

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

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August 20, 2018

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Personal and Medical History of

Personal and Medical History of Andrew Jensen

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3442.
Residence, Bancroft, Kossuth County, Iowa
Date Admission, 13th August 1893.
Admitted by, D. Phelps — Hour, 5 PM.
How Sent, Herman Blackmer, Jef P. Kossuth County
Sex, male
Age, 79 years
Civil Condition, widower
Children, 3
Age Youngest Child, —
Occupation, Farmer
Degree Education, very limited (reading only)
Profession Religion, Baptist
Habits, not intemperate
Nativity, Denmark (his parents also born there).
Physicians Committing, A.B. Wedge & J.A. Blackmer
Correspondents, (no name given in papers) —
3/16/97 Fritz Carlston

No. for Year, 12.
Insane Relatives, Father suicided; suppose the insane.
Cause Exciting, not known
Cause Predisposing, probably heredity
Form, Senile Dementia
Accompanying Bodily Disorder, Some rheumatism, otherwise
Suicidal or Not, Has threatened suicide
Date of this Attack, 2 years ago
Duration, 2 years —
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, about 77.
Time of Leaving, Jan. 23. 1894
Time in Hospital, 4 yr. 5 mo. 10 da.
Result, Died. Apoplexy.

EXAMINATION ON ADMISSION.

Exam'd by D. Phelps Sept 6/93.

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:

Very talkative; and seems somewhat weak minded.

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 Andrew Jensen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Good
WOUNDS OR ABNORMALITIES, Injury to right knee; no abnormalities
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, unequal right smaller; Semi-Sole Size,
Accommodation, seems to be, a Recent
Tongue,
General,
Slurred,
HEART, no murmurs —
LUNGS, Sounds are good

Case No. 3442. Andrew Jensen. Vol. 25.

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

eless,
gular,
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 Andrew Jensen

EBERT, VIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3442.

Residence, Bancroft, Freeborn County, Minn

Date Admission, 13th August 1893.

Admitted by, S. Phelps — Hour, 5 PM

How Sent, Herman Blackmer, Jof P, Freeborn County

Sex, male

Age, 79 years

Civil Condition, widower

Children, 3

Age Youngest Child, —

Occupation, Farmer

Degree Education, very limited (reading

Profession Religion, Baptist

Habits, not intemperate

Nativity, Denmark (his parents also born

Physicians Committing, A.C. Hodge & J.A.

Correspondents, (no name given in papers)

3/15/97 Fritz Carleston

No. for Year, 12.

Insane Relatives, Father suicided; suppose the insane.

Cause Exciting, not known.

Cause Predisposing, probably heredity

Form, Senile Dementia

Accompanying Bodily Disorder, some rheumatism; cripples

Suicidal or Not, Has threatened suicide (recently) no

Nels Anderson, Clarks Grove Minn
Peter Peterson " "
Came to see Andrew Jensen
Feby 20/94

EXAMINAT

Exd by S. Phelps Sep 6/93.

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:

Very talkative; and seems somewhat weak minded.

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Andrew Jensen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Good

WOUNDS OR ABNORMALITIES, Injury to right knee; no abnormalities

TONGUE, Tremors, Coatings, Promptness Movement,

PUPILS, Equality, unequal right smaller; pin-hole Size,

Response Light, Left gives; Iris of right ~~Accommodation~~, seems to be adherent

SIGHT, poor

HEARING, not very good

COORDINATION, Arms,

Legs, not tested

TREMORS, Hands, some Tongue,

Facial Muscles, General,

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, ~~Hesitating~~, very fair, talks much ~~Slurred~~,

FACIAL EXPRESSION,

SENSIBILITY, normal

HEART, no murmurs —

LUNGS, sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

Records test

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Andrew Jensen

EBBERT, PICKAS & KNABBER, DAVENPORT, IOWA

1893

Was brought here by Deputy-Sheriff Jorgerson, attended by C. Anderson, with following history. There is no history of consanguinity, but some, of heredity; father committed suicide; was supposed to be insane. This is 1st attack; symptoms manifested 2 years ago, by religious, delusions. Disease appears to be increasing; no rational intervals. Derangement is now shown on the subject of religion. He has general delusions also. Thinks Everyone is against him; talks all the time; Sleeps very little. Is disposed to injure others. Has not attempted suicide, but has threatened to do so. Propensity not now active. Is not filthy or destructive. Has previously quiet-tempered; would often go to bed, for days, from nervous excitement. Neither he, nor his parents, have ever been addicted to intemperance. Has had no severe disease or head-injury. Has had to be watched for the past 9 months. Do not know cause of disease. Has not been under treatment. On personal examination, Says "he is not insane; has a good mind"; thinks he is being persecuted because of religion. Talks incessantly. Appearance was healthy, except somewhat rheumatic. — - —

Aug 13 Aug 13/93. The patient is in an aged & crippled condition. Was put on C4. On admission, is found to
" 14 be very fleshy; quite sluggish & feeble in motions. Aug 14/93. Slept soundly last night. Ans. Pulse 96, irregular. R 24. Appetite fairly good. Has had no passage from bowels since admission. He is very quiet, but answers questions rationally. Right leg is swollen considerably & very painful to the touch. (Leg was hurt in
" 15 going down stairs, on his admission). Aug 15/93 Again, rested & slept well, last night. Ans. Pulse 98, not so irregular; R 24. Appetite good; has been given laxatives, but bowels have not yet moved. Says that he
" 16 feels much better. Talks quite sensibly of what is occurring at present; & what passed years ago. No cough noted. Aug 16/93. Swelling of patient's right leg about the same. Swelling was caused by patient slipping down
" 17 on his knee before entering the ward, on morning of admission. He was quite feeble, however, & could scarcely stand alone, when admitted. Aug 17/93. Slept fairly well last night. Ans. Pulse 90. R 26. Had a passage of the
" 18 bowels this afternoon & seems considerably relieved. Aug 18/93. Is reported as slightly noisy last night, but sleeping 8 hours. Ans. Pulse 98. Patient eats well. Swelling in right leg is gradually abating. Pulse,
" 19 however, is still high & irregular. Aug 19/93. Still continues to improve. Seems satisfied with his Condition. Makes no complaints. Is cheerful & contented. Pulse has fallen to 88 & is now more regular.
" 20 Aug 20/93. Continues to rest quite well, at night; & to improve physically, but no change discernible in
" 21 his mental condition — Pulse, today, 90. Ans. Pulse 98. Aug 21/93. No change to note. —
" 22 Aug 22/93 Slept 7 hours, last night; was somewhat noisy. Right leg is slowly resuming its normal
" 23 condition. Ans. Pulse 88. Aug 23/93. Slept well (9 hours) last night. Eats & sleeps well. Is in good health.
" 24 Pulse rose from 88 the previous night to 118 last night. Aug 24/93. Is able to use right leg to a slight
" 25 extent now, as swelling is much reduced. Pulse high still, 110. Aug 25/93. No material change. Pulse 100.
" 26 Aug 26/93. Pulse is becoming more regular; now 88. Patient sleeps well at night; is contented with his surroundings. Has remained in bed since the 15th inst. Injury to right knee has almost
" 28 Entirely disappeared & he is able to move around some now. Aug 28/93. Still keeps his room & is up and
" 31 down from his bed. Seems quite good physical health. Seems quite contented here. Aug 31/93. Physical and mental condition have remained unchanged.

Sep 14/30 Sep 14/93. Keeps about as last reported. Sep 30/93. No change to note, in patient's condition.
Oct 3/10 Oct 3/93. Appetite fair. Bowels regular. Is hard to understand. Talks some. Oct 10/93. Was, today,
" 18 visited by friends. Oct 18/93. Refused breakfast. Remained in bed; complained of headache & cold whirlings.
" 20/25 Eats but little. Oct 20/93. Ate no breakfast: refused to get up today: seems no better. Oct 23/93. Patient is

Personal and Medical History of Andrew Jensen

1893

Oct 23/26 (cont'd) still confined to his bed, but seems some better. Oct 28/93. Feels better today; got up and dressed. Appe-
" 31 tite is now good. Oct 31/93. Appetite continues good. Bowels are regular. Talks but little; causes no trouble
on ward. Habits are clean. Mind seems childish & he has a few delusive ideas.
Nov 7/10 Nov 7/93. Wt 190 pds. Pulse 80. Nov 10/93. Apparently rests well, at night. Behavior good. Talks
but little. Is hard to understand - makes no complaints - Habits are clean. Otherwise, no change —
" 30 Nov 30/93. Above notes still hold good. —"—
Dec 7/14 Dec 7/93. Wt 191 pds. Pulse 80. Dec 14/93. Complained of feeling sick, today. Went to bed. Ate
" 8/15 no dinner. Dec 8/93. Patient has remained in bed, the past few days; eats but little. Dec 10/93. Is
" 31 again up & on ward. Is better. Appetite improved. Dec 31/94. Continues up daily, since last note.
1894 Lives along quietly & does not seem to change much, if any. —
Jan 1/15 Jan 1/94. Wt 192 pds. Pulse 78. Jan 15/94. Appetite good; bowels regular. Always quiet, and
well-behaved. Can't talk any English so is, therefore, hard to be understood. Habits clean.
" 21 Jan 21/94. Has been in bed, part of the time today; says "he does not feel well". Did not
" 27/31 eat much dinner. Jan 23/94. Up today; feels better. Jan 31/94. Appetite fair; bowels
constipated. Complains about his eyes troubling him. Can scarcely see, at times. Thinks it is
because he has caught a bad cold. In other respects, about the same.
Feb 1 Feb 1/94 Wt 185 pounds. Pulse 128. Bowels have now become more regular. —
" 20 Feb 20/94 Has continued quiet and well-behaved - Has eaten also, about as above records.
Mind somewhat childish & he has some few delusive ideas, still -

Was taken home, by a relative, today

1894

Mar 26 This patient was committed here under the "Laws of '93" recently declared unconstitutional. He was today Returned, under a "new Warrant" from Carbon County. Was put on 13c. The "papers", on this occasion, give quite strong hereditary history; first symptoms of disease manifested about 15 years ago: never has been sane since first taken. Has many delusions, viz, that he has a lot of money; thinks some one is trying to defraud him; religious maniac. Thinks
" 31 he is appointed to kill some one; gets violent & has threatened to kill; has also threatened suicide; has to be kept confined & watched, all the time. March 31/94. Sleeps well, at night. Appetite
good. Sits about on the seats; talks & sings occasionally; makes no complaints.
Apl 2/30 April 2/94. Wt 184½ pds. Pulse 64. April 30/94. No material change to note in patient's condition.
May 1/31 May 1/94. Wt 191 " " 82. May 26/94. Visited by friends (or relatives), today. May 31/94. No change.
June 2/30 June 2/94. Wt 192 " " 86. June 30/94. No noticeable change in either mental or physical condition.
July 2/16 July 2/94. Wt 192 " " 80. July 16/94. Continues quiet & well-behaved. In all other respects, is
" 31 about the same. Was today transferred to C4. July 31/94. Since coming on this (C4) hall, patient has been quiet & well-behaved. Appetite has been fair; bowels regular. Habits cleanly. Otherwise about as usual.
Aug 1/14 Aug 1/94. Wt 186 pds. P 102. Aug 14/94. Patient complained of having a severe cold, & went to bed, to day.
" 10/31 Aug 10/94. Remained in bed until today, when he got up. Aug 31/94. Went out walking, to day. —
" 31 Aug 31/94. No particular change in this patient's condition. He is well-behaved. Makes no complaints. Clean in habits.
Sept 1/30 Sept 1/94 Wt 183 pds. P 84. Sept 30/94. Behaves well & is quiet. Makes no complaints. Talks fairly sensibly.
Intimus seems somewhat unbalanced. Cleanly in habits. Health fairly good, is weak in lower limbs & uses a crutch.

(Carried to 68)

Personal and Medical History of Henry Mc Aneney

Henry Gordon McAneney

SEBERT, PIOLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3144 5.

Residence, Winona, Minn.

Date Admission, 17th August 1893.

Admitted by, D. Phelps Hour, 11 A.M.

How Sent, H. L. Buck, Jof P, Winona County.

Sex, Male

Age, 17 Years

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Attending School.

Degree Education, Secondary School education —

Profession Religion, Catholic

Habits, probably good

Nativity, Wisconsin (Parents, Ireland) —

Physicians Committing, J. B. McGaughey & J. Staples.

Correspondents, (mother) Mrs Ellen McAneney, 570 Winona St

Family Phys^cn J. B. McGaughey Winona Minn

No. for Year, 15.

Insane Relatives, None

Cause Exciting, Impression made by drowning of companion Years ago

Cause Predisposing, none stated

Form, Puberscent Insanity

Accompanying Bodily Disorder, none noted.

Suicidal or Not, not

Date of this Attack, 2 years ago

Duration, some 2 years

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 15.

Time of Leaving, Nov. 28. '93

Time in Hospital, 2 mo 1d.

Result, Imp.

Consent for treatment given April 1931, because illegally committed.

EXAMINATION ON ADMISSION.

Exd by Dr. Phelps, Aug 23/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Rather sluggish

MEMORY:

Past Events,

Recent Events, Probably somewhat impaired

Special Subjects,

PERCEPTIVITY: slightly dulled

Alert or Dull,

Correct or Illusive,

REASONING POWER: Quite childish

Ordinary Subjects,

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent, somewhat silly.

Exalted,

Depressed,

DELUSIONS: Probably none

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Says "has heard voices" —

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, rather limited & very childish.

Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:

Patient appears quite young, & his mental condition is also feebleminded, as suggested by the face. Describes headaches, dizziness, & genual nervous "spells", coming on about 3 years ago, increasing up to the present time, during which he will be also irritable, unable to study or read & on account of which, at times, he will have to lie down, & let them pass away. He is said to have complained more particularly of left side; but always, there has been pain on back of neck & in back of head.

Personal and Medical History of Henry Mc Aneney

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11 in WEIGHT, 102 lbs 103 NUTRITION, Fair

WOUNDS OR ABNORMALITIES, probably none. —

TONGUE, Tremors, some slight Coatings, none marked Promptness Movement, prompt

PUPILS, Equality, unequal; right slightly larger. Size, slightly dilated

Response Light, fairly good Accommodation, slight

SIGHT, Fairly good

HEARING, Good. —

COORDINATION, Arms, } Fairly good, on all the usual tests

Legs, }

TREMORS, Hands, slight Tongue, some slight

Facial Muscles, General, None noted —

REFLEXES, Patellar, Equal; moderately exaggerated — 7 & 8 —

Other Reflexes,

ARTICULATION, Hesitating, Good. Slurred,

FACIAL EXPRESSION, suggestive of feeble-mindedness; Anaemic; mouth slightly open.

SENSIBILITY,

HEART, Enlarged & Sounds are palpitating.

LUNGS, Sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, About 2 or 3 years ONSET GRADUAL OR SUDDEN, Sudden

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

Mother or Mat. Relations, Mother living; not very healthy; troubled with nervousness. —

Father or Pat. Relations, Father living; claims healthy.

Brothers or Sisters, three living, healthy. No history of heredity given.

Personal and Medical History of Henry McAneney

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Sheriff J. F. Gay, with the following history. There is no history of either consanguinity or heredity. This is 1st attack; symptoms appearing 2 years ago, by incoherent talk and leaving home. Disease is about stationary; there are rational intervals, but not at regular periods. Derangement is now manifested by his leaving home, without any object; at times, speaks incoherently; gives the articles in house away to other boys; performs acts without object or reason. Is neither disposed to injure others, nor suicidal, nor filthy nor destructive; neither he nor parents ever addicted to intemperance &c. Nor has patient been subject to any severe disease or head-injury. Has not been restrained or confined. Supposed cause of the disease is the impression made upon his mind by having a companion drowned, while they were bathing, about 2 years ago. Has had some medical treatment, by tonics & sedatives; some improvement noted. On personal examination, the following points are noted. He answers questions with hesitation; memory, on some points, is defective; he gives no reason for leaving home. Said, "he suffers from bad feeling in left side of head"; that whole left side of body feels badly"; "that he cannot stand the sun". Often places hand to side of head, during examination. Appearance & manner were listless & dull. He threatens his mother, & other members of the family; will not remain at home, leaving at all times & without notice.

Aug 17 Aug 17/93. On admission, was put as Cr. Note. Aug 20/93. A letter received from patient's mother, states, that he has suffered from nervous prostration; had "spells" every month or 6 weeks. Would sit, with his back to the fire. Could not touch hand to his chair, it used to hurt him so. Was never strong. Subject to melancholy spells. — On admission, pulse 80. R 20 T° 98.6. Bodily condition clean; no injuries or peculiarities noted. Pt. has been quietly behaved today. Talks quite freely. Appetite is fairly good & bowels regular; no cough noticed; no complaint of injuries.

" 18 Pulse 82 R 19 T° 98.6. Aug 18/93. Slept fairly well, last night. Am. Pulse 84 R 19 T° 98.8. Complains of the

" 19 left side feeling sore in morning, after getting up. Talks in a silly & shaggy way. Aug 19/93. Slept 5 hours, last night. Am. Pulse 106 R 22 T° 99.8. Says "he feels fairly well today, with the exception of a slight pain in stomach"; he likes the Country up here & would like to be out, all the time". Pm. Pulse 76 R 20 T° 99. —

" 20 Aug 20/93. Slept, last night, 6 hours. Am. Pulse 106 R 18 T° 96.8. Appetite fairly good: bowels regular;

" 21 Quiet & well-behaved. Aug 21/93. Rested & slept fairly well, 5 hours, last night. Am. Pulse 84 R 20 T° 98.6.

" 22 Complains of head feeling "hot & aching some, at night. Pm. Pulse 70 R 17 T° 98.8. Aug 22/93. Slept a little better, 6 hours, last night. 7 am. Pulse 88 R — T° —. Says, his appetite increases daily & he is now

" 23 feeling much better than when he first came. 5 Pm. Pulse 68. Aug 23/93. Last night, slept 6 hours. — Am. Pulse 100. Complains of having slight pains in head, lasting but a short while. Commenced to work in dining-room, today. Pm. Pulse 76. Has examined today (See previous pages for particulars of same). —

" 24 Aug 24/93. Am. Pulse 96. Pm. Pulse 102. Is easily agitated. Writes home. Goes out walking daily with his

" 25 ward. Says "his head aches, when he is in-doors any length of time". Aug 25/93. Am. Pulse 80. Pm. P 80. Reads some; plays card & checkers; as a rule, is restless, wants to be moving about; appears quite nervous today.

" 26 Aug 26/93. Am. Pulse 92. Pm. Pulse 84. Thinks he is gaining steadily". Seems to be doing quite well, now.

" 27 Aug 27/93. Appetite good; bowels somewhat irregular. Am. Pulse 92. Pm. Pulse 80. Expects his sister to come to

" 28 see him. Aug 28/93. Visited today, by sister. She thinks he is doing well. Patient is very inquisitive;

" 29 wants to know all that is going on. Am. Pulse 80. Pm. Pulse 78. Aug 29/93. Am. Pulse 82. Pm. P 80.

" 30 Is anxious to know "if he can be cured without getting any medicine". Aug 30/93. Am. Pulse 106;

" 31 Pm. Pulse 84. Aug 31/93. For the past eight nights, patient has been quiet & restful, sleeping 7 to 8 hours, each night. Has been up & about daily; quiet & well-behaved, though inclined to be somewhat restless;

This week if possible
to get me home.
let me now how all the folk are
in Winona please. i guess will
close my letter now have
nothing more to say love to all
writ soon to me from
Henry McAneney Rochester
Minn
I mad a mistak have my
Mother to send me up some
envelopes and some writing
paper please half my
sister to come up here in
side of this week if possible
how long is mary ryan
going to stay in chicago
let me no pleas then i
will now when Nell or
Ama can up here to
Rochester Minn

me mis behave in Winona
When I go back you can make me
Reform what way you like to
I Mean what i say if dont
Mean what say i dont now
What meaning is hope thing
Are getting along all right
in Winona when you go to
my father i want you to ask
him when he intend to come
after me up here to Rochester
take me home ore els you mister
go come up here and take
me home get a write order
from father to take me
home ore els ask father
to send George ore mother
up here to Rochester to take
me home and see doctor
kilbourne about have
My father to send some of
my folk up here to Roches

1901 Jany 31 physically, by Doctor. Patient has had some hemorrhoids. Jany 31/901. No change reported.
Feby Wt 142# p qr. May 31 Seems very nervous: is easily irritated. "Thinks he is falsely imprisoned"
July 31/ Appetite good: bowels regular: July 31 About as usual: no change in mental condition —
Aug 1 1902 Wt 148#. Jany 31/02. Patient has choreic movements. Breathes dull & quiet. Walks about: sometimes laughs to himself: does not ask any questions: cannot answer intelligently. Jany 31/03. No
Jany 31 1903 Jany 31 Event of any kind, in period: Quiet. Dull, indifferent. Stands about idly. Does no work.

