part of the day. Does not talk so it can be understood. Appetite good. Slept quietly most of the time. Bowels constipated. P 82. R 20. T 99. Autem.

Febry 2 Appetite good. Urinated. Seems to be groaning part of the time. Ate good supper. Urinated. Did not sleep much during night. Very restless. Febry 3.94. Appetite good. Sponge bath. Gave 2 pills at 9 A.M. Bowels did not move. At 3. P.M. gave 2 pills. P 84 R 20. quite noisy at times today. Cascara fl ℥ ½ given for bowels. Did not sleep any all night. Bed changed. P 88. Bowels moved. Bed changed. Febry 4.94 7 A.M. Ate good breakfast. Bowels moved freely. Sponge bath. P 86. R 20. Appetite good. Bowels moved 3 times. Slept 3 hrs. Noisy one hour. Febry 5.94 5 A.M. Quieter than usual & slept quite well all night. Bed changed twice. Urinated. P 84. 8:30 A.M. Appetite good. Sponge bath. P 84. R. 22. noisy 3 hrs. Slept 2. Urinated 3 times.

Febry 6 Slept 3 hrs. noisy 2 1/2 hrs. Urinated, bed changed. P 87. R 20. Febry 7.93 5:30 A.M. Quiet and slept well all night. Urinated. Bed changed. Ate good breakfast. Sponge bath. Bed changed. Appetite good. Bowels moved. Bed changed. P 71. R. 10. T 98. R Febry 8.94. Slept quite well all night. Urinated. Bed changed twice. P 70. Appetite good. Sponge bath. Bed changed. Patient has bruise on forehead. T 98. P 70. R 20. Urinated 5 times during day. Febry 9.94. Noisy 1 1/2 hr. Slept quite well during night. T 98. P 90. R 22. Urinated 3 times. Bed changed 9 A.M. Appetite good. Urinated. Bed changed. T 98. P 80. R 20. 6 P.M. Noisy 3 hrs. Urinated 4 times. Febry 10.94. 5 A.M. Slept well all night. Urinated 3 times. T 98 2/5. P 78. R 20. 9 A.M. Appetite good. Sponge bath. Bed changed. T 98 3/5. P 80. R 24. Febry 11.94. Slept well all night. Urinated 4 times. Bed changed 4 times. T 97 4/5. P 80. R 22. Appetite good. Sponge bath. T 98 3/5. P 84.

Febry 12 Slept well all night. Urinated 3 times. Bed changed 3 times. T 98 2/5. P 82. R 20. Appetite good. Patient very helpless. Has to be fed with a spoon. She is not able to move any part of her body. Moans at times and seems to be in pain. T 98 2/5. P. 84. R 24. Febry 13.94. Quiet and slept well during the night. Urinated 4 times. T 98 1/5. P 80. R 22. Appetite good. Bowels constipated. T 98 3/5. P 80. R. 22. Febry 14.94. Patient is bed is very helpless. Has a good appetite, has to be fed with spoon, moans a great deal. Bowels regular. 2/6/94 In bed. Appetite very good. Bowels reg. Tries to talk, but can not be understood. 2/25/94 No change, lies in bed, not able to move without assistance. 2/26/94 Seems to be about the same today. Ate good breakfast & dinner, refused to eat supper. Failed very rapidly after supper. February 27th 1894. 5:45 A.M. Died. (See nurse's notes)

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Personal and Medical History of Maria Parsons.

1894

Nov 28 Patient is very restless and very nervous. Appetite good. At times bowels constipated. Very contrary needs care and attention, has to be dressed & undressed. Dec 29.94 Patient has to have a great deal of care. Complains of a headache very often. At times is quite noisy. Crying and scolding. Is very forgetful. Uses very profane language when angry. Appetite good. Bowels reg. Jany 11.95 Visited by Gentlemen. Feb 20 95 In bed most of the day. Complains of a headache and of a cold. Appetite fairly good. Bowels sometimes constipated. At times is quite noisy. Talk incoherent. Is very forgetful. Has to be dressed and undressed. Needs a great deal of care. Goes riding and walking. Neat in habits. Transf to 3rd Febr 27.95. Appetite not very good. Mch 10 95. Appetite very poor. Noisy at times. Wanders up & down the ward all day. Mch 20.95 Has a very bad cough and takes medicine. Refuses to stay in bed. Apr 1.95. Very restless. impossible for her to remain sitting. Sleeps very poorly up out of bed often. Bad cough take tonic & med. Appetite very poor. Apr 13.95 No change. Apr 22.95. Appetite poor, has specials. May 1.95 Always walking up and down the hall and complaining about her clothes. Quite violent at times. May 21.95 Appetite poor. Noisy at times. June 12 Wanders around ward most of day. Violent at times. Appetite fair, has specials. Bowels regular. Goes riding & walking. July 20 Does not look well today. July 25 On tonic.

Aug 16 About same. Appetite fair. noisy at times. Sept 18 Wanders around ward most of day. Appetite fairly good. Has specials. Bowels regular. Takes tonic. Extremely noisy & violent at times. Goes riding & walking. Oct. 20 Appetite fair. Bowels regular. Destructive at times.