Rochester Wimn
sept 18 munday

J Sheriff Johngay
I would be very glad if you
is my father Patrick McAneney
and tell him his boy in
Rochester Wimn is as well
as he ever will be and
would like to go home to Wimn
because I want to go school some
more I dont think I shall go
enough to school yet I hope
to find you well I think i
will trie to write a nicer as
letter can to you John
Togay Sheriff be shure and
dont for get to go to my house
father Wimn if can will do
Any thing for you that is
In my power if you see

1893
Co
by

As

- 19 left side pain
night. Am. Pulse 106 R 22 T[o] 99.8. Says
Stomach"; he likes the Country up here & would like to be out, all the time.
- 20 Aug 20/93. Slept, last night, 6 hours. Am. Pulse 106 R 18 T[o] 96.8. Appetite fairly good: bowels regular;
- 21 Quiet & well-behaved. Aug 21/93. Rested & slept fairly well, 6 hours, last night. Am. Pulse 84 R 20 T[o] 98.6.
- 22 Complains of head feeling hot & aching some, at night. Am. Pulse 70 R 17 T[o] 98.8. Aug 22/93. Slept a
little better, 6 hours, last night - 7 am. Pulse 88 R — T[o] —. Says his appetite increases daily & he is now
- 23 feeling much better than when he first came. 5 pm. Pulse 68. Aug 23/93. Last night, slept 6 hours. -
Am. Pulse 100. Complains of having slight pains in head, lasting but a shat while. Commenced to work
in dining-room, today. Pm. Pulse 76. Has examined to day (See previous pages for particulars of same). -
- 24 Aug 24/93. Am. Pulse 96. Pm. Pulse 102. Is easily agitated. Writes home. Goes out walking daily with his
- 25 ward. Says "his head aches, when he is in-doors any length of time". Aug 25/93. Am. Pulse 80. Pm. P 60.
Read some; plays card & checkers; as a rule, is restless; wants to be moving about; appears quite nervous today.
- 26 Aug 26/93. Am. Pulse 92. Pm. Pulse 84. "Thinks he is gaining steadily". Seems to be doing quite well, now.
- 27 Aug 27/93. Appetite good; bowels somewhat irregular. Am. Pulse 92. Pm. Pulse 80. Expects his sister to come to
- 28 see him. Aug 28/93. Visited, today, by sister. She thinks he is doing well. Patient is very inquisitive;
- 29 wants to know all that is going on. Am. Pulse 80. Pm. Pulse 78. Aug 29/93. Am. Pulse 82. Pm. P 80.
- 30 Is anxious to know "if he can be cured without getting any medicine". Aug 30/93. Am. Pulse 106;
- 31 Pm. Pulse 84. Aug 31/93. For the past eight nights, patient has been quiet & restful, sleeping 7 to 8 hours,
each night. Has been up & about daily; quiet & well-behaved, though inclined to be somewhat restless;

1893
Aug 31 Is very neat & tidy & of good personal habits. Is contented & appears to be improving daily, though he is still
Cottrill inclined to be somewhat silly & foolish in manner.
Sep 5 Sep 5/93. Patient doing nicely. Appetite good. Bowels regular. Works on ward. Goes out walking daily. Con-
" 6 - verses freely & is more quiet of late. Sep 6/93. Has been acting queerly, the last day or so, today, while
" 8 out walking, removed frocp from his actions that he was trying to get away. Sep 8/93. Has been talking,
to other patients, about running away. Weight, today, 110 pds. Tried to elope while out walking this evening.
" 9/15 Sep 9/93. Has been very restless all day. Sep 15/93. Says "he will stay until he gets well"; "will not run away".
" 27/30 Sep 27/93. Visited by brother, today. Sep 30/93. Has a sore on face, which bothers him considerably. —
Oct 1/4 Oct 4/93. Weight 115 pounds - is gaining in flesh. Complains of a pain in his spine. Oct 14/93 Is today,
" 16 Complaining of headache; also, of feeling nervous. Does not appear well. "Wants to see a Priest" - Oct 16/93 -
" 17 Complains of feet and hands being cold, at times. Has "spells". Oct 17/93. Eyes seem somewhat sore, today.
" 18/19 Oct 18/93. Coughs some. Complains, continually, of one thing or another. Oct 19/93. Says "he thinks he is
" 25/28 going to die"; "Wants the Priest". Oct 25/93. Continually asking for the Priest. Oct 28/93. Was, this
morning, visited by brother, who took patient home, on trial.

Crossed off the records; he was illegally committed —

Robert Ennis from folio 373.

Jan 1900 Jan 1900 Wt. 163 When out walking carries cane & makes all sorts of motions as if
shooting. Thinks himself discharged & that he is only waiting for friends to
July 1/20 come & get him. July 1 Wt. 143 lbs July 20 Vaccinated successfully. ———
Aug 30 Patient very nervous and restless: does not associate with other patients. Went to Fair-Grounds,
Nov 1/30 with other patients, to the Races. Nov 1. 143 lbs - Nov 30. Patient has peculiar twitching of head:
Dec 17 1901 mutters to himself: will not work. "Thinks he is wrongfully kept here". Dec 17. Was examined
Jany 31 physically, by Doctor. Patient has three hemorrhoids. Jany 31/1901. No change reported.
July Wt 142 lbs 9 oz. May 31 Seems very nervous: is easily irritated. "Thinks he is falsely imprisoned"
July 24/31 Appetite good: bowels regular: July 31 About as usual: no change in mental condition -
Aug 1 1901 Wt 148 lbs. Jany 31/02. Patient has choreic movements. Is rather dull & quiet. Walks about: some-
Jany 31 1903 times laughs to himself: does not ask any questions: cannot answer intelligently. Jany 31/03. No
Jany 31 change of any kind, in period. Quiet, dull, indifferent. Hands about idly. Does no work.

Personal and Medical History of Mathias P. Johnson.

GIBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3446.
Residence, Albert Lea, Freeborn Co. Minn.
Date Admission, 17th August 1893. —
Admitted by, D. Kilbourne Hour, 7 P.M.
How Sent, Herman Blackmer, J. of P. Freeborn Co.
Sex, Male
Age, 38.
Civil Condition, married
Children, 4
Age Youngest Child, —
Occupation, Farmer & merchant
Degree Education, Common-school.
Profession Religion, Lutheran
Habits, not intemperate
Nativity, Norway; (Parents also born there).
Physicians Committing, Henrik Heisin & G. W. Barck
Correspondents, Mrs. M. P. Johnson (wife) Albert Lea Minn

No. for Year, 16.
Insane Relatives, none
Cause Exciting, Epilepsy
Cause Predisposing, previous attack
Form, Epileptic Dementia
Accompanying Bodily Disorder, Epilepsy for 14 years.
Suicidal or Not, not
Date of this Attack, 14th August 1893
Duration, about 3 days —
No. of Attack, probably 2nd
No. of Admissions, 1st
Age First Attack, about 23.
Time of Leaving, Sept 16th '94
Time in Hospital, 1y. 2ds.
Result, Improved.

EXAMINATION ON ADMISSION.

Evidence Dr. Phelps. Aug 23/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Fairly clear
Quick or Sluggish,
MEMORY:
Past Events, Fairly good
Recent Events,
Special Subjects,
PERCEPTIVITY: slightly dulled
Alert or Dull,
Correct or Illusive,
REASONING POWER: slightly affected, at present
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
At time of examination, is, evidently, at his best. Evidently, shows some slight feebleness, due to the Epilepsy. Says he had none of these fits, since coming here.

EMOTIONAL STATE:
Normal, Calm, Normal
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None noted
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Fairly Coherent
Voluble or Reticent, Quite free

Personal and Medical History of Mathias P. Johnson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ WEIGHT, 163½ lbs. NUTRITION, Seems quite good
WOUNDS OR ABNORMALITIES, probably none. rupture (?)
TONGUE, Tremors, slight Coatings, slight Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, ready Accommodation, ✓
SIGHT. Fair. Good

Case No. 3446 Mathias P. Johnson. Vol. 25.

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

foot.

General,
REFLEXES, Patellar, Equal; about 8; 5th P's scale.
Other Reflexes,
ARTICULATION, Hesitating, slightly, at times ~~Slurred~~, fair.
FACIAL EXPRESSION, Fair
SENSIBILITY, normal
HEART, Sounds good
LUNGS, Sounds are good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably long ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother living; claims healthy.
Father or Pat. Relations, Father living; claims healthy
Brothers or Sisters, those living are all healthy; he is the only one that has trouble; no history of heredity.

Personal and Medical History of Mattias P. Johnson.

LIBERT, FISCAL & CHAMBERS, DAVENPORT, IOWA

Whole No. 3446.

No. for Year, 16.

Residence, Albert Lea, Freeborn Co. Minn.

Date Admission, 17th August 1893. —

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

How Sent, Hennan Blackmer, Jof P, Freeborn Co.

Sex, Male

Age, 38.

Civil Condition, married

Children, 4

Age Youngest Child, —

Occupation, Farmer & merchant.

Degree Education, Common-school.

Profession Religion, Lutheran

Habits, not intemperate

Nativity, Norway; (Parents also born there).

Physicians Committing, Henrik Nesin & G. H. Barck

Correspondents, Mrs M. P. Johnson (wife) Albert Lea Minn

Insane Relatives, none

Cause Exciting, Epilepsy

Cause Predisposing, previous attack

Form, Epileptic Dementia

Accompanying Bodily Disorder, Epilepsy for 14 years.

Suicidal or Not, not

Date of this Attack, 14th August 1893

Duration, about 3 d

Result, Improved.

EXAMINATION ON ADMISSION.

Examined Dr. Phelps. Aug 23/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Fairly clear

Quick or Sluggish,

MEMORY:

Past Events, Fairly good

Recent Events,

Special Subjects,

PERCEPTIVITY: slightly dulled

Alert or Dull,

Correct or Illusive,

REASONING POWER: slightly affected, at present

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

At time of examination, is, evidently, at his best. Evidently shows some slight feebleness, due to the Epilepsy. Says he has had none of these fits, since coming here.

EMOTIONAL STATE:

Normal, Calm, Normal

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None noted

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Fairly Coherent

Voluble or Reticent, Quite free

Personal and Medical History of Mattias P. Johnson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ WEIGHT, 163½ lbs. NUTRITION, Seems quite good

WOUNDS OR ABNORMALITIES, probably none. rupture (?)

TONGUE, Tremors, slight Coatings, slight Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, ready Accommodation, ✓

SIGHT, Fairly good

HEARING, Fairly good

COORDINATION, Arms, Fairly good, by usual tests

Legs, some difficulty, when trying to stand on one foot

TREMORS, Hands, none Tongue, slight

Facial Muscles, ✓ General,

REFLEXES, Patellar, Equal; about 8; 5th P's scale.

Other Reflexes,

ARTICULATION, Hesitating, slightly, at times ~~Slurred,~~ fair.

FACIAL EXPRESSION, Fair

SENSIBILITY, normal

HEART, sounds good

LUNGS, sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, kept Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably long ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, mother living; claims healthy.

Father or Pat. Relations, Father living; claims healthy.

Brothers or Sisters, three living are all healthy; he is the only one that has trouble; no history of heredity.

Personal and Medical History of Mathias P. Johnson

EBERT, VOLAS & CRAMBER, DAVENPORT, IOWA

1893

Was brought here by deputy Sheriff W. C. Mitchell, attended by Chas. P. Johnson, with the following history. There is no history of either consanguinity or heredity. This is not the 1st attack; 1st had one 5 years ago; duration short. First symptoms of this attack were manifested 14th August 1893, by delusions. Disease appears to be increasing, but is variable & there are rational intervals, at irregular periods. Derangement is now shown by his running around on the floor; dared not stop, for fear he would die; had different delusions. Is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Had, previously, peculiar religious impressions. Neither he nor his parents ever addicted to intemperance &c. Has suffered from Epilepsy for 14 years. Has been watched & kept in his room. Supposed cause of disease is Epilepsy; patient has been under treatment with several physicians. On personal examination, is found to have frequent Convulsions, and is "out of his head". Says the answers given to questions above, are true. Was quiet during the examination. ——

Aug 17 Aug 17/93. On admission, is found to be in apparently good physical condition. Pulse 76. R 19. T — Was brought here in hand-cuffs. Bodily condition Clean. Rupture, incipient childhood. Aug 18/93. Slept fairly well, last night. Am. Pulse 80. R 22. Appetite very good. Claims to have had no movement of bowels for 4 or 5 days. No cough observed. Has been quiet & obedient most of today; had a "spell" of praying & ex hatation. — Is fairly rational most of the time; hesitates, when answering questions. Complains of effects of epileptic fit. Pm. Pulse 72. Aug 19/93. Slept 5 hours, last night; was quiet; however, struck night watch & in the scuffle, patient's ear & forehead received slight bruises. Am. Pulse 78. R 21. Pm. Pulse 80. Appetite very good. Bowels have moved. Has been quiet today. Aug 20/93. Last night, had a "noisy spell"; slept but 3 hours. — Am. Pulse 76. R 20. Pm. Pulse 78. Appetite still very good. Is quietly behaved today. Will stand in front of the "Printed Rules" and read them over, for hours. Aug 21/93. Quiet, sleeping well. 8 hours, last night. Am. P 74. Bowels are becoming more regular. Is quietly behaved. Aug 22/93. Am. Pulse 66. Quiet & well behaved. Reads most of the time, while in hall. Goes out walking with the rest. Aug 23/93. Am. Pulse 90. T 98.2. Appetite very good; bowels regular. Says "he has some trouble in passing his urine". Quietly behaved, though disposed to be stubborn, at times. Converses quite freely about different subjects. Aug 24/93. Slept 7 hours last night. Am. Pulse 66. T 97.8. Appetite good. Bowels move. Is rather restless, at times. Seems to be more happy, than heretofore. Dances, sings, reads aloud &c. (Was on 2nd flr. transferred to B3). ——

Aug 25/93. Am. Pulse 62. T 98.6. Complains of a pain in his side. Appetite continues good.
Aug 26/93. Am " 66 " 97.8. Side still pains him. Had a "spell" of singing & praying today:
Asks for a song-book. Bowels regular. Aug 27/93. Am. Pulse 84. T 98.2. Aug 28/93. Am. Pulse 60
Aug 28 T 98.2. Is quiet & well-behaved by day. Aug 29/93. Am. Pulse 82. T 97.6. Appetite keeps good.
Aug 30/93. Am. Pulse 86. T 99. Seems to be somewhat excited today. Has the idea there is a letter here from his wife & that some one is keeping it away from him. Pm. Pulse 84. T 98. Got up on table in hall and began to pray. Aug 31/93. Am. Pulse 88. T 98.2. Is restless & excited, because he does not receive any letter from his wife. Patient, during this second week of his stay, has been more quiet & restful at night, sleeping, now 7 to 8 hours on each. Has been quiet & fairly well-behaved by day; still has "spells" when he becomes restless, more or less excited & desires to preach, sing &c. Is clean in his & of good personal habits. No fits have been reported since his coming here.

Sep 2/93. Sep 2/93. Wt 170 lbs. Pulse 120. (Has gained some since coming here). Sep 7/93. Had a severe

Personal and Medical History of Mathias P. Johnson

1893

Sep 7 Convulsion today & fell & marked his forehead. Says that a fellow-patient (Jos. Brikke) struck him
cont'd to 30 while in wash-room, but no marks were visible. Sep 30/93. The following convulsions have been reported
11th night, 3; 12th night 1; 13th night 2; 14th night 1; 15th night 2; 16th night 1; 17th night 1; 18th night
1; 19th night, 2; 20th night 1; 21st night 4; 22d night 1; 24th night 1; 25th night 2; 26th night, 3;
27th night, 3; 28th night, 2; 29th, one during day; & one in night; 30th, 2 Convulsions, last night. —
" 30 Appetite is good; bowels regular. Talks quite rationally. Subject to quite frequent fits. Has some delusions
Is a very quiet patient. Never causes any trouble; at times, given to getting upon a table & praying &
singing. Habits are clean. Attends Chapel & dances regularly; takes part in the dances.
Oct 2 Oct 2/93. Had 2 Convulsions, last night. Weight, today, 171 lbs. Pulse 84. Physical health good.
" 31 Oct 31/93. During this month, Convulsions have been quite numerous; with one exception, they have
always occurred at night, as follows. One Convulsion on each of the nights of the 2nd, 6th, 12th, 16th, 18th, 19th
23d and 29th; Two convulsions on each of the nights of the 4th 5th 7th 8th 10th 12th 13th 15th 21st 22d & 28th instant.
Three Convulsions on each of nights of 9th 17th 24th 26th & 27th; Four Convulsions on each of nights of 14th & 30th; Five Convulsions
on the night of the 25th. Also one very severe convulsion on the 11th inst, in day time. Appetite good; bowels
regular. Is quiet, well behaved & of good personal habits. Works on the ward. Causes no trouble. Has delusions.
Nov 1/93 Nov 1/93. Wt 173 lbs. Pulse 84. Nov 7/93. Had one Convulsion during the day. Nov 12/93. Had one
" 21/30 Convulsion today. Nov 21/93. Fell out of bed, last night and marked his face some. Nov 30/93. The
following Convulsions are reported during the month; some of them have been very severe ones.
One Convulsion on each of the nights of the 4th 6th 12th 13th 27th & 28th. Two convulsions on each of the
nights of 3d 8th 10th 14th 15th & 25th. Three Convulsions on the nights of the 1st 2d 9th 11th 17th 18th 19th 21st
23d & 24th. Four Convulsions on the nights of 7th 20th & 26th. Five Convulsions on the night
of the 22d. Six Convulsions on night of 15th and Seven Convulsions on night of the 5th —
In all 80 Convulsions, during the month. Appetite good; bowels constipated, requiring
frequent laxatives. Is subject to "spasm" which he has quite frequently. Is often
ugly; of a "cranky" and mean disposition; quarrelling and fighting with other patients
with very little or no provocation. Does not seem to realize his position or place here in.
thinks he can go home, whenever he desires it. Habits are clean.
Dec 5 Dec 1/93. Wt 171 lbs. Pulse 80. Dec 9/94. Had one convulsion in sack of nights of 1st 2d
" 15 and last night. Dec 15/93. Got into a fight, today, with a fellow-patient (Waugler). He
knocked Waugler down & then struck him with a Chamber on the right temple, leaving him
unconscious; right eye turning black & a bunch formed on left side of face. Dec 31/93. The
" 31 Convulsions seem fewer in number this month; (at least, the above are the only ones reported).
Appetite good; bowels seemingly more regular, of late. Behavior good if he is let alone;
but if he receives, what he considers, an insult or wrong from another, he will fight and
is quite dangerous, when started. Talks quite rationally. Is anxious to go home. Works
done on the ward. Personal habits are good.
1894
Jan 2/10 Jan 2/94. Wt 169 lbs. Pulse 76. Jan 10/94. Got into a quarrel with a fellow patient (Brady)
" 31 today. Brady's face was scratched quite severely. Jan 31/94. Has had 9 nocturnal
Convulsions since the 20th inst. There is no change to note in his conduct or behavior
since last general note. Physical health seems quite Good.

(Carried to page 16)

Personal and Medical History of Thomas Ryan

SEBERT, VIOLAS & CHAMBERS, DAVENPORT, IOWA

Whole No. 3447.
Residence, unknown.
Date Admission, 23rd August 1893
Admitted by, D. Phelps Hour, 7 PM
How Sent, Rudolph Lehmicke. Jf P. Washington County
Sex, Male
Age, 35 (about).
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, none
Profession Religion, Roman Catholic
Habits, Intemperate; also those of parents
Nativity, Ireland (Parents also born there).
Physicians Committing, J. C. Clark & O. S. Watkins.
Correspondents, (no name given in papers) — (See off. buy)

No. for Year, 17.
Insane Relatives, unknown
Cause Exciting, Excessive use of liquor
Cause Predisposing, possibly heredity
Form, Chronic Mania
Accompanying Bodily Disorder, unknown; Very nervous.
Suicidal or Not, unknown
Date of this Attack, unknown
Duration, unknown
No. of Attack, unknown
No. of Admissions, 1
Age First Attack, unknown
Time of Leaving, Oct 12th 93
Time in Hospital, 1 mo, 19 ds.
Result, Recovered.

EXAMINATION ON ADMISSION.

Exd by Dr Eby, Aug 31/93 — MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, fairly clear
Quick or Sluggish, fairly active

MEMORY:
Past Events, } seems fairly Good.
Recent Events, }
Special Subjects, }

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

REASONING POWER:
Ordinary Subjects, fair
Own Mental State, says "he thinks there was reason for sending him here"
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
says "he thinks there was reason for bringing him here" - "he did not know where he was until he found himself here" - Admits having drunk at times, to excess. —

EMOTIONAL STATE:
Normal, Calm, Calm, now
Indifferent,
Exalted,
Depressed, somewhat

DELUSIONS:
Systematized or Not, None noted
Special Subjects,
Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Quite free when questioned.

Personal and Medical History of Thomas Ryan

Pat Ryan No 209
Irving Ave Scranton
Lackawanna Co. Pa.

ISSION.—(Continued.)
ICS.

NUTRITION, Fairly good
Convergent strabismus.
Promptness Movement, Fairly prompt
dilated
on, Sluggish

racy.

Legs, standing, Eyes shut, Considerable swaying. —
TREMORS, Hands, None — Tongue, Some marked
Facial Muscles, — General, None noted
REFLEXES, Patellar, Equal; about 6 or 7 — Dr P's Scale.
Other Reflexes,
ARTICULATION, ~~Hesitating~~, Fairly Good — ~~Slurred~~,
FACIAL EXPRESSION, somewhat depressed.
SENSIBILITY, Seems normal -
HEART, Sounds good
LUNGS, Sounds as Good.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short — ONSET GRADUAL OR SUDDEN, probably sudden
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother dead - about 66 — thinks from rheumatism.
Father or Pat. Relations, Father, he thinks, still living — in Ireland. —
Brothers or Sisters, 2 Brothers in Scranton, Penn. Claims are healthy

Personal and Medical History of Thu

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3447.
Residence, unknown.
Date Admission, 23rd August, 1893
Admitted by, D. Phelps Hour, 7 P.M.
How Sent, Rudolph Lehmicke. Jef. & Washington Cars
Sex, Male
Age, 35 (about).
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, none
Profession Religion, Roman Catholic
Habits, Intemperate; also those of parents
Nativity, Ireland (Parents also born there).
Physicians Committing, J. C. Clark & O. S. Watkins.
Correspondents, (no name given on papers) — (See obv. buy)

Duration, unknown
No. of Attack, unknown
No. of Admissions, 1
Age First Attack, unknown
Time of Leaving, Oct 12th '93
Time in Hospital, 1 mo, 19 ds.
Result, Recovered.

EXAMINATION ON ADMISSION.

Exd by Dr Eby, Aug 31/93 — MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, fairly clear
Quick or Sluggish, fairly active

MEMORY:
Past Events,
Recent Events, } seems fairly good
Special Subjects,

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

REASONING POWER:
Ordinary Subjects, fair
Own Mental State, says "he thinks there was reason for sending him here"
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
says "he thinks there was reason for bringing him here" - "he did not know where he was until he found himself here" - Admits having drunk at times, to excess. —

EMOTIONAL STATE:
Normal, Calm, Calm, now
Indifferent,
Exalted,
Depressed, somewhat

DELUSIONS:
Systematized or Not, None noted
Special Subjects,
Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Quite free when questioned.

Personal and Medical History of Thomas Ryan

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5½ WEIGHT, 156 lbs. NUTRITION, Fairly good.
WOUNDS OR ABNORMALITIES, no wounds noted; has convergent strabismus.
TONGUE, Tremors, some marked Coatings, white Promptness Movement, fairly prompt
PUPILS, Equality, Equal Size, dilated
Response Light, sluggish Accommodation, sluggish
SIGHT, Fair only (convergent strabismus).
HEARING, seems good
COORDINATION, Arms, finger to nose, eyes shut, some inaccuracy.
Legs, standing, eyes shut, considerable swaying. —
TREMORS, Hands, None Tongue, some marked
Facial Muscles, General, none noted
REFLEXES, Patellar, Equal; abnt 6 or 7 — Dr. P's Scale.
Other Reflexes,
ARTICULATION, Hesitating, fairly Good ~~Slurred~~,
FACIAL EXPRESSION, somewhat depressed.
SENSIBILITY, seems normal.
HEART, Sounds good
LUNGS, Sounds are good.
EXAM. URINE.

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

HISTORICAL.

LENGTH OF INVASION, Short ONSET GRADUAL OR SUDDEN, probably sudden
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother dead - about 56 - thinks from pneumonia.
Father or Pat. Relations, Father, he thinks, still living - in Ireland. —
Brothers or Sisters, 2 Brothers in Scranton, Penn. Claims are healthy

Personal and Medical History of Thomas Ryan.

EDSELL, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by deputy-Sheriff Lund, with the following history. Patient was found wandering about, perfectly naked, in the lower part of the County, yesterday morning. Could give no account of himself. Nothing seems to be known about him, except as a few points. Is a laborer; no residence known. Nothing known as to consanguinity or heredity, tho' both he & his parents have been addicted to intemperance. Date of this attack is not known. Patient has no rational idea, whatever. Supposed cause of attack is excessive use of liquor. On personal examination, patient complains of headaches; eyes are injected & there is extreme nervousness. He said nothing rational or intelligible. Did as requested, though irrational in manner. Appearance & manner, those of an irresponsible insane person.

Aug 23 Aug 23/93. Patient is in fair physical condition. Was, on admission, put on B2. Refused to permit taking of Pulse. L & T(e). Body seems badly scratched by briars & brush; feet also swollen. Aug 24/93. Did not rest very well, last night. Mn. Pulse 84. T(e) 99.8. Appetite is good. Has been restless, most of the day & talking incoherently. Em. Pulse 80. T(e) 100. Aug 25/93. Restless, sleeping but 3 hours, last night. Mn. Pulse 76. T(e) 99.6. Appetite still good. Sits quietly, most of the time, while awhile. Talks only when addressed. Seems willing to work. Em. Pulse 74. T(e) 99.8. Aug 26/93. Slept 6 hours last night & was quiet. Mn. Pulse 62. T(e) 99.8. Memory seems clearing up. Says "that the pictures make faces at him". Em. P84. T(e) 99.6. Aug 27/93. Was quiet, sleeping 7 hours, last night. Mn. Pulse 64. Appetite good. Very quiet during the day. Talks when spoken to. Aug 28/93. Quiet & well-behaved. Works some on ward. Talks quite freely. Continues to eat and sleep well, at night. Aug 30/93. Says "he feels better than when he came". Aug 31/93. Complains of occasional headaches. Talks quite freely. Works some in the hall, when asked.

Sept 6 Sept 6/93. During this second week, patient has been resting well, at night, sleeping uniformly 7 hours each. Has been quiet & well-behaved by Day. Appetite has continued good; bowels regular, as a rule. Pulse has, all along, been slightly below normal. He has been clean, tidy & of good personal habits. Has worked willingly. At times rather reticent & reserved; at others, talking quite freely & coherently. Reads some; goes out walking with the rest. When examined recently, appeared to realize his own condition & admitted that there was reason for bringing him here. No delusions, as yet noted. —

" 8/26 Sept 8/93. Wt today 171 lbs. Has made a marked gain in flesh, since admission. Sep 26/93. Has continued
" 30 quiet & well-behaved; still somewhat depressed. Has today transferred to B1. Sep 30/93. Is a well-behaved, quiet patient. Inclined to be alone. Does not say much, but answers questions quite coherently & intelligently, when addressed. Appears to be troubled, all the time, about something. Appetite is fair. Does not work any now. Says he does not sleep very well, at night.

Oct 11 Oct 4/93. Weight 181 pounds. Pulse 76. Continues to make decided gain in flesh; on the whole, has gained 25 pounds in weight since admission (about 6 weeks ago). Oct 11/93. Continues quiet
" 12 and well-behaved. Clean, tidy & of good personal habits. Still inclined to keep by himself most of the time. Now works well on the ward. Oct 12/93. Received money to go to Scranton, Pa. Left tonight. Seemed quite clear headed, though slightly depressed in mood, at times. He describes a confusion of mind, rather temporary, at about time of admission.

— Discharged —

Personal and Medical History of Mathias P. Johnson

From 17.

Feb 1894 Feb 1/94. Wt 170½ pds. Pulse 76. Feb 17/94. The following convulsions reported this month. one in the nights of the 3d 6th 7th 12th — Two convulsions, in the nights of the 2d 4th 5th 9th 10th 11th
Three, in the night of the 13th and 14th & in the night of the 16th. In all 23 convulsions, in thirty.
" 20 Feb 20/94. Appetite continues good; bowels regular. Conduct and behavior, in general, are about as above described. Is also, at times, quite noisy. Habits neat & clean. Works some.
" 21 Feb 21/94. Patient was committed here under the "new law" which has been declared unconstitutional. He was today taken out & committed under "old Law" from Olmsted.
" 28 Returned to B3 — Feb 28/94. Appetite good; bowels irregular; is very "cranky"; always ready to fight; very savage when provoked & makes a desperate fight, always taking the first thing he gets hold of to strike with; somewhat noisy at times; disagreeable to get along with. Still subject to his "fit spells" which he has quite frequently, at times; habits are clean & neat. Participates in the regular patients' dances when he behaves himself very gentlemanly. A good worker on ward. Health seems good.
Mar 1 March 1/94. Wt 169 pds. Pulse 76. March 11/94. Struck a fellow patient (Frank Simpson) last
" 31 evening, in the face, with a cup, bruising the face some. March 31/94. Patient has not had any convulsions for some time. In other respect, he continues about the same. Habits clean & neat.
Apl 2 April 2/94. Wt 165½ pds. Pulse 72. April 7/94. One convulsion last night. Apl 9/94. Another con-
" 11/12 -vulsion, last night. April 11/94. Two convulsions reported, during last night. Apl 12/94. Complained
" 13 of not feeling well & remained in bed all day. Apl 13/94. Fell off a table, during a convulsion,
" 24/30 and bruised his face slightly. Apl 24/94. One convulsion, last night. Apl 30/94. Continues about as described in note of Feby 28th last. Fits do not seem to occur now so frequently.
May 1/18 May 1/94. Wt 173 pds. Pulse 92. May 18/94. Not feeling well, remained in bed, all of today. May 19/94. Sick,
and in the hall today; says "he is feeling some better" — Was visited by his wife a few days ago (15th-12th) —
" 25 May 25/94. Patient & K Hanson (another patient) had a fight, today; the former getting his face
" 31 slightly bruised & the latter, his face scratched. May 31/94. Appetite is good; bowels somewhat irregular. His behavior is about as usual, though he seems somewhat better to hand, of late. Fits still occur quite frequently. Habits are neat & clean. He works some on the ward. Talks freely. Takes part in all patients entertainments. —
June 1/30 June 2/94. Wt 169 lbs. Pulse 104. June 30/94. During this month, patient had 40 nocturnal convulsions; scarcely a night passing that they do not occur; on some nights he has had as high as 3 or 4. He complains of not having been feeling well, the past few days; pains in stomach; poor appetite &c. — There is no noticeable change in patient's condition to report, at this date. Habits continue clean & neat.
July 1 July 1/94. Wt 165 pounds. (Patient has been losing flesh the past 2 months, without any apparent cause). P 70.
" 31 July 31/94. Patient, during this month (July), had 35 convulsions, at night: in one of these, he fell out of bed & cut his temple quite severely; only 2 fits are reported as having occurred in day time. Conduct and behavior are about as usual. Inclined to be easily excited or provoked: then becomes quite ugly & fuss-acious. Yet, on the whole, he seems to be more quietly behaved during the past few months. Seems in good health. — He talks freely & quite rationally; is a good & willing worker on the hall; habits are clean & neat. Takes part in all of the patients entertainments & enjoys himself at them. Always well-behaved then.
Aug 1/31 Aug 1/94. Wt 171 pds. Pulse 80. Aug 31/94. During this month, patient has had 38 nocturnal convulsions; only two fits have been reported as occurring by day. There has been no special change to note regarding him, except that for some time he has been quite well-behaved. —

(Carried to page 44)

Personal and Medical History of Albert Luning

EBBERT, FICKAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3449.
Residence, Hammond, Minn.
Date Admission, 24th August 1893.
Admitted by, D. Phelps Hour, 10.45 AM
How Sent, Thomas Fraser, Jof D, Olmsted County
Sex, Male
Age, 19 years
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Farmer
Degree Education, Common School
Profession Religion, Lutheran
Habits, not intemperate
Nativity, Germany (that of parents also) —
Physicians Committing, A.W. Stuckfield & Chas. J. Gauger.
Correspondents, (Father) Ludwig Luning, Hammond Minn.

No. for Year, 19.
Insane Relatives, none
Cause Exciting, overheat
Cause Predisposing, none stated
Form, Pubescent Insanity.
Accompanying Bodily Disorder, none noted
Suicidal or Not, no X
Date of this Attack, July 15th 1893.
Duration, about 6 weeks
No. of Attack, 1st
No. of Admissions, 1
Age First Attack, 19 years
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Eddy D. Ely, Aug 31/93. — 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:
Patient cannot be induced to speak; does however as requested. Is very sluggish & dull in all his movements

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

Personal and Medical History of Albert Luning

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5 in WEIGHT, 160 pds. NUTRITION, Good
WOUNDS OR ABNORMALITIES, —
TONGUE, Tremors, None Coatings, very slight Promptness Movement, fairly prompt
PUPILS, Equality, equal Size, somewhat dilated
Response Light, yes Accommodation, yes
SIGHT, seems good
HEARING, seems good
COORDINATION, Arms, Finger to nose, eyes shut, fair.
Legs, Standing, Eyes shut. Ataxic some.
TREMORS, Hands, None Tongue, None
Facial Muscles. General None noticeable

Case No. 3449. Albert Luning. 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 palpitating
LUNGS, Sounds are good.
EXAM. URINE.

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

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Albert Luning

EBERT, FIELAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3449.

Residence, Hammond, Minn.

Date Admission, 24th August 1893.

Admitted by, D. Phelps Hour, 10·45 A.M.

How Sent, Thomas Fraser, Jof O, Olmsted County

Sex, Male

Age, 19 years

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School

Profession Religion, Lutheran

Habits, not intemperate

Nativity, Germany (that of parents also) —

Physicians Committing, A.W. Stuckfield & Chas. J. Gra

Correspondents, (Father) Ludwig Luning, Hamm

No. for Year, 19.

Insane Relatives, none

Cause Exciting, overheat

Cause Predisposing, none stated

Form, Puberscent Insanity.

Accompanying Bodily Disorder, none noted

Suicidal or Not, not

Date of this Attack, July 15th 1893.

Duration, about 6 weeks

No. of Attack, 1st

No. of Admissions, 1

Age First Attack, 19 years

Time of Leaving,

EXAMINATION

Eddy Dr Eby, Aug 31/93. — 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:

Patient cannot be induced to speak; does however as requested. Is very sluggish & dull in all his movements

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, & crying, at times

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Albert Luning

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 160 lbs. NUTRITION, Good

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, some Coatings, very slight Promptness Movement, fairly prompt

PUPILS, Equality, equal Size, somewhat dilated

Response Light, yes Accommodation, yes

SIGHT, seems good

HEARING, seems good

COORDINATION, Arms, Finger to nose, Eyes shut, fair -

Legs, Standing, Eyes shut, sways some -

TREMORS, Hands, some Tongue, some

Facial Muscles, General, some, more or less

REFLEXES, Patellar, equal; exaggerated; about 9 —

Other Reflexes, slight ankle - clonus

ARTICULATION, Hesitating, Slurred, refuses to speak

FACIAL EXPRESSION, Very dull

SENSIBILITY,

HEART, sounds palpitating

LUNGS, sounds are good -

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

1893

Was brought here in charge of Sheriff Stewart & accompanied by father, with following history. There is no history of consanguinity or heredity. This is 1st attack. Symptoms manifested July 15th 1893: had headache, followed by stupor. Disease seems stationary; no rational intervals. Is neither disposed to injure others, nor suicidal, nor filthy, nor destructive. Has always stupid. Neither he nor parents have ever been addicted to intemperance. Has had no severe disease & now head-injury. Has not been confined or restrained. Supposed cause of the disease is overheat. Has had, practically, no medical treatment. — —

On personal examination, is found to be dull & stupid; could not be made to answer questions. He shows no signs of intelligence. Refuses to engage in conversation. Seems to have no comprehension of what is said to him. —

Aug 24 — Aug 24/93. On admission, is found to be in fair physical condition. Was put on 5d. Pulse 88. T(e) 99.6. Bodily condition clean; no injuries or peculiarities noticed. PM. Sits quietly, most of the time, in hall. Occasionally tries door, to get out. Talks none. Is dull & stupid. Ate no dinner or supper, to day. No complaints.

" 25 Pulse 100. T(e) 99.6. Aug 25/93. Slept 5 hours, last night; quiet, when awake. AM. Pulse 88. T(e) 99.2. — Appetite medium only. Silent, dull & inactive; goes on walks; sits quietly, by himself, while in hall.

" 26 PM. Pulse 82. T(e) 99.4. Aug 26/93. Was quiet, sleeping 6 hours, last night. AM. Pulse 90. T(e) 98.8. —

" 27 Talks but very little. Appetite fair. PM. Pulse 88. T(e) 98.8. — Aug 27/93. Was again quiet, sleeping 6

" 28 hours, last night. AM. Pulse 86 — Seems homesick — Has been crying today. Aug 28/93. Slept 5 hours, last night; was quiet when awake. AM. Pulse 90. Cried quite a while, this morning. Is dull, stupid;

" 30 Talks very little; memory seems impaired. Aug 30/93. Has been quiet, sleeping 7 & 8 hours each of past two nights, respectively. Pulse has been somewhat above normal, each of past 2 mornings. Was, today, visited by his father. Had a "crying spell" today. Very quiet. Talks but little. Still stupid & dull.

" 31 Aug 31/93. Is depressed & very quiet today. Appetite keeps good.

Sep 1/ Sep 1/93. Seems some brighter today; walks a little about the hall. Sep 2/93. Was very restless, last night

" 4 and is so, today. Had a "Spell" of crying. Sep 4/93. Restless, walking about ward, more than usual.

" 6 Still dull & stupid in appearance & manner. Sep 6/93. During last week, patient has, as a rule, been quiet at night. Sleeping 6 to 8 hours, each. Has been restless & depressed by day, often crying. He has, from the first, been stupid & dull. When brought down for examination recently, could not be induced to speak & no particulars could be obtained from him. Has been clean, fairly tidy & of good personal habits. Appetite has now become quite good. At times, has seemed brighter, but almost immediately lapses into his dull & stupid condition.

Was today, visited by a friend, & his father & patient was permitted to go home, at first. Patient had been committed to asylum under the "Law of 1893" recently declared unconstitutional —

1894

March 14 March 14/94. Patient was Returned today, under "new Warrant" from Olmsted County. Put on B3 —

" 31 March 31/94. Visited today, by father & mother. Appetite good, bowels regular. Is very dull & stupid. Will not speak to any one; will occasionally laugh to himself; also go into the bed-room, shut the door & keep pounding on the radiator for hours at a time, if not stopped. Habits are clean. — —

Apl 7 April 7/94. Wt 167½ pd. (is gaining some in flesh). Pulse 92. Apl 17/94. Is vaccinated today.

" 22/30 April 22/94. Was restless & noisy for 4 hours, last night. Apl 30/94. Does not change in any respect, his habits are becoming rather filthy, of late. Indolent & lazy — Does no work. —

1894

May 1/31 | May 1/94. Wt 158 lbs. | Has taken to Work [illegible]

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DETAILED HISTORY OF SICKNESS OF MR Albert Luning
DIAGNOSIS.

DATE Sept.	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
11	7	5	100	100					Weight 177¼ lbs.
12	7	5	84	70					Appetite quite good
13	7	5	118	94					Up upon ward about 4 hours
									Bowels not very regular
14	7	5	76	64					Bowels moved
15	7	5	76	84					Still confined does not seem to gain strength very rapidly
16	7	5	96	80					Appetite good Bowels regular
17	7	5	77	97					Up on ward dressed
18									Up on Ward appears much brighter than when first put here appetite good Bowels very regular quite free Visited by father
19	7	5							Upon ward sits down all the time does not seem to take interest in any thing appears to be asleep part of the time
20									Upon Ward Appetite good, Bowels regular
21	7	5	76	80					Noisy when awake singing a great deal
23									Appetite good Bowels regular Dressed by brother
27									Burned his chin on heater quite severely bathed in Carron oil
30									Chin bathed with Carron oil every day appetite good bowels regular also Chin healing quickly

does not hear much as patient continually is picking at same — Patient seems very dull and

(Carried to 100)

DETAILED HISTORY OF SICKNESS OF MR Albert Luning
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Aug 29	7	3	76	80					Of late is quite noisy during night.
30	7	3	78	70					Typhoid fed quietly as a rule during
									the day
31	7	3	76	84					Appetite very good. Bowels regular. Appears
									ill & restless about this day.

Aug 31 Sept 1/93.
Sept 1 and is so, too.
" 4 Still dull & "sn
" 6 quiet at night. Sleep
has, from the first, been
- dued to speak to parties
personal habits. Appetite ha
- most immediately lapses into the
Sept 2/93. Was very restless last night
ing about ward, more than usual.
Past week, patient has, as a rule, been
ss & depressed by day, often crying. He
w for examination recently, could not be in-
on him. Has been clean, fairly tidy & of good
e good. At times, has seemed brighter, but al-
upid condition.
Was today, visited by end, & his father & patient was permitted to go home, on trial.
Patient had been committed here under the Law of 1893 recently declared unconstitutional —

1894
Mar 14 March 14/94. Patient was Returned today, under new Warrant from Rhusted County. Put on B 3
" 31 March 31/94. Visited today, by father & mother. Appetite good; bowels regular. Is very dull & stupid. Will not speak to any one; will occasionally laugh to himself; also go into the bed-room, shut the door & keep pounding on the radiator for hours at a time, if not stopped. Habits are clean. ——
Apr 17 April 2/94. Wt 167½ lbs. (is gaining some in flesh). Pulse 72. Apl 17/94. Has vaccinated today.
" 22/30 April 22/94. Was restless & noisy for 4 hours, last night. Apl 30/94. Doesn't change in any respect, the habits are becoming rather filthy, of late. Indolent & lazy — Does no work. —

(Carried to 100)

1893 Was brought
There is no
1893: had
It inju
have
or

Sept 4 am.
" 6 Still in
quiet at times
Has, from the first
- dined to speak to
personal habits. Appetite
- most immediately lapses into

Was, today, visited by
Patient had been committed

1894 March 14/94. Patient was Returned today, upon
Mar 14 new Warrant from Olmsted County. Return B[d]
" 31 March 31/94. Visited today, by father & mother. Appetite good, bowels regular. Is very dull & stupid. Will not speak to any one; will occasionally laugh to himself; also go into the bed-room, shut the door & keep pounding on the radiator for hours at a time, if not stopped. Habits are clean. ——
April 7/94. Wt 167½ lbs. (is gaining some in flesh). Pulse 72. Apl 17/94. Was vaccinated today.
April 21/94. Was restless & noisy for 4 hours, last night. Apl 30/94. Doesn't change in any respect, the habits are becoming rather filthy, of late. Indolent & lazy — Does no work. —

Sept 1894 Wt 158 lbs. (Has lost some in flesh the last month with a Cough

DETAILED HISTORY OF SICKNESS OF MR Albert Luning
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP. AM	TEMP. PM	
Aug 7	7	5	112	108	60	36	100	102	Night - Slightly restless - Bowels moved freely
									6 AM 2 - 6 PM 1 pt. Egg nog + 2 Whiskey = 1
									8 " Sponge Bath & 3d Bowels moved 1 "
									Appears some better today
8	7	5	108	100	34	36	100	998	Night - Rested quietly well
									7 hrs 12 N. 6 PM 1 pt Egg nog + Whiskey = 1
									Says he is Sulsey better
9	7	5	104	86	32	26	994	982	Put on diet of solid food
									Still complains of pain over side
10	7	5	100	66	26	22	994	988	
11	7	5	88	66	30	24	100	992	Appetite good - Steadily growing stronger
12	7	5	100	68	24	36	99	99	Bowels regular - coughs a little at times
									and passes phlegm
13	7	5	76	64	20	20	986		
14	7	5	72	68	28	32	998	994	Cough some & complains of throat
									Bowels sore - Bowels in
									very good condition
15	7	5	74	80					Gave an ounce of evaporated cod
									glycerine to effect
16	7	5	92	64					
17	7	5	84	72					1 PM Gave Salts 3i
18	7	5	72	72					9 AM 6 complains of pain in stomach
19	7	5	100	94					Bowels moved but little
20	7	5	70	88					Coughs some yet at times and seems to be in pain
21	7	5	72	72					Bowels costive
22	7	5	72	78					Gave an ounce of evaporated cod glycerine Bowels moved
23	7	5	100	74					Quiet restless of late Appetite good
24	7	5	70	66					
25	7	5	100	88					Appetite good Bowels not very regular
26	7	5	80	66					
27	7	5	88	80					Sleeps from 3 to 6 hours during the night
28	7	5							

Has not near much as patient continually is picking at same - Patient seems very dull and

(Carried to 100)

1893

Was b
Here
189

.8.

epsy 6
t 8 hours,
stupid;
hours each
mornings. Was,
ill stupid & dull.

was very restless last night
ward, more than usual.
patient has, as a rule, been
d by day, often crying. He
tion recently, could not be in-
new clear, fairly big & of good
ine, has seemed brighter, but al-

Yr
Has, yr
- need to spe
personal habits.
- must immediately take

Was, today, ve
patient was permitted to go home, on trial,
Patient had been committed here
cently declard unconstitutional —

1894
March 14 March 14/94. Patient was Returned today
" 31 March 31/94. visited today, by father & mother. Appears good; bowels regular. Is very dull & stupid. Will not speak to any one; will occasionally laugh to himself; also go into the bed-room, shut the door & keep pounding on the radiator for hours at a time, if not stopped. Habits are clean. ——
April 7/94. Wt 167½ lbs. (is gaining some in flesh). Pulse 72. Apl 17/94. Was vaccinated today.
" 22/30 April 22/94. Was restless & noisy for 4 hours, last night. Apl 30/94. Does not change in any respect, the habits are becoming rather filthy, of late. Indolent & lazy — Does no work. —

1894

May 1/94. Wt 158 lbs. (Has lost some in flesh, the past month, without known cause) — Mar. 31/94. He constantly sleeps
dp or walks
olent & lazy.
ning this month
wzy & restless,
speaks. Habits dirty
uite neat today.
very weak.
milk, egg
en sleeping
ght; also
oated, Laud
ties; Color
milk; also
he 5th Dist
; also some
ested quite
food. —
rd; Patient
phlegm —
notion —
plains of
rs in pain.
tless, of late.
irregular
ed, Juice
vels have
hid record).