Nov 7 No change noticeable since last note. Dec 10 Appetite good. Violent at times. Very untidy in personal appearance. Bowels regular. Goes riding & walking.

Dec 24 Has visited by her sister today. Jan 5 Eats & sleeps quite well.

1895 Feb 24 General health seems quite good. Mar 10 Appetite fairly good. Has specials. Extremely noisy at times. Bowels regular. Destructive & quite violent at times. Wanders up & down the ward most of day. Goes riding & walking.

Apr 30 Did not sleep any. Was quite noisy all night.

May. Summary Nurse's Notes by Dr. S.S. Phelps: Coughs quite a little at times: takes medicine for cough: Gen'l health rather impaired: Nov 96 No change: Walks ~~some~~ day: aimlessly about the ward, talking to imaginary people: At times very profane & noisy: physical condition fairly good: Appetite variable: Very troublesome in undressing herself: Apr 97 No change: June 97 Extremely noisy & destructive at times: Very demented: July 16 Was taken Home on trial.

1897 Jan. Continued by Dr P.M. Phelps. Sept 27 Patient returned today, having been out on trial: Taken out by sister. No change, Jan 3 '99 Wt. 103. Mem dull, demented & rather feeble in walk, is growing slightly worse. Aug 12 Patient has taken cold & is to day in bed. Aug 20 Up & about again. Aug 26 Visited by Mother. Oct 8 Visited today by sister. Is growing quite weak & at times has had to be fed. Jan 7 99 Has grown much weaker & has to be fed & cared for. Very dull & demented in every way. (Cont. by Dr. R.A. Bibb) Mar 23 Transferred to Infirmary:

1899 Apr. 13 During last few months has grown very old & helpless, so that she can not now help herself at all: has recently had great difficulty in swallowing & on liquid diet: Today very restless & noisy part of time: Temp. from 99

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Personal and Medical History of Maria Parsons

EMBERY, FOLKS & CHAMBERS, DAVENPORT, IOWA



Whole No. 3653.
Residence, Owatonna, Mi
Date Admission, 13th February
Admitted by, Dr. Phelps Hour
How Sent, M. B. Hardwick Jof
Sex, Female.
Age, 58 (about).
Civil Condition, wid Owed
Children, Three
Age Youngest Child, 28 years
Occupation, None
Degree Education, Fair.
Profession Religion, Methodist
Habits, not history of intemperance
Nativity, New York (parents also born there)
Physicians Committing, W. C. Eustis & Rev. L. Hatch
Correspondents, Mrs J. F. Finley daughter. Owatonna
Family Physcn Rev. L. Hatch

Year, 223.
Relatives, only a distant relative
Exciting, Not Known
Predisposing, (Chronic)
Any Bodily Disorder, Catarrhal troubles
or Not, not
This Attack, 8 years ago
, about 8 years
Attack, 1st
No. of Admissions, 1st
Age First Attack, about 50
Time of Leaving, Apr. 20. 1899
Time in Hospital, 5 yr. 2 mo. 7 d.
Result, Died. Exhaustion in General Paresis.

EXAMINATION ON ADMISSION.

Feb. 14-98 by Dr S Linton Phelps.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, confused
Quick or Sluggish, Sluggish
MEMORY: Impaired
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, dull
Correct or Illusive,
REASONING POWER: much impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS: In a rather weak physical condition. Pot pontonia

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS: seems to have delusive ideas.
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Very incoherent can not
Voluble or Reticent, carry on a conversation

Personal and Medical History of Maria Parsons

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 5in WEIGHT, 116 pds. NUTRITION, Poor, Pale.
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Slight tremor Coatings, Promptness Movement,
PUPILS, Equality, Equal Size, normal
Response Light, normal Accommodation,
SIGHT, Seems good
HEARING,
COORDINATION, Arms

3rd October 1898.

Further Examination Made by Dr. Phelps

Some incoordination
Dementia of a peculiar, Confusional form.
Hesitation in Speech.

APPETITE, Good, 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 Maria Parsons

HERBERT, PUGLAS & CHAMBERS, DAVENPORT, IOWA



Whole No. 3653.

Residence, Owatonna, Mi

Date Admission, 13th February

Admitted by, Dr. Phelps Hour

How Sent, M. B. Hadwick, Jo

Sex, Female.

Age, 58 (about).

Civil Condition, wid Owed

Children, Three

Age Youngest Child, 28 years

Occupation, None

Degree Education, Fair

Profession Religion, Meth

Habits, not history

Nativity, New York (S

Physicians Committing, W. C

Correspondents,

Family Physcn Res. L. Hat

Ex. Febry 14-94 by Dr S

Year, 223.