DETAILED HISTORY OF SICKNESS OF MR. Albert Luning
DIAGNOSIS.

1894 C 2 E

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Aug 1	9.30		120		48		103		Cures are well from B. S.
									Appears quite weak. Coughs and
									raises green phlegm streaked with
									blood. Wt 142 lbs. Put on old jacket.
									1.4 M. Drank about 1 pint of egg nog
	5		140		50		104	8 12.30	M. Whiskey ℥ j — 5 P.M. Whiskey ℥ iv.
									5 P.M. Has diff. trouble in breathing —
									6.30 " Drank 1 quart of egg nog and
									whiskey ℥ j —
2	7	5	144	144	60	70	103	104.2	Night. Slept 5 hrs. Coughed and moaned
	5		136		48				a good deal. Appears about same.
									6 A.M. 2 glasses egg nog 8.30 Drank 1 pint
									of egg nog and whiskey ℥ j —
3									12 M. 6 P.M. Drank 1 pint egg nog at each time.
									Quite restless the greater part of the day.
									Coughed & was troubled and raised
									phlegm of a dark yellow & green
									6 P.M. Visited by Parents. Could not
									be weighed —
3	7	5	124	136	66	56	102	103.8	Night. Slept 4 hrs. Rested better than last
									night. Coughed some. Expectoration thick
									and tough. Raised a small quantity
	5		132		68				of urine quite dark colored —
									7 A.M. 12 M. 6 P.M. Put egg nog with ℥ j
									5 P.M. Complains of pain in right lung.
									Bowels have not moved while on cot.
									Pain seems frequently associated
									quantity of dark color. Appears
									Gone better today. Visited by Parents.
4	7	5	126	140	64	84	105	104	Night. Weaker and more quiet.
									6 A.M. 1 Pint of egg nog and ℥ Dr. whiskey
	5		120	120	36				5 " 1 glass punch. 12 noon 6 P.M. Pint quick.
									and ℥ iv whiskey each. Bowels move freely.
									5 P.M. Bowels moved freely —
5	7	5	132	120	48	48	104	102.4	Night. Very quiet. Only slept a little while
	5		132		38				at a time. Fed 1 pint of egg nog at 6 a.m.
									and 1 P.M. and 6 P.M. with whiskey. Visited
									by brother. Coughed again and raised
									raised phlegm streaked with bright
									red blood. Very restless —
6	7	5	116	116	68	48	99.8	101.2	6.30 A.M. 1 Pint milk. 12 M. 1 Pint milk and ℥ iv whiskey. 5 P.M.
									appears to breathe with less difficulty;
									1 Pint egg nog and whiskey ℥ iv each. Coughs
									Quite restless morning & noon. Looks dark

Σ

but does not heal much as patient continually is picking at same. Patient seems very dull and
(Carried to 100)

Pers

1893

EBBERT, PITZLER & GRAHAM

[illegible]

[illegible]

[illegible]

Personal and Medical History of Max Rottler

HERBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3450

Residence, 276 Goodhue St. St. Paul

Date Admission, 25th August 1893.

Admitted by, D. Luiton-Phelps Hour, 7 PM

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

Sex, Male

Age, 50.

Civil Condition, married

Children, four

Age Youngest Child,

Occupation, machinist

Degree Education, fair

Profession Religion, Catholic

Habits, hard drinking for past 18 months

Nativity, Germany (parents also born there)

Physicians Committing, Arthur Sweeny & A. B. Ancker

Correspondents, Paul Febre, 7 Corners.
John Sautee, Dawson St.

No. for Year, 20

Insane Relatives, none

Cause Exciting, Alcohol

Cause Predisposing, probably intemperance

Form, Acute Mania

Accompanying Bodily Disorder, none noted

Suicidal or Not, not

Date of this Attack, 2 weeks ago

Duration, 2 weeks (in City Hospital).

No. of Attack, 1st

No. of Admissions, 1

Age First Attack, 50 years.

Time of Leaving, Feb. 21. '94

Time in Hospital, 5 mo. 27 ds.

Result, Rec.

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

EXAMINATION ON ADMISSION.

Exd by D. Eby, Sep 9/93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear at present

Quick or Sluggish, Quite quick

MEMORY:

Past Events, }
Recent Events, } Admits some impairment
Special Subjects, }

PERCEPTIVITY:

Alert or Dull, fairly good

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, quite good

Own Mental State, quite good

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Seems to feel his present condition. Says, he has been through the Franco-Prussian War and this is the first trouble he has had.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, somewhat

DELUSIONS:

Systematized ~~or Not~~, unfaithfulness of wife

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none detected

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, quite voluble

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 132 pds NUTRITION, fairly good now.

WOUNDS OR ABNORMALITIES, Scar of old injury on forehead. Abnormalities, probably none.

TONGUE, Tremors, slight Coatings, not much; fairly clear Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, yes Accommodation, yes

SIGHT, seems fair; uses glasses

HEARING, some impairment.

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

Legs, standing, eyes shut, slight swaying.

TREMORS, Hands, some Tongue, slight

Facial Muscles, General, none —

REFLEXES, Patellar, equal; about 1 in 2 on Dr. Pl. scale.

Other Reflexes,

ARTICULATION, ~~Hesitating,~~ fair; German Accent ~~Slurred,~~

FACIAL EXPRESSION, looks depressed.

SENSIBILITY,

HEART, very rapid; sounds are good.

LUNGS, sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Records kept Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, not very long ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") } no history of heredity.

Mother or Mat. Relations,

Father or Pat. Relations, father living — 78 — seems good health

Brothers or Sisters,

Personal and Medical History of May Rothler

1893

Was brought here by Deputy-Sheriff Hawes, with the following history of case. There is no history of consanguinity or hereditty. This is 1st attack, Commencing about 2 weeks ago. Was been in the City Hospital St. Paul. Has trouble with his wife; was arrested; sent to workhouse; began to act and talk strangely; thence sent to City Hospital. Disease appears to be stationary; there are rational intervals; occasionally talks rationally on some subjects; at other times, very irrational. Is confused as to times & places. Derangement now shown by the belief that his wife is unfaithful, going with other men & neglecting her household. Talks irrationally of his wife, property, work &c. Though in the workhouse & hospital for 2 weeks, he believes he has been working every day; describes events at his home, during that time. Says his wife comes to see him in company with a "police-man"; has delusions of seeing & talking with his friends. Believes that some one is trying to marry his daughter, who is too young to be married. Has lost all knowledge of time, saying, whenever early in the morning, "that it is 6 o'clock & that he has just returned from work". He is neither suicidal, nor disposed to injure others, nor filthy nor destructive. Has drunk hard for past 18 months. Fell 20 feet last Summer; scar of old injury on forehead. Has not been restrained or confined. Cause of disease is Alcohol. Has been medically treated, with relief of some tremor of hands. On personal examination, facial expression is found active & animated; talks with rapidity and earnestness, & cannot be reasoned out of his delusions, or his ideas of suspicion. Said that his wife was unfaithful; that he has just come to the Hospital; that he was not sent to the workhouse; but went there to get some clothes. That he has been working daily & has seen & talked with his friends, when he had not done so & had lost knowledge of time & place: Talked with excitement & irrationally. Manner & appearance were excited. Has had some headache, recently.

Aug 25 — Aug 25/93. Patient is in rather weak physical condition. Was, on admission, put on B3; Pulse 86. T(a) 99+
" 26 — Bodily condition quite clean; no injuries or peculiarities noticed. Aug 26/93. Slept 6 hours, last night. — Am. Pulse 84. T(a) 98.8. Is nervous & excited today; walking about all the time; does not seem to realize where he is. Thinks he is working right along; talks all the time or nearly so; memory not of the best. Appetite is good.
" 27 — no cough noticed. Pm. Pulse 80. T(a) 98.6. Aug 27/93. Was very restless last night; slept but 1½ hours. — Am. Pulse 80. T(a) 99. Is again nervous & excited to day. Has a ravenous appetite. "Thinks he is in St Paul".
" 28 — Pm " 84 " 98.8. Aug 28/93. Was very restless & noisy, sleeping but 2 hours, last night. Am. Pulse 80. T(a) 98.6.
" 29 — Is very restless today. Talks incoherently. Appetite very good. Aug 29/93. Slept but 4 hours last night; was very restless & excited, when awake. Am. Pulse 80. Restless & excited today. Does not yet seem to realize
" 30 — where he is. Aug 30/93. Again passed a poor night, last night; restless & disturbed; also excited; slept
" 31 — only 3 hours. Again restless today. Pulse this Am 82. Aug 31/93. Somewhat less disturbed, sleeping 6 hours, last night. Am. Pulse 80. Does not seem to know where he is; "in St Paul or Philadelphia". Talk
Sep 1 — is incoherent. Sep 1/93. Slept 5 hours last night; was quieter than usual. Is now less restless, by day;
" 2 — Appetite continues good. Sep 2/93. Has somewhat restless, but slept 6 hours, last night. Is becoming,
" 3 — gradually, less nervous. Does not yet realize where he is. Pulse 76. Sep 3/93. Slept 6 hours last night; was
" 4 — quiet when awake. Appetite good; bowels regular. Sep 4/93. Is quiet & well-behaved by day; is also becoming
" 6 — more sensible in his talk. Appetite good; bowels regular. Sep 6/93. Usually quiet during the day, but
" 8 — is somewhat inclined to be restless, at times. Talks quite freely; Works some in ward. Sep 8/93. For the last week patient has been quiet at night, sleeping 6 to 7 hours on each. Has been slightly restless in 1 or 2 nights. Pulse has become about normal. Appetite good; bowels regular. Has been clean, fairly tidy

Personal and Medical History of May Rothler

1893

Sep 8 (cont'd) — and of good personal habits. Talk has become more coherent and is now quite free. Has done some work
" 9 — in the hall & is anxious to walk outside. Is quiet and well-behaved. Sep 9/93. Has examined in office, today. Conversation was quite voluble and coherent. Manifested a systematized delusion (unfaithfulness of wife) Reasoned quite well as his own mental state and seemed to feel his present condition. Wt. today, 144½ p.s.
" 15 — (Has made a decided gain in flesh). Sep 15/93. Usually sleeping quite well, was, last night restless & noisy
" 22 — and slept but 2 hours. Sep 22/93 Slept only 3 hours, last night; restless & noisy, the greater part of the time.
" 27 — Sept 27/93. Apparently now rests & sleeps well, at night. Memory seems very poor; cannot remember even for a short time. Appetite good; bowels constipated, at times. Bodily condition seems good. — Patient has taken a peculiar interest & has done persistent work in caring for an acute case, a young patient here. Is very feeble, mentally, however.

Oct 3/6 — Oct 3/93. Wt 153 p.s. (Continues to increase in weight); Pulse 80. Oct 6/93. Apparently sleeping well,
" 31 — at night, usually; was, last night, very noisy & restless, sleeping only 2 hours. Oct 31/93. Appetite good. Is quiet & well-behaved; works some in ward. Talks freely; Makes no complaints. Head some. Does not play any games &c. Memory is poor. Patient has an odd, shifting manner. Has taken a good deal of care of a young boy (named Campbell), who was very restless.

Nov 1/10 — Nov 1/93. Wt 150 p.s. (a further gain in flesh). Pulse 74. Nov 15/93. Behavior good. Talks freely —
" 25 — very pleasant & sociable; memory, however, is poor. Works willingly in the ward. Nov 25/93. Has been sick & in bed the past 5 days. Pulse ranging from 96 to 102. Is now 96. The temperature,
" 30 — for first 2 days, was 100. & 99.8 - respectively. Is up, to-day. Nov 30/93. No material change from note of 15th inst. Always quiet & well-behaved. —

Dec 1 — Dec 1/93. Wt 169 pounds (a further gain; has made a gain, in all, of 37 p.s. since his admission).
" 31 — Pulse 76. Dec 31/93. Continues quiet & well-behaved. Appetite good. Bowels apparently regular;

1894 — memory still poor. Works well in the ward. Makes no complaints.
Jan 2/31 — Jan 2/94. Wt 167½ p.s. Pulse 72. Jan 31/94. Last general note still holds good.
Feb 1 — Feby 1/94. Wt 171 " " 72. Is troubled some with sore eyes; (probably a cold).
" 21 — Feby 21/94. Always quiet & well-behaved. Appetite good. Bowels regular. Talks freely; but memory still quite poor. Makes no complaints. Works well & willingly, in the ward.

Has Improved greatly & was, to day, Sent Home.

— Crossed off the books; was illegally committed —

Personal and Medical History of Cornelius Watne

SEBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3451.

Residence, Arndahl, Minn.

Date Admission, 26th August 1893.

Admitted by, Dr Kilbourne Hour, 3 PM.

How Sent, E. V. Farrington, Jof P. Fillmore County

Sex, Male

Age, 47

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Laborer & Peddler

Degree Education, Limited

Profession Religion, Lutheran

Habits, not intemperate

Nativity, Norway (parents also born there).

Physicians Committing, J. H. Phillips & G. A. Love

Correspondents, (Friend) Ole E. Bryun Arndahl Minn

Dr Magerson of Rushford has prescribed for him?

No. for Year, 21.

Insane Relatives, one brother, an idiot

Cause Exciting, not known

Cause Predisposing, possibly heredity

Form, Acute Mania

Accompanying Bodily Disorder, none noted in papers"

Suicidal or Not, not.

Date of this Attack, Last Tuesday

Duration, about 4 days.—

No. of Attack, 1st

No. of Admissions, 1

Age First Attack, 47 —

Time of Leaving, March 20. 94

Time in Hospital, 6 mos 25 days.

Result, Rec'd

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

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exa by Dr. Phelps - Aug 28/93 =

MENTAL ACTIVITY:

Clear or Confused, Slightly Confused

Quick or Sluggish, "

MEMORY:

Past Events, Good as far as can now be judged.

Recent Events, "

Special Subjects, "

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Doubtful

Own Mental State, "

Special Subjects, "

EMOTIONAL STATE:

Normal, Calm, Normal

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None noted

Special Subjects, Denies those charged against him

Transitory or Not,

HALLUCINATIONS: None detected

ILLUSIONS:

CONVERSATION: Can't talk English. Seems

Coherent or Incoherent, somewhat dulled as if

Voluble or Reticent, shewas never very strong mentally

GENERAL DESCRIPTIVE REMARKS:

Examination made through Interpreter. States he has had this deformity since 12 or 13 years old; result of fall down stairs. Denies attacking a woman with a knife. Not talking English, hardly enough information can be obtained to form a good opinion, but he seems like a man of a rather low state of intellect, who from drink or some other reason, has become more deranged than usual.

Personal and Medical History of Cornelius Watne

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Fairly Good.

WOUNDS OR ABNORMALITIES, Is considerably hunch-backed; kyphosis

TONGUE, Tremors, none noticed Coatings, normal Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation,

SIGHT, Good

HEARING, Normal

COORDINATION, Arms, Seems fairly good. Standing, Eyes shut, quite good.

Legs, Standing on foot, Lowers at instant.

TREMORS, Hands, Tongue, none noticed.

Facial Muscles, General,

REFLEXES, Patellar, equal; about 8 or 9. —

Other Reflexes,

ARTICULATION, ~~Hesitating,~~ Seems fair in his ~~Slurred,~~ own tongue

FACIAL EXPRESSION, fair

SENSIBILITY,

HEART, Sounds fairly good

LUNGS, Upper part of right lung has some "sticky" sounds; some rales.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Cornelius Watne

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Henry Nupson, deputy-Sheriff, with the following history. There is no history of consanguinity, but possibly some heredity, as he has a brother an idiot. This is the first attack; occurring a few days ago; began acting very strangely; talked a good deal to himself; will not speak to any one else nor eat nor drink. Disease seems increasing. Derangement is now shown principally in the great change in manner & habits, will neither eat, drink nor talk; will not sleep; walks around the house, making peculiar & violent gestures. Is disposed to injure others. Is neither suicidal, nor filthy nor destructive. Is not, nor are his parents, addicted to intemperance. He has had no severe disease or head-injury. Has not been restrained or confined. Cause of disease is not known. Patient has refused to take medicines prescribed for him. On personal Examination, the patient sits perfectly quiet; no information can be got from him; is very dull at present: did nothing but stare in a vacant manner. Appearance & manner like one demented. It is reported that he attempted to get a knife from a woman, by force; impression given that he was going to injure some one with it.

Aug 26 Aug 26/93. Patient is in apparently good physical condition, On admission; was put on B³. Examined (by Dr. Eby); there was found a couple of bruises on right arm; tattoo mark on right hand; scar on right hand. also has kyphosis; scar on forehead, as if from a burn. Pulse 72. T(R) 98.6. Appetite good; bowels seem regular; no cough observed. Is quiet & well-behaved. Does not talk to any one but answers questions freely & willingly. Does not seem to know where he is or what sort of a place this is. Says he lives at Rushford, Minn. Aug 27/93. Slept quite well, 8 hours, last night. Appetite is good. Bowels moved. Is very quiet. Occupies his time, chiefly, in reading. Can't talk English. Does not yet seem to know

" 28 why he was sent here. Aug 28/93. AM. Pulse 74. T(R) 99. - Continues quiet & well-behaved. -

" 29 Aug 29/93. AM. Pulse 70. T(R) 98.4. Was examined in office, yesterday. Conversation shewed him to be somewhat dulled and as if he never very strong mentally. Denied delusions & the charges

" 30 made against him in "Commitment papers". Aug 30/93. Got up once, last night & put on his clothes. AM. Pulse 70. T(R) 99. PM. Pulse 66. T(R) 99.4. Still quiet & well-behaved; spends most of his time at reading. Says he was the victim of a nervous disease & for a couple of days, did not know

" 31 what he was doing. Aug 31/93. AM. Pulse 66. T(R) 99. Appetite still good. Bowels fairly normal.

Sep 1 Sep 1/93. AM. Pulse 74. T(R) 98.8. Sep 2/93. AM. Pulse 74. T(R) 99. Hardly ever speaks. Read a

" 3 good deal. Is very quiet. PM. Pulse 76. T(R) 98.8. Weight, today, 151 pounds. Sep 3/93. Pulse 68

" 4/5 T(R) 98.8. Sep 4/93. AM. Pulse 76. T(R) 99. Sep 5/93. AM. Pulse 96. T(R) 99.2. —

" 6/7 Sep 6/93. AM. Pulse 80. T(R) 99. Sep 7/93. AM. Pulse 80. T(R) 99.2. Sep 8/93. AM. Pulse 78.

" 9 T(R) 99. Sep 9/93. Since admission, rest and sleep at night have been apparently good. Has been quiet. By day, has also been quiet & well-behaved. Clean in dress & of good personal habits. His appetite has been uniformly good. Bowels, constipated the first few days, have now become regular. Eats little today, probably because he cannot speak English. Spends his time, chiefly, in reading. Goes out walking with the rest. No delusions have yet been noted. Sep 27/93. Appetite continues good;

" 27 bowels regular. Well-behaved. Rather quiet. Cannot speak English; but converses freely in his native language. Talk is rational & apparently is all right. Does no work. Recently, when sleeping in his chair, fell backward &, receiving a slight scalp-wound. Patient seems somewhat defective, but has recovered quite perfectly from the

" 30 acute attack. Sept 30/93. Keeps about the same, from day to day.

Oct 2 Oct 2/93. Weight 141½ lbs. (Is still gaining in flesh). Pulse 76.

Personal and Medical History of Cornelius Watne

1893

Oct 31 Oct 31/93. Appetite continues good & bowels normal. Is quiet & well-behaved. Talks rationally. Not much the matter with him now. Works some onward. Habits clean.

Nov 1/30 Nov 1/93. Wt 170 lbs. Pulse 78. Nov 30/93. Apparently rests and sleeps well, at night. Appetite good. Bowels regular. Is well-behaved. Nothing, out of the way, is noticeable in either his conversation or actions. Habits are clean. Works some in the ward.

Dec 4/7 Dec 4/93. Wt 183½ lbs. Pulse 70. Dec 12/93. Was, today, transferred to the Annex. —

" 31 Dec 31/93. Is quite troublesome, at times: annoys the other patients by pulling their clothing, and stealing papers especially from the older ones. Is in good physical condition.

1894 Jany 7/31 Jany 2/94. Keeps about the same. Jan 31/94. No change; seems quite contented here.

Feby 28 Feby 28/94. There is no change to note. Quiet and harmless. Works in dining-room - health good. —

March 31 March 20/94. Was permitted, today, to go home

Crossed off the records; was illegally committed -

From 216. **Frederick Andresen**

Dec 22/23 is confined to bed. Appetite good; bowels regular; injured parts appear much better. Dec 23/94. Slept but 3 hours,

" 27 was restless 6 hours, last night. Patient is doing nicely. Dec 27/94. Rested from 2 to 3 hours. Put sheets 6 to

" 28 East.

" 29/30 Vol. 22 Folio 213

1894 Jan 28 DETAILED HISTORY OF SICKNESS OF MR Frederick Andresen
DIAGNOSIS.

DATE	HOUR	PULSE	RESP.	TEMP.	
	AM. PM.	AM. PM.	AM. PM.	AM. PM.	
Dec. 24	7	0	96	28	Patient doing well. Night. Slept 7 hours restless 3 hours.
" 25	7	0	94	70	Night. Slept 6 hours restless 3 hours.
" 26	7	0	76	84	Appetite good bowels regular. Night. Slept 7 hours restless 2 hours.
" 27	7	0	72	72	Night. Slept 6 hours restless 2 hours.
" 28	7	0	84	72	Night. Slept 4 hours restless 5 hours.
" 29	7	0	76	72	Appetite good bowels regular. Appetite and digestion well.

Sept 1/95. Wt 170 " " 96. Sep 25/95. Complains of pains in his legs & back (Urine S.?)

Sep 30/95. No change in any way. Talks freely, when spoken to. Makes no special Complaints.

Oct 1/95. Wt 173 lbs. Pulse 96. Oct 3/95. Still somewhat feeble: complains, of late, of pain in back more frequently; legs & feet also swell up. Does can scarcely get about. Otherwise, no change to note.

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Personal and Medical History of Cornelius Watne

EBERT, FIGLAN & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Henry Nipson, deputy-Sheriff, with the following history. There is no history of consanguinity. but possibly some heredity, as he has a brother an idiot. This is the first attack; occurring a few days ago; began acting very strangly; talked a good deal to himself, will not speak to any one else nor eat nor drink. Disease seems increasing. Derangement is now shown principally in the great change in manner & habits, will neither eat, drink nor talk; will not sleep; walks around the house, making peculiar & violent gestures. Is disposed to injure others. Is neither suicidal, nor filthy nor destructive. Is not, nor are his parents, addicted to intemperance. He has had no severe disease or head-injury. Has not been restrained or confined. Cause of disease is not known. Patient has refused to take medicines prescribed for him. On personal Examination, the patient sits perfectly quiet; no information can be got from him; is very dull at present. did nothing but stare in a vacant manner. Appearance & manner like one demented. It is reported that he attempted to get a knife from a woman, by force; impression given that he was going to injure some one with it.

Augs6 Aug 26/93. Patient is in apparently good physical condition. On admission; was put on B3. Examined (by Dr. Eby); there are found a couple of bruises on right arm; tattoo mark on right hand; scar on right hand. also has Kyphosis; scar on forehead, as if from a burn. Pulse 72. T(a) 98.6. Appetite good; bowels seem regular; no Cough observed. Is quiet & well-behaved. Does not talk to any one but answers questions freely & willingly. Does not seem to know where he is or what sort of a place this is. Says he lives at Rushford, Minn. Aug 27/93. Slept quite well, 8 hours, last night. Appetite is good. Bowels moved. Is very quiet. Occupies his time, chiefly, in reading. Can't talk English. Does not yet seem to know

" 27 why he was sent here. Aug 28/93. AM. Pulse 74. T(a) 99. - Continues quiet & well-behaved. -

" 28 Aug 29/93. Am. Pulse 70. T(a) 98.4. Was examined in office, yesterday. Conversation showed him to be somewhat dulled and as if he were never very strong mentally. Denied delusions & the charges

" 29 made against him in "Commitment Papers". Aug 30/93. Got up once, last night & put on his clothes.

" 30 AM. Pulse 70. T(a) 99. PM. Pulse 66. T(a) 99.4. Still quiet & well-behaved; spends most of his time at reading. Says he was the victim of a nervous disease & for a couple of days, did not know

" 31 what he was doing. Aug 31/93. Am. Pulse 66. T(a) 99. Appetite still good. Bowels fairly normal.

Sep 1 Sep 1/93. AM. Pulse 74. T(a) 98.8. Sep 2/93. Am. Pulse 74. T(a) 99. Hardly ever speaks. Read a

" 3 good deal. Is very quiet. PM. Pulse 76. T(a) 98.8. Weight, today, 151 pounds. Sep 3/93. Pulse 68

" 4 T(a) 98.8. Sep 4/93. Am. Pulse 76. T(a) 99. Sep 5/93. Am. Pulse 96. T(a) 99.2. —

" 5 Sept 6/93. Am. Pulse 80. T(a) 99. Sep 7/93. Am. Pulse 80. T(a) 99.2. Sep 8/93. Am. Pulse 78.

" 8 T(a) 99. Sep 9/93. Since admission, rest and sleep at night have been apparently good. Has

" 9 been quiet. By day, has also been quiet & well-behaved. Clean & tidy & of good personal habits. His appetite has been uniformly good. Bowels, constipated the first few days, have now become regular. Has little to say, probably because he cannot speak English. Spends his time, chiefly, in reading. Goes

" 27 out walking with the rest. No delusions have yet been noted. Sep 27/93. Appetite continues good; bowels regular. Well-behaved. Rather quiet. Cannot speak English; but converses freely in his native language. Talk is rational & apparently is all right. Does no work. Recently, when sleeping in his chair, fell backward &,

" 30 receiving a slight scalp-wound. Patient seems somewhat defective, but has recovered quite perfectly from the acute attack. Sept 30/93. Keeps about the same, from day to day.

Oct 2 Oct 2/93. Weight 171½ pds. (Is still gaining in flesh). Pulse 76.

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DETAILED HISTORY OF SICKNESS OF MR Frederick Anderson
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Dec. 24	7	5	96	88					Patient doing well. Nig Rt. Slept 11 hours rest less 3 hours.
" 25	7	5	94	70					Nig Rt. Slept 6 hours rest less 3 hours.
" 26	7	5	76	84					Appetite good bowels regular. Nig Rt Slept 7 hours rest less 2 hours.
" 27	7	5	72	72					Nig Rt. Slept 6 hours rest less 2 hours
" 28	7	5	84	72					Nig Rt. Slept 4 hours rest less 3 hours.
" 29	7	5	76	72					Appetite good bowels regular. Dressed for regular weight. Night. Slept 7 hours rest less 2 hours.
" 30	7	5	74	80					Nig Rt. Slept 7 hours rest less 3 hours.
" 31	7	5	74	72					Night. Slept 7 hours rest less 2 hours.

Dec 25 Dec 25/95. Wt 165 pds. Pulse 90. Dec 31/95. Patient's condition is still unchanged.
Jan 1/96 Jan 1/96. Wt 166 " " 70. Jan 31/96. Condition about same. Gums tooth & mouth.
Feb 1/96 Feb 1/96. Wt 170 " " 96. Feb 28/96. Complains of pains in his legs & back. (Rheumatic)
" 30 Feb 30/96. No change in any way. Talks freely when spoken to. Makes no special complaints.
Mch 31/96 Mch 1/96. Wt 173 lbs. P 95. Mch 31/96. Still somewhat feeble: complains, of late, of pain in back more

frequently: legs & feet also swell up, so he can scarcely get about. Otherwise, no change to note. to page 284

Personal and Medical History of Cornelius Watne

EBBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA.

1893

He brought here by Henry Nipson, deputy-Sheriff, with the following history. There is no history of consanguinity, but possibly some heredity, as he has a brother an idiot. This is the first attack; occurring a few days ago; began acting very strangely; talked a good deal to himself; will not speak to any one else nor eat nor drink. Disease seems increasing. Derangement is now shown principally in the great change in manner & habits, will neither eat, drink nor talk; will not sleep; walks around the house, making peculiar & violent gestures. Is disposed to injure others. Is neither suicidal, nor filthy nor destructive. Is not, nor are his parents, addicted to intemperance. He has had no severe disease or head-injury. Has not been restrained or confined. Cause of disease is not known. Patient has refused to take medicines prescribed for him. On first personal Examination, the patient is perfectly quiet; no information can be got from him; is very dull at present. did nothing but stare in a vacant manner. Appearance & manner like one demented. It is reported that he attempted to get a knife from a woman, by force; impression given that he was going to injure Bruce as well as it. Aug 26/93. Patient is in apparently good physical condition. On admission; was put on B3. Examined (by Dr. Eby); there are found a couple of bruises on right arm; tattoo mark on right hand; scar on left hand. also has Kyphosis; scar on forehead, as if from a burn. Pulse 72. T(e) 98.6. Appetite good; bowels seem regular; no cough observed. Is quiet & well-behaved. Does not talk to any one but answers questions freely & willingly. Does not seem to know where he is or what sort of a place this is. Says he lives at Rushford, Minn. Aug 27/93. Slept quite well, 8 hours, last night. Appetite is good. Bowels moved. Is very quiet. Occupies his time, chiefly, in reading. Can't talk English. Does not yet seem to know why he was sent here. Aug 28/93. A.M. Pulse 74. T(e) 99. - Continues quiet & well-behaved. - Aug 29/93. Am. Pulse 70. T(e) 98.4. Was examined in office, yesterday. Conversation showed him to be somewhat dulled and as if he would never very strong mentally. Denied delusions & the charges made against him in "Commitment papers". Aug 30/93. Set up once, last night & put on his clothes. A.M. Pulse 70. T(e) 99. P.M. Pulse 66. T(e) 99.4. Still quiet & well-behaved; spends most of his time at reading. Says he was the victim of a nervous disease & for a couple of days, did not know what he was doing. Aug 31/93. Am. Pulse 66. T(e) 99. Appetite still good. Bowels fairly normal. Sep 1/93. A.M. Pulse 74. T(e) 98.8. Sep 2/93. Am. Pulse 74. T(e) 99. Hardly ever speaks. Reads a good deal. Is very quiet. P.M. Pulse 76. T(e) 98.8. Weight, today, 151 pounds. Sep 3/93. Pulse 68 T(e) 98.8. Sep 4/93. Am. Pulse 76. T(e) 99. Sep 5/93. Am. Pulse 96. T(e) 99.2. — Sept 6/93. Am. Pulse 80. T(e) 99. Sep 7/93. Am. Pulse 80. T(e) 99.2. Sep 8/93. Am. Pulse 78. T(e) 99. Sep 9/93. Since admission, rest and sleep at night have been apparently good. Has been quiet. By day, has also been quiet & well-behaved. Clean, tidy & of good personal habits. His appetite has been uniformly good. Bowels, constipated the first few days, have now become regular. Has little to say, probably because he cannot speak English. Spends his time, chiefly, in reading. Goes out walking with the rest. No delusions have yet been noted. Sep 27/93. Appetite continues good; bowels regular. Well-behaved. Rather quiet. Cannot speak English; but converses freely in his native language. Talk is rational & apparently is all right. Does no work. Recently, when sleeping in his chair, fell backwards, receiving a slight scalp-wound. Patient seems somewhat defective, but has recovered quite perfectly from the acute attack. Sept 30/93. Keeps about the same, from day to day.

Oct 2 Oct 2/93. Weight 141½ lbs. (Is still gaining in flesh). Pulse 76.

1893

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Nov 1/30

Dec 11/17

" 31

1894

Jany 7/31

Feb 28

Mar 30

Aug 26

" 27

" 28

" 29

" 30

Sep 1/31

" 3

" 4/5

" 6/7

" 9/10

" 27

Oct 2

DETAILED HISTORY OF SICKNESS OF MR Frederick Andresen

DIAGNOSIS.

DATE	HOUR	PULSE: AM	PULSE: PM	RESP: AM	RESP: PM	TEMP: AM	TEMP: PM	
Dec.	24							8 P.M. Received on Stretcher & Escort. Is very restless and pains in arms & legs. Patient put to bed. Appears to be very weak. Poultices to chest & abdomen. Right Shift 6 hours restless 2 hours.
	25	76	84	24	30	99.4	99.6	8 A.M. Poultices off. Seems to be very weak. Pulse very feeble. Temperature 98.4 P.M. Pulse 76 Temperature 99.6 P.M. Patient passes urine without much trouble. Appetite good. Night Shift 7 hours restless 2 hours.
	26	76	72	30	24	99.2	99.4	Patient does not sleep easily does not appear to suffer much pain. Head & chest from injuries. Poultices applied 5 A.M. 11 A.M. 2 P.M. and 8 P.M. Bowels regular. Night Shift 7 hours restless 2 hours.
	27	76	80	24	22	99.2	99.8	10 A.M. Poultices discontinued. Patient getting better. Appears to sleep fast. Night Shift 7 hours restless 2 hours.
	28	78						Appetite good bowels regular. Night Shift 7 hours restless 2 hours.
	29	78	84	22	20	99	99.8	Night Shift 6 hours restless 2 hours.
	30	78	78	22	22	99	99	Patient appears better. Night Shift 7 hours restless 2 hours.
	31	76	72	24	22	99	99.4	Night Shift 6 hours restless 2 hours.
Jan.	1	82	84	24	24	99	99.4	Appetite good bowels fairly regular. Does not like to appear sick. Night Shift 6 hours restless 2 hours.
	2	84	80	22		99.2		Night Shift 6 hours restless 2 hours.

Aug 1/95: Wt 166 " " 70. Aug 31/95: Condition about same from month to month.

Sept 1/95: Wt 170 " " 96. Sep 29/95. Complains of pains in his legs & back. (Urine &c.)

Sep 30/95. No change in any way. Talks freely when spoken to. Makes no special complaints.

Oct 1/95. Wt 173 lbs. Pulse 96. Oct 31/95. Still somewhat feeble: complains, of late, of pain in back more

frequently: legs affect also. Swelled up. He can scarcely step across. Otherwise, no change to note. to page 34

1893

[illegible] bowels regular. Well-behaved. Rather quiet. Cannot speak English; understands conversation freely in his native language. Talk is rational & apparently is all right. Does no work. Recently, when sleeping in his chair, fell backward &, receiving a slight scalp-wound. Patient seems somewhat defective, but has recovered quite perfectly from the
" 30 acute attack. Sept 30/93. Keeps about the same, from day to day.
Oct 2 Oct 2/93. Weight 141½ lbs (Is still gaining in flesh). Pulse 76.

1893

Oct 31 Oct 31/93. Appetite continues good & bowels normal. Is quiet & well-behaved. Talks rationally. Not much the matter with him now. Works some onward. Habits clean.

Nov 1/30 Nov 1/93. Wt 170 pds. Pulse 78. Nov 30/93. Apparently rests & sleeps well, at night. Appetite good. Bowels regular. Is well-behaved. Nothing, out of the way, is noticeable in either his conversation or actions. Habits are clean. Works some in the ward.

Dec 14/17 Dec 1/93. Wt 183½ lbs. Pulse 70. Dec 12/93. Was, today, transferred to the Annex. —

" 31 Dec 31/93. Is quite troublesome, at times: annoys the other patients by pulling their clothing, and stealing papers especially from the older ones. Is in good physical condition.

1894 Jany 7/31 Jany 2/94. Keeps about the same. Jan 31/94. No change; seems quite contented here.

Feb 28 Febry 28/94. There is no change to note. Quiet and harmless. Works in dining-room - health good. —

March 20 March 20/94. Was permitted, today, to go home.

Crossed off the records; was illegally committed —

From 216. Frederick Andresen

Dec 22/23 is confined to bed. Appetite good; bowels regular; injured parts appear much better. Dec 23/94. Slept but 3 hours,
" 27 was restless 5 hours, last night. Patient is doing nicely. Dec 27/94. Restless from 2 to 3 hours, but sleeps 6 to
" 28 7 hours, each night. Appetite good; bowels regular. Dec 28/94. Transferred, today, to New Infirmary (Ward East.
" 29/31 Dec 29/94. Restless 2 hours, sleeping but 4 hours, last night. Injured parts are doing well. Dec 31/94. Is doing well.
1895 Jan 2/8 Jany 2/95. Was up on ward ½ an hour, today. Jan 8/95. Sleeps from 6 to 8 hours, every night. Testicles appear
" 9 quite well. Still complains of pains in back & sides; ointment applied to painful parts. Jany 9/95. 8 AM. Is
" 29 dressed & up on hall. Is quiet & rather feeble. Jan 29/95. Has remained up. Seems stronger. Sleeps a great
" 30 part of the day on a chair or lounge. Appetite good; bowels regular. Jan 30/95. Transferred to A^x East.
" 31 Jan 31/95. Behavior quiet & harmless; makes no complaints; talks freely; feebleminded; patient is physically weak; cleanly in habits. Is senile & somewhat ataxic. - Feby 1/95. Wt 157 pds. Pulse 81.
Feby - 28 Feby 28/95: Is quiet; Complains, at times, of rheumatism in lower limbs. Talk rationally but feebleminded.
March 1/31 March 1/95. Wt 156 pds. Pulse 77. March 31/95: No change noticeable, mentally or physically. -
Apl 1/30 April 1/95. Wt 169 " " 70. Apl 29/95: Patient, this forenoon, Complains of pain in region of the appendix & has a slight attack of diarrhoea. Was given medicine. Patient is in bed.
" 30/31 Apl 28/95. Has recovered from the attack & is out of bed, this morning. Apl 30/95: Is about as usual.
May 1/31 May 1/95. Wt 157 pds. P 72. May 31/95. Quiet & well-behaved. Complains, occasionally, of pains in breast & legs. Talk readily & rationally: childish in manner & weak-minded. Is in fairly good
June 1 health, considering his age. His gait is uncertain. Cleanly in habits. June 1/95. Wt 156 pds. P 84
" 30 June 30/95: No change to note, either mentally or physically, for the past month.
July 1/31 July 1/95. Wt 156 pds. Pulse 90. July 31/95. Patient's condition is still unchanged.
Aug 1/31 Aug 1/95. Wt 166 " " 70. Aug 31/95. Condition about same, from month to month.
Sept 1/30 Sept 1/95. Wt 170 " " 96. Sept 29/95. Complains of pains in his legs & back (Uremia?)
" 30 Sep 30/95. No change in any way. Talks freely, when spoken to. Makes no special Complaints.
Oct 1/31 Oct 1/95. Wt 173 lbs. P 95 Oct 31/95. Still somewhat feeble: Complains, of late, of pain in back more
repeatedly; legs & feet also swell up, so he can scarcely get his shoes on. Otherwise, no change to note.

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Personal and Medical History of P. J. Carley

EBERT, FIDLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 34571.

Residence, Minneapolis — Minn. (but house is in Chicago County)

Date Admission, 29th August 1893.

Admitted by, D. Kilbourne Hour, 7 PM.

How Sent, W. A. Kerr. Ct Commr, Hennepin County

Sex, Male

Age, 48

Civil Condition, single

Children, None

Age Youngest Child,

Occupation, Laborer

Degree Education, not up to Common-School grade.

Profession Religion, None

Habits, unknown

Nativity, Sweden (that of father also).

Physicians Committing, C. K. Bartlett & W. A. Jones.

Correspondents, O. W. Carley (brother) Lindstrom, Chisago Co. Minn

No. for Year, 24.

Insane Relatives, unknown

Cause Exciting, unknown

Cause Predisposing, previous attack

Form, Chronic Mania

Accompanying Bodily Disorder, unknown.

Suicidal or Not, not.

Date of this Attack, 19 years ago (Continuous)?

Duration, Continuous.

No. of Attack, 2nd probably (as 19 years ago).

No. of Admissions, 2nd

Age First Attack, 29 years

Time of Leaving, Sept- 18 93

Time in Hospital, 19 dys.

Result, Improved.

EXAMINATION ON ADMISSION.

Exd by D. Eby. Aug 31/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, fairly quick

MEMORY:

Past Events, quite good

Recent Events, seems good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, fairly good

Own Mental State, does not seem to realize his condition

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Is simple & foolish-acting; grinning and smiling during the whole of examination.—

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Quite

Depressed,

DELUSIONS:

Systematized or Not, about the girls & about Marrying

Special Subjects,

Transitory or Not,

HALLUCINATIONS: —

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Voluble, when subject of marriage is broached. —

Personal and Medical History of P. J. Carley

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Fairly good.

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Slight Coatings, None Promptness Movement, Prompt

PUPILS, Equality, Equal Size, Normal

Response Light, Yes. Accommodation,

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Finger to nose, Eyes shut, Marked irregularity.

Legs, Standing, Eyes shut, very little Swaying. —

TREMORS, Hands, None Tongue, Slight

Facial Muscles, Slight General, None

REFLEXES, Patellar, Equal; about 6 —

Other Reflexes,

ARTICULATION, Hesitating, Foreign accent Slurred,

FACIAL EXPRESSION, Somewhat foolish.

SENSIBILITY,

HEART, Sounds good

LUNGS, Sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Previous attack ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother living — 72 — claims in good health

Father or Pat. Relations, Father living — 71 — " fair health.

Brothers or Sisters, 2 Brothers living — in good health.

Personal and Medical History of P. J. Carley

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by deputy-Sheriff Adolph Peterson, with the following history. His attack seems continuous; occurred 19 years ago; committed petty thefts; forced himself upon women. Disease seems to be increasing; some variation, but he has never recovered. Derangement is now shown on the subject of marriage; wants to marry several women; is not disposed to injure others, nor suicidal. As to heredity, unknown. Habits unknown, and as to being subject to any disease or head-injury, unknown. Has been confined at St. Peter & Rochester hospitals, for months at a time. Cause of the disease is unknown. On personal examination, is found to have a small head; is persistent in his ideas of matrimony &c; talked good naturedly about his marriage &c; manner & appearance those of an insane person: nothing in particular can be ascertained from him. (suggested to write to his brother for particulars) -

Aug 29 Aug 29/93. On admission, was put on T3. Note. This is his 2nd admission. Was here before from June 1/92 to Nov 14/92, when he eloped. During previous stay, was quiet and well-behaved; worked some outside, also in kitchen; showed a somewhat simple & foolish manner always. (Vol 19, p. 233 No 3032).