Relatives, only a distant relative

Exciting, not known

Predisposing, (Chronic)

Preceding Bodily Disorder, Catarrhal Troubles

Before or Not, Not

Date of this Attack, 8 years ago

Duration, about 8 years

Date Last Attack, 1st

No. of Admissions. 1st

MENTAL ACTIVITY:

Clear or Confused, confus

Quick or Sluggish, Slugg

MEMORY: Impaired

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, dull

Correct or Illusive,

REASONING POWER: much impaired

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS: In a rather weak physical condition. Pot ponton

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Very incoherent can not

Voluble or Reticent, carry on a conversation

Personal and Medical History of Maria Parsons

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 in WEIGHT, 116 lbs. NUTRITION, Poor, Pale.

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Slight tremors Coatings, Promptness Movement,

PUPILS, Equality, Equal Size, normal

Response Light, normal Accommodation,

SIGHT, Seems good

HEARING,

COORDINATION, Arms, considerably impaired

Legs,

TREMORS, Hands, Tongue,

Facial Muscles, General, very imperfect; Sways, General unsteadiness

REFLEXES, Patellar, about normal equal

Other Reflexes,

ARTICULATION, Hesitating, Very Slurred,

FACIAL EXPRESSION, anxious

SENSIBILITY,

HEART, No murmurmurs sounds are accentuated

LUNGS, Respiration impaired; Left apex impaired

EXAM. URINE.

GYNAECOLOGICAL EXAM.,

MENSTRUATION,

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean Clean, Careless,

BOWELS, Normal, Constipated, Constipated Irregular,

APPETITE, Good, 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 Maria Parsons.

EBERT, FIDLER & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Sheriff Barnard & daughter, with the following history. Probate record shows that parents are supposed to be second Cousins. No history of heredity except in case of a distant relative. This is 1st attack, first symptoms manifested 8 years ago, after attack of Measles; showed gradual failure of mental faculties. Disease seems increasing; is variable & there are rational intervals but they do not occur at regular periods. Derangement is now shown by restlessness, insomnia & failure of memory; she also wanders about nights. She is neither disposed to injure others, nor suicidal, nor filthy nor destructive. No peculiarities as were previously shown. There is no history of intemperance given. She has not been restrained or confined. Has had general treatment for 8 years; no results. Cause of disease not known. Patient is quiet, melancholic & indifferent. She said that her memory was nearly good & that she had lost nearly all interest in life. Her manner & appearance those of dementia. Patient has been subject to Catarrhal troubles. She continually wanders about, nights; was put to bed eleven times in one night.

Feb 13 Febry 13/94 On admission, was put on B1. (S.R. Complexion light; hair brown; eyes blue; Condition of skin good; no bruises noticed; bodily condition quite clean. Behavior Good; talks quite sensibly). Febry 14 94. Febry 14 94 Appetite good. Has been in bed all day. Sleep good. A slight Cough. Is taking tonic. Bowels reg. Complained of being Cold. P 96. R 15. T normal. 2/15/94 Appetite good. Has been in bed all day. Has been crying several times because she was homesick. 2/16/94 Still in bed. Appetite good. Troubled with Constipation to day. Febry 17 94 Up all day. Appetite good. Slept well. Febry 18 94 Complained of headache in the forenoon; felt better in the afternoon. Febry 19 94 Has been quite well all day. Appetite good. Slept well. Febry 20 94 Complained all day of being cold. Manual massage given. Fb 21 94. Just about the same as yesterday. 2/22 94 Complains of constipation and of being cold. Fb 23 94. 23. Moved to 1st E. Febry 24 94 Appetite good. Behavior quiet. Bowels Constipated. 25 Eats in dining room, sleeps well. Has to be dressed & undressed. Is taken to & from the dining room. Febry 26 94 Appetite good. Bowels regular. No complaints. Manual massage given over whole body. Seems to be improving some both physically and mentally. Febry 26 94 Appetite good. Clean in habits. Behavior quiet. Is not able to care for herself. Requires assisting with dressing & undressing. Also has to be taken to & from the dining room. Mch 2 94. Appetite good. Sleeps well. Is clean in habits. Is not able to dress or undress herself. Also has to be taken to & from the dining room. Talks somewhat delusive. 23. 25 & 30. Massage treatment. Appetite good. Appears somewhat brighter, than did some little time ago. Otherwise about the same. May 2 94 Massage treatment. May 5 94 Refused to take massage. May 9 94 Massaged. May 16 94 Same as B1. May 22 94 Appetite good. Sleeps well. Has to be dressed & undressed. Gen. health good. Works a great deal. Goes out walking. June 27 94 Appetite good. Sleeps well. Has to be dressed & undressed. Is quite demented. Talks very incoherently. July 28 94 General health good. Always goes out walking. Sleeps very well. Appetite good usually. Augs 9 94 Is very irritable at times. Seems about the same as at last note. Aug 31 94 Has been in bed today. Complains of headache. Sept 24 94 Health quite good, until 6 day when she is still in bed, complains of headache and vomited. Until 6 day she slept well & Appetite good. spent riding and walking. Is very contrary at times and needs careful attention. Sept 30 94. No change. Oct. 30 94 Is very restless at times and very contrary and needs attention. Appetite very good. Bowels regular. Sleeps quite well. Goes riding and walking. Does not complain. Gen health good. Nov 28 94 Is very restless & very nervous. Appetite good.

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