" 30 Aug 30/93. Slept well, 7 hours, last night & was quiet. Atm. Pulse 66. T(a) 99.4. Appetite good; bowels seem regular; no cough noticed. Is restless today; talks a good deal in a foolish, smirking way. No injuries or complaints to note. Pm. Pulse 82. T(a) 100.8. Aug 31/93 Slept 6 hours, last night. Atm Pulse T(a) 100. Appetite good; bowels normal. Is nervous, restless & somewhat excited today. Was examined in office showed delusions. Did not seem to realize his condition. Simple, foolish acting; grinning & smiling during the whole examination. (There is not much, if any, change in his condition, since he was here before). -

Sep 1 Sep 1/93. Rested & slept well, also last night. Atm. Pulse 115. T(a) 100.2 - Appetite continues good. -

" 2 Sep 2/93. Slept 6 hours last night & was quiet. Atm " 82 " 100.2. Always wanting to go out to work. Continues very nervous & restless. Found on his person, today, a wire key. Says "he found it in one of the rooms" (??). Weight today 151 pds. Pulse 94. T(a) 100.4. Sep 3/93. Atm. Pulse 72. T(a) 100.2. -

" 4/78 Sep 4/93. Atm. Pulse 88. T(a) 100.4. Sep 5/93. Atm. Pulse 86 T(a) 100.4 Sep 6/93. Atm. Pulse 72. T(a) 100.4

" 78 Sep 7/93. Atm " 74 " 100.2. Sep 8/93. Atm " 70 " 100. Has continued about as above described. Very anxious to be allowed to go outside to work. Was today transferred to Annex.

" 12 Sep 12/93. He day after being moved, was permitted to go out to work, and he runs works, daily, on the farm. Has continued to eat & sleep well at night. Appetite has been uniformly good, and bowels regular. Still very foolish in actions & manner. Is quite restless when in the hall.

" 18 Sep 18/93. Has continued about the same, mentally & physically, as above described. Still holds to his delusions & is quite voluble when they are touched upon. Has continued to work outside daily, working well & willingly.

Patient Eloped today while out on the farm. Diligent search was made for him, but without avail.

— Dis'd Larged —

Personal and Medical History of Gottfried Bergmann

From 108

1894 Cont'd

May 30 Examination made; patient ordered to be put to bed & isolated from the other patients, as he was suffering from

" 31 Erysipelas. May 31/94. Appetite good; bowels free; still confined to bed with erysipelas. Talks incoherently - Is cleanly in his habits. He is still known, not gaining any, in a general way. —

June 1/94 June 1/94. Wt 128 pds. Pulse 69. June 12/94. Patient, having recovered from this attack of erysipelas, was

" 30 allowed to get up today. Was dressed & put in hall. June 30/94. No special change to note in patient's mental or physical condition. He still holds delusions - (Was dirty only one day, while isolated) —

July 1/94 July 1/94. Wt 135 pds (some gain during month). Pulse 76. July 20/94. Visited today by a friend (a

" 31 Mr. Schleith of Mantorville) on June 20th. July 31/94. No change to note in patient's condition at date.

Aug 1/94 Aug 1/94. Wt 135 pds. Pulse 72. Aug 31/94. Appetite only fair; has to be watched, that he takes his food.

Sep 1 Bowels regular. Is in fairly good physical health. Is quiet & well-behaved. Makes no complaints. Talks

" 10 incoherently. Habits are fairly cleanly - (Patient is a masturbator). Sep 1/94. Wt 144 pds (has gained

" 30 some in flesh, the past few months). Pulse 90. Sep 10/94. No change specially noticed. Today moved to B3.

Sep 30/94. During the past few nights, he has been quite restless & slept poorly. No change noted in either his physical or mental condition. (Was dirty one day during the month) - Does not improve mentally.

Oct 1/94 Oct 1/94. Wt 150½ pds (a further gain in flesh). Pulse 78. Oct 31/94. Slept poorly last few nights. Otherwise, no change.

Nov 1/94 Nov 1/94. Wt 158 pds. (still gains in weight); Pulse 90. Nov 1/94. Occasionally noisy & restless, at night & sleeping poorly.

Dec 1/94 Dec 1/94. Wt 161 " Pulse 84. Dec 18/94. Visited by friends. Jan 2/95. Wt 168 pds. (quite a gain in flesh) -

1895 Jan 3/95 Pulse 86 - Was struck, today, by patient, J. K. Rhodes, cutting his lip some. Jan 31/95. Quietly-behaved: hardly speaking to anyone: very restless; never sitting down, unless compelled to. Habits clean: is rather slouchy in dress & appearance. Does no work. Feb 1/95. Wt 143 pds. Pulse 68. Feb 28/95. No change noted. Still dirty.

Feb 1/95 March 1/95. Wt 182½ pds. (has gained 45½ pds. since admission). Pulse 88. March 1/95. Transferred to Annex

" 31 March 31/95. Is quiet: does no work: talks to himself a good deal. Somewhat untidy in appearance of late. Otherwise about the same, for several months past. April 30/95. No special change noticeable -

April 30 During this Quarter, patient's condition has been about as previously reported. He has been quiet,

May but mischievous; talks some, but incoherently. Does no work: habits rather filthy: dress untidy.

June (During latter part of June, worked outside for several days, but no ward at present). Was

to visited by relatives, lately. Health is apparently good. Aug 1 to Sept 1 & Oct 1 to Oct 31/95: During this

July 31 period, patient has continued quiet: dull & stupid: incoherent in speech: habits rather filthy.

Aug 1 Dress untidy. Health is good: he is constant & put that he chafes much between the legs. —

to Nov 1/95. Wt 203 pds. Pulse 92. (has been steadily gaining in flesh). Nov Sent to Jany 31/96. During

Sept 30 this period, no change noticeable. Quiet: talks irrationally: no work. Habits rather filthy. Health seems good.

Dec 1/95 Feb 1/96. Wt 214 pds. Pulse 88. Feb, March & to April 30/96. No change noticeable during this period.

to Has been quiet: inoffensive: does no work: talks & gesticulates some. Habits rather filthy -

Jany 31/96 Dress untidy: health is good. (patient has grown very fleshy: has gained 77 pds. since admission)

Feb 1/96 Summary Nurses Notes by Dr. Phelps - Patient quiet & well behaved in a dull, stupid way.

to Talks to himself some: Habits filthy & untidy. During '96 patient grew grossly fleshy

Aug 1/97 has exophthalmus: seemed to suffer from a mental confusion or dazed condition

moreover his eyesight has seemed to fail at the same time. Wt. about 231 lbs.

May 31/97 Wt 239. Oct 31 Very quiet in behavior: Dull & demented: Talk cannot be understood. Very inactive & fleshy. Nov. 1 243. Has

to been growing grossly fleshy, also quite blind. Is quite thoroughly stupid. July 21, Trans to A. June 22 Visited by friends

June 30 1897 Wt. 256. Grunts instead of talking. Seems to know almost nothing. Walks with cane: Seems totally blind. (Cont'd on p. 40)

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3456.
Residence, Spring Valley, Minn.
Date Admission, 30th August 1893.
Admitted by, D. Phelps Hour, 2 P.M.
How Sent, E. V. Farrington, Jof P. Fillmore County
Sex, Male.
Age, 37
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Painter
Degree Education, Common School
Profession Religion, not a church member
Habits, Intemperate
Nativity, Berlin, Wis (Father, New York; Mother, Canada)
Physicians Committing, J. R. Johnson & F. H. Hamblet
Correspondents, John DeWitt (bro)
Family Physician Dr. S. P. Meredith. Spring Valley Minn

No. for Year, 26.
Insane Relatives, An aunt, father's sister
Cause Exciting, Intemperance
Cause Predisposing, Heredity, probably.
Form, Alcoholic Dementia
Accompanying Bodily Disorder, Sunstroke, 8 years ago
Suicidal or Not, not
Date of this Attack, 7 years ago
Duration, 7 years —
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 30.
Time of Leaving, 31st May 1901
Time in Hospital, 7 yrs 9 mos 1 Dy.
Result, Died: abscess of liver & peritonitis from perforation of bowel —

EXAMINATION ON ADMISSION.

Ex by Dr. Eby Feb 4/95 =

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events,
Recent Events, somewhat impaired
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Dulled
Correct or Illusive,

REASONING POWER:
Ordinary Subjects, fairly good
Own Mental State, Can't reason this out
Special Subjects,

EMOTIONAL STATE:
Normal, Calm, about normal
Indifferent,
Exalted, (some tendency to be) ?
Depressed,

DELUSIONS:
Systematized ~~or Not.~~ that something will happen him
Special Subjects, if he leaves the house; fears danger —
Transitory or Not,

HALLUCINATIONS: = of hearing"

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, fairly free

GENERAL DESCRIPTIVE REMARKS:
Says "Coming down-stairs to office today, made his head where some kind of trouble". Admits having drunk very hard 3 years ago; could not get around very well; denies having drunk anything for past 7½ years; says "reason he can't go away from home, gets dizzy; fell once while away from home; says, he would have this "dizzy spell" if should he go away any distance from home; has fear he cannot get back, then this nervousness comes over him & he has to be very careful. Has had this "trouble" for nearly 8 years. On one occasion, was told, that he laid in bed for nearly 2 years. Could not bear to have any one come near him. Cannot now do any work or lift anything: it affects his head & does.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 171 lbs NUTRITION, Seems quite fair
WOUNDS OR ABNORMALITIES, None noted
TONGUE, Tremors, very slight Coatings, some in back part Promptness Movement, prompt
PUPILS, Equality, equal Size, normal
Response Light, yes Accommodation, yes
SIGHT, Good
HEARING, Seems good
COORDINATION, Arms, finger to nose, eyes shut, fairly good; slight inaccuracy.
Legs, Standing, Eyes shut, very little swaying.
TREMORS, Hands, slight

Case No. 3456. Porter A. Dewitt. Vol. 25.

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



Taken 1898.

SENSIBILITY, Normal
HEART, Found seem good
LUNGS, Sounds are good —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, Records kept RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual.
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother died about 3 weeks ago; supposed chronic fever
Father or Pat. Relations, Father died of paint poisoning - out of head about 2 weeks, before death.
Brothers or Sisters, 2 brothers; both living, neither very healthy. Father's sister was out of head "for
two or three —

Whole No. 3456.
Residence, Spring Valley, Minn.
Date Admission, 30th August 1893.
Admitted by, Dr Phelps Hour, 2 P.M.
How Sent, E. V. Farrington, Jof P, Fillmore County
Sex, Male.
Age, 37
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Painter
Degree Education, Common School
Profession Religion, not a church member
Habits, Intemperate
Nativity, Berlin, Wis (Father Newyork; Mo
Physicians Committing, J. R. Johnson & C
Correspondents, John DeWitt (bro)
Family Physician Dr. S. P. Meredith Home

No. for Year, 26.
Insane Relatives, An aunt, father's sister
Cause Exciting, Intemperance
Cause Predisposing, heredity, probably
Form, Alcoholic Dementia
Accompanying Bodily Disorder, Sunstroke, 8 years ago
Suicidal or Not, not
Date of this Attack, 7 years ago
Duration, 7 years —
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 30.

EXAMINATION ON ADMISSION.

Ex by Dr Eby Feb 9/93 =

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Recent Events, Special Subjects, } somewhat impaired

PERCEPTIVITY:
Alert or Dull, Dulled
Correct or Illusive,

REASONING POWER:
Ordinary Subjects, fairly good
Own Mental State, Can't reason this out
Special Subjects,

EMOTIONAL STATE:
Normal, Calm, about normal
Indifferent,
Exalted, (some tendency to)?
Depressed,

DELUSIONS:
Systematized ~~or Not.~~ that something will happen him if he leaves the house; fears danger
Special Subjects,
Transitory or Not,

HALLUCINATIONS: "of hearing"

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, fairly free

GENERAL DESCRIPTIVE REMARKS:

Says "Coming down-stairs to office today, made his head white some kind to tremble". Admits having drunk very hard 3 years ago; could not get around very well; denies having drunk anything for past 7½ years; says reason he can't go away from home, gets dizzy; fell once while away from home; says he would have this "dizzy spell" should he go away any distance from home; has fear he cannot get back when this nervousness comes over him & he has to be very careful. Has had this "trouble" for nearly 8 years. On one occasion was afraid that he laid in bed for nearly 2 years. Could not bear to have any one come near him. Cannot now do any work or lift anything = it affects his head & nerves.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 171 pds NUTRITION, Seems quite fair
WOUNDS OR ABNORMALITIES, None noted
TONGUE, Tremors, very slight Coatings, some in back part Promptness Movement, prompt
PUPILS, Equality, equal Size, normal
Response Light, yes Accommodation, yes
SIGHT, Good
HEARING, Seems good
COORDINATION, Arms, finger to nose, eyes shut, fairly good; slight inaccuracy.
Legs, Standing, eyes shut, very little swaying.
TREMORS, Hands, slight Tongue, very slight
Facial Muscles, none General, None
REFLEXES, Patellar, equal, about 5, Dr. D's Scale —
Other Reflexes,
ARTICULATION, ~~Hesitating,~~ fair ~~Slurred,~~
FACIAL EXPRESSION, Normal
SENSIBILITY, Normal
HEART, Sounds seem good
LUNGS, Sounds are good —
EXAM. URINE.



Taken 1898.

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

Records kept

HISTORICAL.

LENGTH OF INVASION, long ONSET GRADUAL OR SUDDEN, Gradual.
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother died about 3 weeks ago; supposed bilious fever
Father or Pat. Relations, Father died of paint-poisoning - at of head about 2 weeks, before death.
Brothers or Sisters, 2 brothers; both living, neither very healthy. Father's sister insane of head for 20 years —

HERBERT, FIGLER & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by John De Witt, with the following history of case. No history of consanguinity, but some of heredity, an aunt, father's sister, being insane. This is 1st attack; first symptoms appearing 7 years ago; disease seems stationary, but there are rational intervals. — Derangement now manifested by his refusal to see any persons & the idea that he cannot go away from the house. Is neither disposed to injure others, nor suicidal; will not give up his old clothes. Had a sunstroke, 8 years ago. He has not been restrained or confined, nor in hospital before. The supposed cause of disease is intemperance; he has had no medical treatment. On personal examination, he seems very nervous; also very much embarrassed & still clings to the idea that he cannot leave the house. He said to both the examiners that, if he could get away a few rods from the house, a feeling of danger would come over him & he would have to hurry back & get away alone. He kept nervously twitching in his chair, and trembling with his hands, & constantly clearing his throat, with long sighing breaths. Appearance slightly anaemic but otherwise healthy.

Aug 30 — Aug 30/93. The patient, on admission, is in fair physical condition. Was put on B' — Pulse 105. R 21. Bodily condition clean. Tm. Has been quiet today, but very nervous. Appetite fair; bowels regular.

" 31 — Aug 31/93. Says "he did not sleep only about an hour, last night". Pulse 99. R 19, this morning. Is slow in dressing, in mornings. Says "he is so nervous in the mornings, that he can hardly control himself". Has been very restless, walking the floor a good deal, today. — Is quite clean, tidy & of good personal habits. Weight 170 pounds.

Sep 1 — Sep 1/93. Ann. Pulse 102. R 21. Complains some of catarrh; Does not care to go out walking; when out, is restless, wanting to return to the ward.

" 2 — Sep 2/93. Says he slept only about ½ hour, last night. Ann. P 100.

" 3 — R 19. Does not seem to be so restless, as at first. Does some reading & plays a few games. Sep 3/93. Slept well, last night. Appears to be a little on the gain; but is, at times, very nervous & shaky: all over".

" 4 — Pulse, this morning 91. R 19. Sep 4/93. Says he did not rest well, last night. Ann. Pulse 116. R 18.

" 5 — T (1) 89 2/5 (?). Says "he has been feeling better today, than he has for some time". Sep 5/93. Ann. Pulse 112

" 6 — R 18 T (1) 98 2/5. Continues about the same; complains of catarrh, in the mornings. Sep 6/93. Complains that he is quite restless, and does not sleep much. Also, of not feeling well. Tm. P 117. R 19. T (1) 99.-

" 7 & 8 — Sep 7/93. Am. Pulse 98 R 18 T (1) 90-2/5? Is unable to walk far; easily made tired. Sep 8/93. Pulse 95. R 18. T (1) 98.5. Has been feeling fairly well. Did not complain of anything during the day.

" 9 — Sep 9/93. Ann. Pulse 88. R 18. T (1) 99 2/5. Does not seem to change much. So yet, at times, quite nervous. Was examined in office, today. Told the history of his "trouble"; of his having "dizzy spells"; also manifested delusions.

" 10 — Sep 10/93. Am. Pulse 106. R 17. T (1) 98. Complains, today, of sore eyes.

" 11 — Appears to be more contented than at first. Sep 11/93. Am. Pulse 110 R 18 T (1) 99.2/5. Does not seem to improve very fast. Is easily fatigued & complains of his legs being weak.

" 12 — Sep 12/93. Has had no "distinct spells" of any kind so far, since coming here. Talks quite sensibly, but is very nervous and easily excited. Continues quiet & well behaved. Clean, tidy, & of good personal habits. Plays a little on the violin & takes part in games, occasionally. Does some reading & goes out walking more willingly now. And, on the whole, seems more contented here.

" 20 — Sep 20/93. Patient appears to be a little better than at first coming. Is not so nervous and does not seem to tire so easily. Does no work. Is pleasant to talk with. Plays some on the violin but does not take part in any games.

" 30 — Sep 30/93. Continues, seemingly, to make improvement. Less nervous & restless. Complains a good deal of catarrh. Is on medicine. Appetite good. Complains of bowels being somewhat irregular. Is a quiet & well-behaved patient; of good personal habits. In quite fair physical health.

1893

Sep 30 — Oct 15/93. Continues about the same. Still holds to his delusions. Health quite good.

Oct 15 — Oct 31/93. Is still quite nervous in his movements. Complains, quite frequently, of catarrh. Says he does not rest well, at night. Has spells of coughing for a while, in the mornings. Appears to worry, at times. Appetite is quite poor. Wants a parole. Describes himself as being afraid to go far from home, always; as trying & then being afraid. —

" 31 — Nov 30/93. Wt 169 pds. Pulse 82. Nov 30/93. Appetite fair; bowels regular. Always quiet & well behaved. Is very nervous, at times; the least little noise seeming to affect him. Plays some on the violin. Is troubled with catarrh & has a bad cough, at times, during the night. Habits clean & neat. —

Nov 1/30 — Dec 31/93. Wt 165½ pds. Pulse 98. Dec 31/93. Still continues nervous; more so in mornings, than at other times; slow in rising. Has a dry cough. Is on medicine. Appetite fair; bowels regular.

Dec 1/93 — Jan 31/94. Wt 164½ pds. Pulse 80. Jan 31/94. Very nervous, as above mentioned. Easily excited. Complains of noise troubling him. Still troubled with catarrh. Does not seem to improve much.

Jan 1/94 — Feb 28/94. Wt 167 pds. Pulse 83. Feb 28/94. No material change from notes of past few months. —

Feb 1/28 — Mar 2/93. Wt 162½ pds. Pulse 73. Patient was committed here under the "Law of 1893" recently declared unconstitutional. He was, today, Taken out and returned under "new Warrant" from Olmsted County. March 30/94. Says "that he does not sleep well; is quite restless". Is very nervous at times, especially in mornings; greatly troubled with catarrh & complains, at times, of headache. Is easily excited, but has no distinct "spells". Is considerably given to fault-finding. Has liberty of the grounds; is not inclined to do any work, whatever. —

Mar 2/30 — April 2/94. Wt 162 pds. Pulse 70. April 30/94. Says "he finds it so difficult to get up in the morning"; nervousness seems to trouble him more then. Otherwise, no change to note. —

April 2/30 — May 3/94. Wt 162½ pds. P 82. May 10/94. Does not seem to change any from month to month. Has parole.

May 3/10 — May 15/94. Today, transfered to 4th, an "open Ward". May 31/94. Continues quietly behaved; is rather nominal; is of a grumbling & faultfinding disposition. Still complains of nervousness and says that "this troubles him so much in mornings that he cannot rise for breakfast". Knits & could be honored more than he is. Is indolent; never helps any one with the ward-work. Habits are cleanly.

May 15/30 — June 4/94. Wt 161 pds. Pulse 84. June 15/94. Complains & grumbling more than usual of late: "Does not like this 4th ward; it is too damp for me" — Was moved back to B' East, today. June 30/94. No change to note. —

June 4/30 — July 31/94. Wt 158 pds. Pulse 76. July 31/94. Is about as usual. Always complaining of nervousness, & something else. Has parole & is outside on the grounds a good deal of the day. Writes a few letters; in these shows his grumbling & faultfinding ways. Still very lazy & does no work at all. —

July 1/31 — Aug 31/94. Wt 155 pds. P 84. Aug 31/94. Complains of resting & sleeping poorly. Is a quiet patient; a good deal troubled with catarrh (he claims). Is very easily agitated & confused. Does not change any.

Aug 31/30 — Sep 30/94. Wt 153½ pds. P 90. Sept 30/94. Quiet. Much inclined to lie in bed in mornings. Says "he can't get up on account of nervousness". Much given to complaining & faultfinding. Letters written by him are also in this strain. Has liberty of the grounds, but still seems dissatisfied.

Oct 1/30 — Oct 31/94. Wt 149 pds. P 81. Oct 29/94. Remained on ward, all day; says "he was unable to rise before his nervousness went away". Oct 31/94. No change. — Is a great crank. Continually finding fault & complaining. Has been kept in the ward, the past few days. Writes grumbling letters.

(Carried to 164)

Personal and Medical History of Andrew Olson #3

HERBERT, FICKLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3459.
Residence, Minneapolis. Minn.
Date Admission, 1st September 1893.
Admitted by, D. Phelps Hour, 7 PM.
How Sent, John H. Steele, Jof P. Hennepin County
Sex, Male
Age, 31
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Saloon-Keeper.
Degree Education, not educated
Profession Religion, not known
Habits, Not stated – probably intemperate.
Nativity, Sweden; (that of parents also). –
Physicians Committing, C.A. McCollum + F.E. Towers
Correspondents, unknown

No. for Year, 29.
Insane Relatives, cannot say if any
Cause Exciting, supposed sunstroke + syphilis
Cause Predisposing, not stated
Form, Syphilitic Dementia
Accompanying Bodily Disorder, Myocardian atrophy (no history of any)
Suicidal or Not, not
Date of this Attack, July 23d 1893.
Duration, about 6 weeks.
No. of Attack, 1st (so far as known). –
No. of Admissions, 1st
Age First Attack, about 31
Time of Leaving, Dec. 12. 93.
Time in Hospital, 3 mos 11 days.
Result, Recovered

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

EXAMINATION ON ADMISSION.

Exd by D. Phelps, Sept 4 1893 – MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, Sluggish + weak
MEMORY:
Past Events,
Recent Events, } much impaired
Special Subjects,
PERCEPTIVITY: Poor
Alert or Dull,
Correct or Illusive,
REASONING POWER:
Ordinary Subjects, } Poor
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Normal to dullness
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not,
Special Subjects, } None brought out.
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Shows feebleness of mind –
Coherent or Incoherent, Answers fairly correct
Voluble or Reticent,

Personal and Medical History of Andrew Olson #3

25/37

G J Luckaye
729 Washington Ave S
Mpls
Minn

Correspondent H3 Andrew Olson

MISSION.—(Continued.)
TICS.
NUTRITION, Rather poor
normalities none –
Promptness Movement, Hesitating
some dilatation
ion,
ts, poor.

TREMORS, Hands, yes Tongue, Yes, Coarse.
Facial Muscles, Some General, Yes; all over
REFLEXES, Patellar, 1 – 2 –
Other Reflexes,
ARTICULATION, Hesitating, Yes Slurred, Yes
FACIAL EXPRESSION, Somewhat impaired.
SENSIBILITY,
HEART, palpitating and irritable.
LUNGS, upper left lung shows some impairment. –
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good, Records Kept	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 Andrew

EBERT, FICKAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3459

Residence, Minneapolis. Minn.

Date Admission, 1st September 1893.

Admitted by, Dr Phelps Hour, 1 PM.

How Sent, John A. Steele, Jail P, Hennepin County.

Sex, Male

Age, 31

Civil Condition, Single

Children,

Age Youngest Child,

Occupation, Saloon-Keeper.

Degree Education, not educated

Profession Religion, not known

Habits, Not stated – probably intemperate.

Nativity, Sweden; (that of parents also). –

Physicians Committing, C.A. McCollum + F.E. Towers

Correspondents, unknown

Cau

Form, N

Accompanying Bodily

Suicidal or Not, No?

Date of this Attack, July 23 –

Duration, about 6 weeks.

No. of Attack, 1st (so far as known). –

No. of Admissions, 1st

Age First Attack, about 31

Time of Leaving, Dec. 12. 93.

Time in Hospital, 3 mos 11 days.

Result, Recovered

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

EXAMINATION ON ADMISSION.

Exd by Dr. Phelps, Sept 4 1893 – MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Sluggish at best

MEMORY:

Past Events,
Recent Events,
Special Subjects, } much impaired

PERCEPTIVITY: Poor

Alert or Dull,

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,
Own Mental State,
Special Subjects, } Poor

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm, Normal to dullness

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,
Special Subjects,
Transitory or Not, } None brought out.

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Shows feebleness of mind –

Coherent or Incoherent, Answers fairly correct

Voluble or Reticent,

Personal and Medical History of Andrew Olson #3

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Rather poor

WOUNDS OR ABNORMALITIES, Wounds, scars none; abnormalities none –

TONGUE, Tremors, Yes, coarse Coatings, Promptness Movement, Hesitating

PUPILS, Equality, unequal Size, some dilation

Response Light, Yes Accommodation,

SIGHT, Says good

HEARING, good

COORDINATION, Arms, } very poor; on usual tests, poor.
Legs, }

TREMORS, Hands, yes Tongue, Yes, coarse.

Facial Muscles, some General, Yes; all over

REFLEXES, Patellar, 1 – 2 –

Other Reflexes,

ARTICULATION, Hesitating, Yes Slurred, Yes

FACIAL EXPRESSION, somewhat impaired.

SENSIBILITY,

HEART, palpitating and irritable.

LUNGS, upper left lung shows some impairment. –

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Records Kept 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 Andrew Olson #3

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893

This patient was brought here by a Sheriff's officer, with following history. This is 1st attack, as far as known, occurring July 23d last; disease appears to be decreasing; no rational interval at regular periods. Derangement now manifested in general subjects. Is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Can't say as to heredity or previous peculiarities. No history of intemperance or disease or head injury. Has been strapped in order to keep clothing on bed. The cause of disease is supposed to be sunstroke + syphilis. Has given bromides up to Augt 1st, then Iodide; some improvement under iodide. On personal examination, is found weak; there are also muscular atrophy and mental aberration. –

Sep 1 Sep 1/93. On admission, was very weak. Had to be carried up to C2, the "Sick Ward". Was then put to bed.
" 2 Pulse 88. R 24. T@ 99.4. Face is red, and has pimples on it. Sep 2/93. Was restless for 2 hours, but slept 6 hours, last night. AM. Pulse 82. R 24. T@ 98.8. Ate no breakfast; says he does not feel hungry". Is very restless today. Complains of being very weak. PM. Pulse 80. R 24. T@ 99. Sep 3/93. Slept 8 hours, last night. AM. Pulse 84. R 22. T@ 99. Appetite is not very good. Bowels are normal. Complains, today of being sore across the back. Sept 4/93. Was restless + slept but 5 hours, last night. AM. Pulse 82. R 20. T@ 99.2. Appetite is improving. Says he is feeling well". Gets out of bed a number of times, during the day. Says he wants to go home". PM. Pulse 84. R 20. T@ 99.8. –
" 5 Sep 5/93. Was restless for 7 hours last night, out of bed + slept but 1 hour. AM. " " 94 " 24 " 99.
" 6 Appetite good; patient appears to be growing stronger. PM. Pulse 88. R 24. T@ 99.6. Sep 6/93. Passed last night, about as the one preceding it. AM. Pulse 80. R 24. T@ 99.4. Wants to get up + go home. Coughs some
" 7 and complains of wind in his stomach. PM. " 82 " 24 " 99.6. Sep 7/93. Restless, out of bed, and did not sleep any last night. AM. Pulse " 96 " 24 " 99.6. Is continually getting out of bed today
" 8 PM. Pulse 90. R 24. T@ 99.8. Sept 8/93. Again passed a very poor night, last night; slept only 1 hour. –
AM. " 88 " 24 " 99.2. Shivers + shakes when he stands up. Voice also shakes, at times, when he talks.
" 9 PM " 86 " 24 " 100. Was given a bath today. Weight 101½ lbs (in underclothes). Sep 9/93. Slept and rested poorly, only 3 hours, last night. AM. Pulse 90. R 22. T@ 99.6. Got out of bed very frequently, today.
" 10 Said "some one was calling him". PM. Pulse " 88 " 24 " 99.8. Sep 10/93. Slept but 1 hour, last night. restless the greater part of the time. AM. " " 92 " 24 " 100. Appetite good and bowels regular.
" 11 PM. Pulse 92. R 24. T@ 100. Sep 11/93. Rested poorly, last night, sleeping but 3 hours. AM. Pulse 90. R 24. T@ 99.8.
" 12 PM. " 92 " 24 " 100. Sep 12/93. Slept only 4 hours, last night. AM. Pulse 88. R 24. T@ 99.4. Wants
" 13 to get up + dress. Sep 13/93. Last night, slept only 4 hours. AM. Pulse 80. PM. Pulse 86. Appetite is good.
" 14 Bowels regular. Seems to be doing nicely. Sept 14/93. Only 3 hours sleep, last night. AM. Pulse 90. –
" 15 says he is feeling very well, today". Sep 15/93. Slept 5 hours, last night. AM. Pulse 72. PM. Pulse 80.
" 16 Is doing nicely. Will converse quite freely. Sep 16/93. Last night, was quiet + slept 5 hours. Since his coming, patient, though poetic in manner, has improved slowly; and his mind seems to clear up slowly. Has been confined daily to his bed since admission. Was today, got up + dressed. – –
" 21 Sep 21/93. Has remained up, on ward, daily. Has been doing nicely. Seems improving, daily.
" 23 Thinks himself well enough now, to work on the Farm". Sep 23/93. Goes out walking every day.
" 30 Works some in ward. Still doing nicely. Sep 30/93. Seems to continue to improve. Wants to go home, as he thinks he is now well enough to do so. (Pulse taken each day, up to 23d inst, has been normal).

Oct 4/93 Oct 4/93. Weight 123½ pounds. Oct 18/93. Appetite good. Bowels regular. Helps with ward work.

Personal and Medical History of Andrew Olson #3

1893

Oct 24 Continues to improve. Oct 25/93. Quiet + well-behaved. Very pleasant, as a rule. Still works
" 31 well + willingly in the hall. Oct 31/93. Appetite continues good. Bowels normal. Talks quite rationally. Reads some. Plays games. Rest + sleep at night are good. Goes out walking with the rest. Is anxious to go home.

Nov 3/93 Nov 3/93. Wt 133 lbs. (A gain of 9½ pounds, in past 14 weeks). Nov 6/93. Appetite good; bowels regular. Reads, writes letters to and receives them from, his friends. Talks quite
" 20 rationally. Works some on ward. Is doing well. Nov 20/93. Doing very nicely. Appetite
" 25 keeps good; bowels normal. Nov 25/93. Wants very much "to be at liberty", as he expresses
" 30 it. Nov 30/93. Continues to make improvement.

Dec 11 Dec 11/93. Wt 140 lbs, 14 pounds (a further gain of 8 pounds in past month).
" 18 Dec 18/93. Patient has improved steadily. Lost his paretic tendencies quite quickly, and has been fairly rational since.

Went home, today, alone, on trial.

Discharged

Crossed off the Records; was illegally committed here –

Gottfried Bergman

From p. 32

1899 Feb 1–June 31. (Cont by Dr Wanous) Wt. 254#. no apparent change physically or mentally: eats + sleeps well
1900 Jany 31 Is demented. (Cont by Dr. Chapple) Aug 1/99–Jan 31/1900 Wt. 242# Very little change during period: very fleshy: cannot see: cannot talk intelligently: makes peculiar noises: rather dirty: somewhat irritable
Mar 31 No change noticeable in any way. Is very fleshy. Though blind, manages to get about, fairly well.
May 1 Wt 226½. 080. June 25. Visited by friends. June 30. Visited by friends. July 4. Vaccinated;
July 26/31 result good. July 26. Visited by friends. July 31. Has now increased somewhat in weight; otherwise no change. Is totally blind. Cannot speak intelligibly; makes a "grunting" sound. Gets angry + violent if bothered. Quite cleanly in his habits. Has a ravenous appetite.
Aug 31 Patient very much demented: physical condition fair. Sept 1. Visited by a friend. Nov 1. Wt 222#
Nov 1/30 080. Nov 30. Patient is blind, but gets around fairly well. Is led, when outside. He is very fleshy.
1900 Jan 31 Patient's condition continues the same. Febry 1. Wt 220#. P76. May 31 – Is totally blind. –
May 31 no power of speech: gets about only with assistance. Is badly demented –
July 1/32 Wt 217#. July 31 No change to report in patient's condition. Gets very angry, if bothered.
Aug 1 Wt 216#. Jany 31/01 Patient, physically is heavy + gross in appearance: Stupid + thoroughly demented
1901 Jan 31 in behavior. General health fairly good. Jany 31/02. Wt 193#. Patient extremely
Jany 31 demented: Dull: at times, noisy: Is very fleshy and awkward in movements.

Personal and Medical History of Peter Frauenkron

EBERT, FIGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3460.

No. for Year, 30.

Residence, Money Creek, Minnesota.

Insane Relatives, mother in this Hospital

Date Admission, 1st September 1893

Cause Exciting, not known; probably family trouble.

Admitted by, D. Phelps Hour, 10 PM

Cause Predisposing, Heredity & previous attack

How Sent, Thos Ryan, Jof P. Houston County.

Form, Chronic Mania

Sex, Male

Accompanying Bodily Disorder, none noted

Age, 31

Suicidal or Not, not –

Civil Condition, married

Date of this Attack, about 2 weeks ago.

Children, 2

Duration, about 2 weeks.

Age Youngest Child, —

No. of Attack, 2nd

Occupation, Farming

No. of Admissions, 2nd

Degree Education, Limited

Age First Attack, 28 years.

Profession Religion, not a church member

Time of Leaving, Nov. 11. 93

Habits, probably fair

Time in Hospital, 2 mos 13 d.

Nativity, Wisconsin (Father, Germany; Mother, Bohemia)

Result, Improved

Physicians Committing, D.C. Rhines & L.B. McEntire

Crossed from Brenton List, 2nd #8 - 1st, 1894, because illegally committed.

Correspondents, None given

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish,

MEMORY:

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

not steadily improved this time

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION,

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Coatings, Promptness Movement,

PUPILS, Equality, Size,

Response Light, Accommodation,

SIGHT,

HEARING,

COORDINATION, Arms,

Legs,

TREMORS, Hands, Tongue,

Facial Muscles, General,

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

EBERT, FIDLER & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here, in due form, by a Sheriff's officer, with the following history. There is no history of consanguinity but there is some of heredity, his mother now being in an Insane Asylum. This is his 2nd attack, first symptoms of same being manifested about 2 weeks ago, by making threats of shooting certain persons, his neighbors; disease seems stationary, though he is, at times, worse than at others; worse when he gets mad. Derangement is now shown by uncontrolable temper and threats to injure and shoot certain persons. Is neither filthy, nor destructive, nor suicidal. Is very quick tempered, also; does not think much of religion. No history given of intemperance, nor of any severe disease or injury to head. He has been in custody of Sheriff twice, during past 3 weeks. The supposed cause of disease is not known; (probably some family trouble); he has not been under any medical treatment. On personal examination, is found to possess an uncontrolable temper; is, at times, calm; at others, very excited. Has heard, from others, that he takes improper liberties with his step-daughter & that he has it in his head that parties are taking improper liberties with his wife. Also, that he has dangerous tendencies towards crime.

Sep 1. Sep 1/93. Patient came in last night, in wristlets and anklets. Was put on B3. Note. He was here before from Feby 14/91 to Sep 14/92, when he was taken home by his wife, on trial. During that

Note. stay, was more or less inclined to be quarrelsome; was, at all times, a loud, rather vulgar and obscene talker. At times, complained of some ill-feeling, but worked outside with the Stone-masons, the

" 2 greater part of that period. Was clean, fairly tidy, and of good personal habits. (Vol 15. p. 293. No 2612) When seen at bathing time, no injuries or peculiarities noted. Sep 2/93. Did not sleep very well, last night. AM. Pulse 80. T @ 100. Appetite is not very good. Is restless today; seems to be nervous & somewhat excited. Says "he had some trouble with some of his neighbors"; says "one of his neighbors pulled a revolver on him, and he (Frauenkron) threatened to kill him when he had an opportunity". Says "he has not slept any for abt 3 nights & feels awfully weak" PM. Pulse 60. T @ 98.8. Weight today 148 pounds. Complains of

" 3 too much noise in the ward; says "he can't stand it, as his head aches so". Sep 3/93. Rested poorly, sleeping but 3 hours, last night. AM. Pulse 55. T @ 100. Appetite fairly good; no cough noticed. Is still

" 4 very nervous & restless; always wanting something. Sep 4/93. Slept somewhat better, 5 hours, last night. AM. Appetite good. Pulse 56. T @ 99.4. Sep 5/93. Slept 6 hours last night. AM. Pulse 72. T @ 100. -

" 5 Is quiet & well-behaved on ward; clean, tidy & of good personal habits. Talks a good deal. Wants to

" 6/7 go out working. Sep 6/93. Quiet, sleeping 7 hours, last night. AM. Pulse 64. T @ 100. Sep 7/93. Slept 8 hours, last night. Appetite is good & bowels regular; quiet & well-behaved, though at times, given

" 15 to loud & rather noisy talking. Has commenced to work outside with the Stone-mason. Sep 15/93. During this, the second week of his stay, patient has continued quiet & restful at night, sleeping uniformly 7 or 8 hours, in each. Has been quiet & well behaved by day, while on the ward. Of good personal habits. Appetite is good; bowels normal. Works outside, daily, with the Stone-mason. Still given, at times, to

" 30 loud & noisy talking. In fairly good physical health. — Sep 30/93. Appetite very good; bowels regular. Still manifests delusions. Still works outside with the Stone-mason. Given, at times, to loud, pro-fane & vulgar talking. Habits are clean, but not very tidy.

Oct 1/93 Oct 1/93. Wt 170 pds (a decided gain in flesh). Pulse 90. Oct 19/93. Was quarrelsome today and

" 30 provoked a fight with a fellow-patient (J. O. Boyle) in the dining-room. Oct 30/93. Is on very friendly terms with Joseph Stees (Epileptic) & they are always together when they get an opportunity.

1893

Oct 31 Patient is very cranky & of rather a mean disposition; thinks he can do about as he pleases. In other
Contd respects, there is no material change. Still works outside, as above mentioned, daily.
Nov 1/93 Nov 1/93. Weight 168 pounds. Nov 14/93. Shows a chronically weakened & irritable mental
state. Is in fair physical condition.

Was taken home by his father, today.

Crossed off the Records; was illegally committed here—

From 16 Mathias P. Johnson

Last Aug 31 Contd Sept 3 Oct 10 Got he is inclined to be irritable & then becomes quite ugly. Works on ward. Habits are neat & clean. —
Sept 3/94. Wt 175 pounds. Pulse 72. Has been gaining considerably in flesh the past two months. —
Sep 10/94. Nine nocturnal convulsions have been reported for this month. None reported occurring in the day time. Patient is still very fairly provoked; recently had some trouble with a fellow-patient (one Frank Simpson) in the dining room. Johnson was the aggressor. Yet on the whole, he has been much better behaved & more quiet for several months past. Has helped willingly, with the work on ward. Quite pleasant & agreeable in manner & conversation. For some time has seemed anxious to go home & has written his wife some letters, to this effect. Habit neat & clean.
" 10 Sept 10/94. Was today visited by his wife & Children & permitted to go home with them.

Discharged Feb. 6th '95.

From 360. Jacob Gribler

1894 Lies quietly in bed — on Infirmary ward — Is quite helpless and patient is failing
June 30 Catheters & fail — July 11. Failed Rapidly & Died 4 day
July 9/94

Died

Personal and Medical History of Peter J. Giesen

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3461.

Residence, St Paul. Minn.

Date Admission, 2nd September 1893.

Admitted by, Dr Phelps Hour, 7 PM.

How Sent, Benn. Davis. Court Commr., Ramsey County

Sex, Male

Age, 59.

Civil Condition, married

Children, 4

Age Youngest Child, twenty -

Occupation, Book-binder

Degree Education, Fair

Profession Religion, Catholic

Habits, Temperate past year + a half

Nativity, Prussia (that of parents also)

Physicians Committing, Arthur Sweeny + J. B. Darling

Correspondents, H. H. West West Publishing Co. St Paul
Wm Hauser - St Paul

Family Physcn J. B Darling. St Paul.

No. for Year, 31.

Insane Relatives, Father insane. Brother now in St Peter

Cause Exciting, Jealousy + financial losses.

Cause Predisposing, heredity + previous attacks.

Form, Alcoholic Mania

Accompanying Bodily Disorder, no history of any

Suicidal or Not, has threatened suicide

Date of this Attack, over 2 years ago.

Duration, over 2 years.

No. of Attack, 2nd (one 6 years ago).

No. of Admissions, 1st

Age First Attack, about 53 years

Time of Leaving, Sept 14th '93

Time in Hospital, 12 ds.

Result, Improved.

EXAMINATION ON ADMISSION.

Exd by Dr Phelps Sep 5/93 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Prompt

Quick or Sluggish, Quick

MEMORY:

Past Events, } seemingly good

Recent Events, }

Special Subjects, }

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, }

Special Subjects, } Rather poor.

GENERAL DESCRIPTIVE REMARKS:

Says he is very nervous under the examination. There is observed a general tremulousness in all his movements + more or less, even when sitting down. See page 47 for further notes.

EMOTIONAL STATE:

Normal, Calm, Normal at present.

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized ~~or Not~~, according to history -

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None definitely brought out

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent in form + fairly normal

Voluble or Reticent, in manner. Remembers + gives a good account of things.

...ON ON ADMISSION.—(Continued.)

...HARACTERISTICS.

NUTRITION, Very good

...ted

...rue Promptness Movement, fairly prompt +

...t (Legibility) Size,

Accommodation,

...e, Eyes shut, poor; Standing on foot, poor. Standing, ...oor; tremulous.

Tongue, some

General, some

...t

...o memory today).

...eless,

...gular,

...or,

...gular,

...MP.,

...ONSET GRADUAL OR SUDDEN,

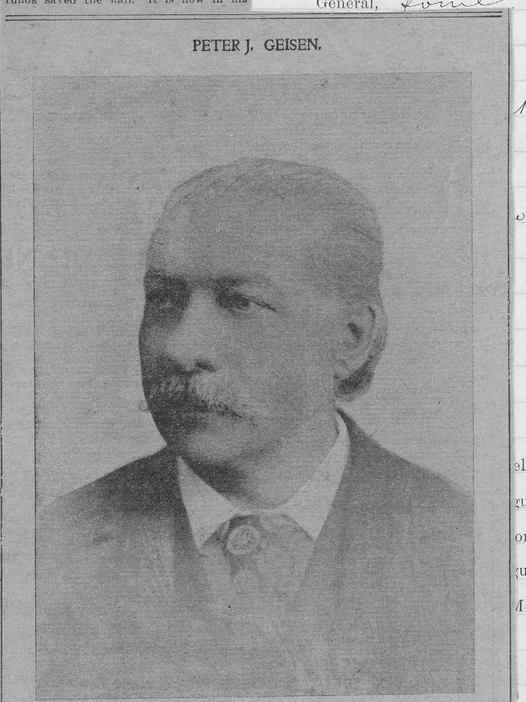
..." "Paralysis," or "Inebriety,")

...Louis had good health. Denies father insane and one Died in St. Peter Hospital -

FRIDAY, AUGUST 18, 1899.

A LIFE SKETCH.....

Of Peter J. Geisen, one of the best known German-Americans of St. Paul.



PETER J. GEISEN.

One of the Most Prominent German-Americans of the City and the Father of the Mozart Club, the Leading German Musical Organization of St. Paul.

That Peter Joseph Giesen gone to bed in the barracks at old Cologne that night in 1853, with the fierce sergeant at the head of the row of iron bedsteads, and scores of kaiserlichs snoring about him; had he waited to become accustomed to hearing the reveille and taps each day; to carrying his gun and shouting "hoch" whenever the Frenchmen approached too near to the border; had he waited, in short, to become enslaved in the kaiser's army, and to be a dog of a soldier under a dog of a captain, who was a dog of a captain under a dog of a colonel, then America would have lost a good citizen, and St. Paul would never have known a true benefactor, a generous citizen and a real patriot.

But Peter Giesen knew better than to go into the army. He knew other young men, just a little younger than he who had gone into the ranks, full of life and enthusiasm, but who had come out cowed, and as automatic as a bell buoy. So in 1853, when he was 20 years of age, he in some way found himself on the Atlantic, and when he saw the strip of ocean between him and old Germany growing wider, his soul was filled with varied emotions, but the chief was one of emancipation. The promise of young manhood was never brighter.

So to New York he came. This was in 1853. Just twenty years before that, or on Dec. 15, 1833, he first saw the light of day. When he landed in New York, he was the possessor of a good education and had the benefit of a year's manual training in one of the technical schools of Germany. Then he was apprenticed out to a bookbinder and learned a trade in which he has since become quite famous.

The spirit of enterprise suggested to young Peter that in the Golden West, of which he had heard so much, his chances for enduring success would be much better. Three years in New York had established him quite firmly in American methods of bookbinding. So he came out to St. Paul in 1856, and has lived here ever since, for which heaven be praised.

In forty-three years Peter Giesen has made a record for himself, which will last long after he shall have been laid to rest. Mr. Giesen seems to have drawn a double success. His motto in starting out was that a good name was rather to be chosen than great riches, but Mr. Giesen has both. His natural honesty and probity may be cited as the chief cause of his success. It is not often that you hear of an old citizen say: "I have known him for forty-three years, and I never knew him to do aught but good." Or, in seeing him pass through a crowd of good friends, to see them all get up and crowd about, saying with the warm enthusiasm of the German race: "Here, Herr Giesen, come sit with us," and then to fall to disputing as to who should be honored with his company. But all this he takes modestly, deprecating all praise, and valuing only the honest esteem of good men and women.

Peter Giesen is a lovable and a beloved person.

When he came "out to St. Paul," in 1856, he took advantage of his training and went to work in the old Hossington bindery, over Coomb's book store, on Third street. None but old settlers will remember the place. He carried his energy into his work, however, and Hossington said once that Peter Giesen was one of his best men. In 1861 he went to the Free Press company, then owned by Marshall & Foster. Five years later he and David Ramaley formed a partnership in printing and binding, and this firm was in existence until 1872, when Mr. Giesen opened a book and stationery store on West Third street. All these years he was quietly doing good to his fellow men to the full limit of his ability. There was not a young man of character in the city, who really and honestly wanted to make something of himself, but who would get substantial assistance and encouragement from Mr. Giesen.

He had a way of taking the young man into his private office and talking to him as a companion. There was no pedantic giving of advice, no condescending counsel offered. Mr. Giesen would always say "we" better do this and "we" better do that, making the young man feel that it was a mutual bargain, which he might enter without losing any of his self-esteem or independence. And this has been Mr. Giesen's policy all his life. He still keeps it up, and any man would feel justly proud of the number of friends Mr. Giesen has among the young men and women. No one ever heard of a strike in Peter Giesen's place. No one ever heard of disgruntled workmen demanding higher wages and shorter hours, for all understood without asking that whatever it was possible for Peter Giesen to give, they would give without the asking. That is why, on every holiday, or whenever there is a slight excuse for doing so, there is joy in the Giesen factory. It also explains why on every birthday and on every Christmas, a committee of Mr. Giesen's employes will go over to the magnificent Giesen homestead on Mound street, bearing presents and tokens of good will.

Early in the seventies, Mr. Giesen became acquainted with John D. West of the West Publishing company. Mr. West was then doing a small business in selling and exchanging law books. Mr. Giesen undertook to do the binding of the books, and did it so well and so promptly that he grew up with the business, so to speak. Out of that small beginning grew the present immense concern, the West Publishing company, and all these years Mr. Giesen has been in charge of the binding department, which has grown into a colossal institution. And out of it, he has not only made his own fortune, but has provided hundreds of others with goodly incomes.

There is another side to Mr. Giesen's character which makes him lovable to his friends. That is his droll wit, his buoyant spirits, and his open heartedness. Ever since he was a young man, Mr. Giesen has been the possessor of a splendid bass voice. It was not trained for opera singing, but it might have been. Mr. Giesen took pleasure in singing, and gave pleasure to others. His great forte seemed to be the comic German songs which require an enthusiastic temperament, and a lively manner. Giesen was just the man to carry them through to a point where people were bursting with laughter and begging him to stop before laughter quite killed them. And this article should not be written in the past tense either, for Giesen still does it, notwithstanding that he is 65 years of age. His comic songs are still a feature of rollicking German festivals.

Peter Giesen has the true German love of music, and to this may be attributed the fact that the Mozart club of St. Paul is what it is, and what it promises to be. He was the founder of the old Maennerchor, which was famous in its day, and was the first president of the Saengerbund. He had trained his own voice too, during these years, and his face had been seen for twenty years in the Cathedral choir, where his rich bass was always loved.

Two years ago, or less, the Mozart club got into financial difficulties. It looked as if the handsome hall and garden on Franklin street near Sixth would have to go under the block. But Mr. Giesen was one of the bondsmen. He was determined that the German s should have this hall for their own, and therefore he opened his purse and out of his own funds saved the hall. It is now in his own name. For the past four or five weeks there has been quietly going on at the Mozart building, a wonderful transformation. The improvements will cost about $8,000, which Mr. Giesen will pay out of his own pocket. In the main hall, eight handsome boxes overlooking the stage have been constructed, and the decorations of the ceiling are simply exquisite, being life-sized figures in the semi-nude, representing the Muses. In a few weeks the Germans will have one of the finest halls in the country.

Mr. Giesen was married in 1860 to Anna Marie Dreis and 12 children were born. Four stalwart sons survive. The Giesen mansion is on Dayton's bluff, overlooking the river below, and commanding a fine sweep of landscape. The house itself is a gem of artistic arrangement. Mr. Giesen's fine taste has exhibited itself in the furnishing of his house also. He entertains lavishly and is never so happy as when surrounded by his friends. He is an enthusiastic hunter, and loves nature in its natural state. Therefore his summer home at Lac Pomme de Terre is a refuge where he flies for two or three months each year. His summer home is strikingly picturesque.

Personal and Medical History of Peter J. Gieser

Personal and Medical History of Peter J. Gieser

Whole No. 3461.

Residence, St Paul. Minn.

Date Admission, 2nd Septembeo

Admitted by, Dr Phelps

How Sent, Benn. Davis Co.

Sex, Male

Age, 59.

Civil Condition, mo

Children,

Age Youngest Child

Occupation,

Degree Educat

Profession

Habits,

Nativ

Plac

No. for Year,

Insane Relati

Cause Ex

Cause

MEMORY:

Clear or

Quick or Sluggish,

MEMORY:

Past Events,

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Good

Own Mental State,

Special Subjects, } Rather poor.

GENERAL DESCRIPTIVE REMARKS:

Says he is very nervous under the examination. There is observed a general tremulousness in all his movements & more or less, even when sitting down. See page 47 for further notes.

at present.

, according to history -

Not,

NATIONS: more definitely brought out

ONS:

CONVERSATION:

Coherent or Incoherent, Coherent in form & fairly normal

Voluble or Reticent, in manner. Remembers & gives a good account of things.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Very good

WOUNDS OR ABNORMALITIES, none noted

TONGUE, Tremors, None Coatings, None Promptness Movement, fairly prompt

PUPILS, Equality, slightly unequal; right (slightly) smaller Size,

Response Light, fairly good Accommodation,

SIGHT, only fairly good

HEARING, good

COORDINATION, Arms, } quite poor; fingers tremor, eyes shut, poor; standing on foot, poor. Standing,
Legs, } Eyes shut, quite poor; tremulous.

TREMORS, Hands, marked fine Tongue, None

Facial Muscles, General, None

REFLEXES, Patellar, equal; exaggerated 8 to 9.

Other Reflexes, ankle - clonus.

ARTICULATION, Hesitating, foreign accent Slurred, somewhat

FACIAL EXPRESSION, Fairly good.

SENSIBILITY,

HEART, palpitating sounds. - (Attributes it to his extreme nervousness today).

LUNGS, Sounds are good.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Record kept Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 120. (on exam. today). - RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

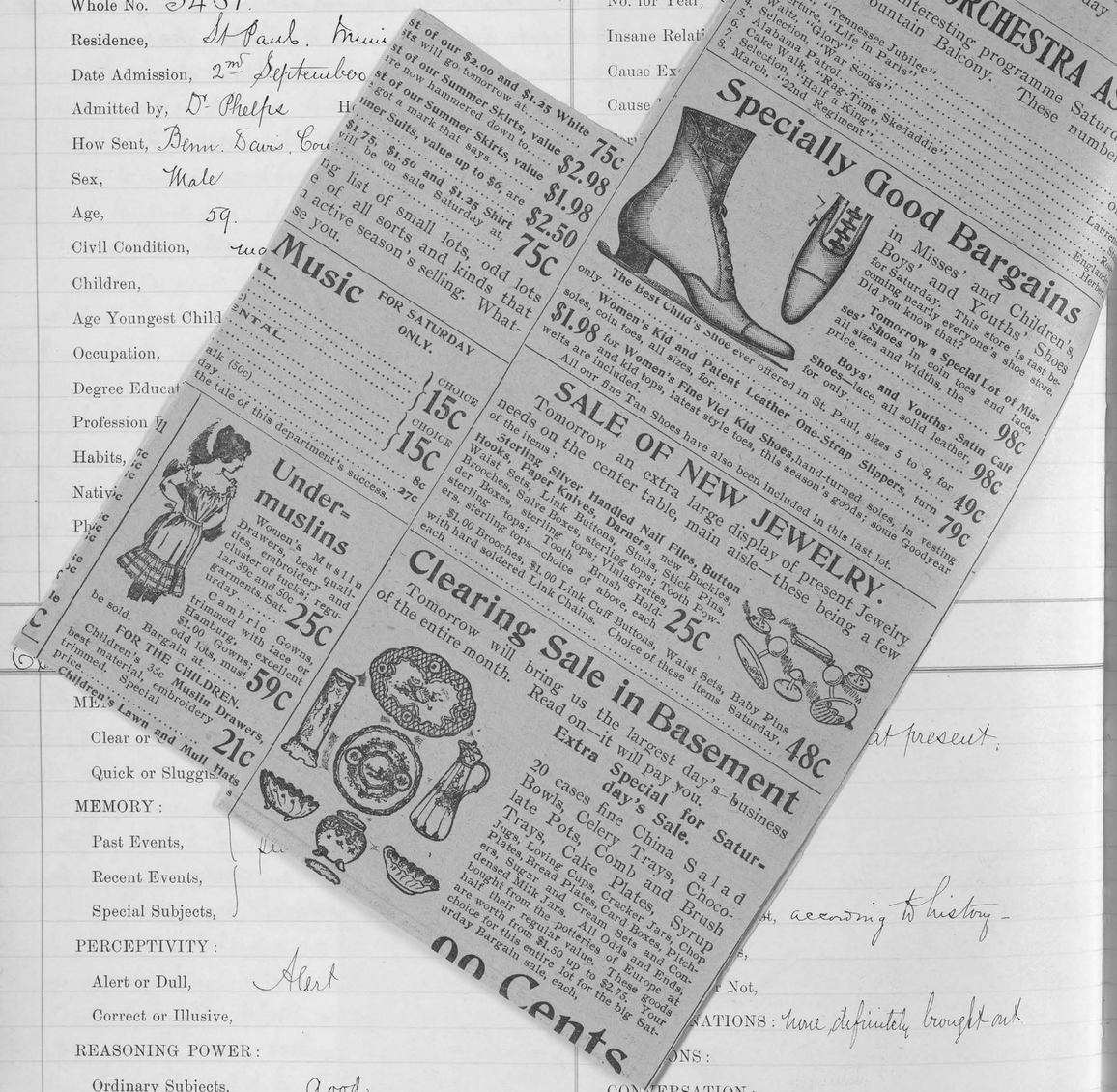
LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations,

Father or Pat. Relations, Father died; age 63. Claims had good health. Denies father insane

Brothers or Sisters, 3 brothers - all dead - one Died in St. Peter Hospital -



Personal and Medical History of Peter J. Giesen

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy-Sheriff Irish, with the following history. There is no history of Consanguinity, but there is of heredity; his father was insane & he now has a brother in St. Peter Hospital. This is probably 2nd attack; had an 6 years ago, of 2 years duration, but was not sent to an hospital. This attack began over 2 years ago; commenced to have suspicions of his wife & threatened her Heckler, whom he suspected. Has threatened to kill his wife & commit suicide. Six years ago he had suspicions of a similar nature. Disease appears to be increasing; is variable & there are rational intervals: seems to be rational in everything but his wife's infidelity; he has attacks of excitement which pass one into another with no intermissions, on the subject of jealousy. Derangement is now shown by his having hired detectives to watch his wife; becomes wildly excited whenever he talks of the subject; sees people prowling about the house, shooting dogs, running away as if burglars. Has mistaken a woman for this Heckler, the object of his suspicions. Threatened & made a partial attempt to shoot Heckler. Has given his wife the alternative of poison or shooting, with the idea of both dying. Talks with vehemence on subject of his wife's infidelity. Has seen Heckler prowling about the house & has frequently threatened violence to his wife & others. Is not filthy or destructive. Has not been restrained or confined nor under medical treatment. He has, of late years, (6 or 8), been jealous of many people & threatened their lives. Patient has drunk a great deal during past year & a half. Has not been subject to any severe disease, head injury &c. Supposed cause of disease is insane jealousy; financial losses, 2 years ago, & a great deal of worry. — On personal examination, gave the history of jealousy & threats narrated above; corroboration abundant by the detectives, members of his own family & others. Said that he has suspected his wife of infidelity; has threatened to kill Heckler, his wife & others. Has seen people prowling about his house & suspects that illicit relations occur with his wife. He talked very excitedly & energetically on the subject of his trouble & gesticulated violently. Appearance & manner, excited. Tongue is tremulous; face flushed; right pupil smaller than left. Stutters slightly, of late; and slurs over long words.

Sep 2/3 Sept 2/93. On admission, is in fair physical condition. Was put on B.T. Pulse 80. Sept 3/93. Was quiet, but slept only 5 hours, last night. Am. Pulse 82. Is quiet & well behaved in ward; causes no trouble. Very neat, tidy & of good personal habits. Appetite good; bowels, as a rule, regular. No cough noticed, nor any injuries or
" 4 peculiarities. Talks freely; no delusions detected. Pm. Pulse 86. Sept 4/93. Slept 7 hours, last night; was quiet. Am. P 78. Pm. P 80. Says he is not sick & does not need his T. taken". Read; plays billiards; talks quite freely.
" 5 Sept 5/93. Was examined today. Denies ever shooting anybody. Admits threatening this one man a year & ½ ago, but never since. Denies ever talking to his wife of poisoning. Denies that his father was insane; Denied having these ideas along as 6 years ago; Denies drinking much during past year but admits drinking formerly. Denies shooting the dogs or looking for people, except as those who were prowling about his stables. Thinks he now has gonorrhea, since coming here, & argues to have his wife examined for the same, to furnish a foundation for the truth of his story. Talks in a fairly rational, quiet manner, leaving, as far as the examination is concerned, a diagnosis of insanity to be based, almost wholly, upon the truth of the statements coming with patients' warrant. That diagnosis, tho' suggesting general Paresis, would be rather a tendency toward senile change. The exciting cause, however, of the form of insanity being alcoholic. Of the motor signs, the incoordination, unequal pupils, exaggerated reflexes, irritable nervous condition, it is to be said they are a little more marked than is due in alcoholic cause. — Slept 7 hours, last night. Was quiet. Am. Pulse 88. Appetite good. Is quiet & well behaved today;

Personal and Medical History of Peter J. Giesen

1893

Sep 5 (contd) Plays billiards well; writes some letters. Talks freely & quite sensibly. Goes out walking with the rest of his ward. Pm. Pulse 84. Seems quite contented here. Sept 6/93. Am. Pulse 90. Talks freely & sensibly; writes
" 6 a good many letters to friends & relatives. Sept 7/93. Am. Pulse 86. Still quiet & well-behaved.
" 7 Sept 8/93. Has continued to rest and sleep well at night. Appetite has been good and bowels regular. This
" 8 Am. Pulse 76. Was today transferred to C2 & given a single room there. Visited by friends yesterday & today.
" 9 Sept 9/93. Am. Pulse 92. Says he is contented and will remain here a while as he does not think he will be kept very long". Visited today by wife. Pm. Pulse 92. Sept 10/93. Am. Pulse 80. Pm. Pulse 70.
" 11 Sept 11/93. Am. Pulse 68. Pm. Pulse 70. Again visited by wife. Says "they are going to Chicago next week".
" 12 Sept 12/93. Was out on the grounds almost all day, with his wife. Says he is feeling very well, now".
" 13 Converses freely, sensibly & pleasantly. Am. Pulse 70. Pm. Pulse 72. Sept 13/93. Rest was somewhat disturbed last night, as he slept only 2 hours. Was quiet, however. Seems to be quite easily agitated.
" 14 Am & Pm pulse, today, about normal. Sept 14/93. With above single exception, has been sleeping well, (uniformly 7 hours), for the past 6 nights, in each. Appetite has continued good; bowels regular; Patient has, all along, been quiet & well-behaved, though inclined to be somewhat easily agitated. Has played billiards a good deal, being interested in that game. Has gone out walking regularly and has taken an interest in his surroundings. Has written quite a few letters. For the past four days, has been visited by his wife. Was today permitted to go home with her, on trial. —

Oct 3 Oct 3/93. Recently, patient and his wife, paid a visit here, remaining for a day or so — said he invited to bid the faculty good-bye as he purposed, with his wife, to make a trip across the ocean & would remain abroad this winter.

Discharged

Personal and Medical History of Edward R. Campbell Jr.

GIBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3463

Residence, Austin, Minn.

Date Admission, 3rd September 1893.

Admitted by, Dr Luxton - Phelps Hour, 12 M

How Sent, S S Washburn, Jof P, Mower County

Sex, male

Age, 17

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Farming

Degree Education, Common School —

Profession Religion, Not a church member

Habits, probably good —

Nativity, Pleasant Valley, Minn.

Physicians Committing, C.A. Johnson & D.F. O'Connor

Correspondents, E. R. Campbell Sr. Austin, Minn

Family Physician D. O.W. Gibson, Austin Minn

No. for Year, 33.

Insane Relatives, Mother

Cause Exciting, Financial trouble

Cause Predisposing, Heredity

Form, Acute Mania

Accompanying Bodily Disorder, None noted

Suicidal or Not, not

Date of this Attack, Aug 26th 1893

Duration, about a week.

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, 17 years.

Time of Leaving, Nov. 29 '93

Time in Hospital, 2 mo 26 ds.

Result, Rec.

Discharged from the Hospital for the Insane
1st 1894 Department of Public Institutions
Commissioner

EXAMINATION ON ADMISSION.

Evelyn Ely - Oct 30/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, confused

Quick or Sluggish, quick

MEMORY:

Past Events, seems fairly good.

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Poor

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Poor

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes

Depressed,

DELUSIONS:

Systematized or Not, ?

Special Subjects,

Transitory or Not,

HALLUCINATIONS: of "Light & hearing"

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Incoherent

Voluble or Reticent, voluble.

GENERAL DESCRIPTIVE REMARKS:

Patient, at time of coming, was very much excited; continually talking &c & it was impossible to examine him much befor today. He laughs, in a silly way, during nearly the whole of the examination today. Talk very incoherent. Questions foolish.

Personal and Medical History of Edward R. Campbell Jr.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ WEIGHT, ✓ NUTRITION, Quite Good now.

WOUNDS OR ABNORMALITIES, None.

TONGUE, Tremors, Some fine Coatings, Slight Promptness Movement, Prompt

PUPILS, Equality, equal Size, slightly dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Quite Good. Fingers know, eyes shut, good.

Legs, Standing, eyes shut, quite steady —

TREMORS, Hands, Slight Tongue, Some fine

Facial Muscles, none noticed General,

REFLEXES, Patellar, equal; about normal.

Other Reflexes,

ARTICULATION, ~~Hesitating,~~ Quite Good ~~Slurred,~~

FACIAL EXPRESSION, Normal (when quiet) -

SENSIBILITY, Normal

HEART, quite rapid; bounds are good.

LUNGS, bounds normal.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

Records kept

HISTORICAL.

LENGTH OF INVASION, Short. ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother Insane —

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Edward R. Campbell Jr.

SIBLEY, PICKAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by his father, E. R. Campbell Sr, with the following history. His mother is insane. Father uses tobacco to excess. This his 1st attack, occurred Aug 26/93 (about a week ago), had some financial trouble about settling a bill. Disease seems stationary, is not variable; no rational intervals. Derangement is now shown by difficulty in settling money matters. Is neither disposed to injure others, nor suicidal, nor filthy nor destructive, nor has he been restrained or confined, nor subject to any severe disease or head-injury. Supposed cause of disease financial trouble. Bromides administered had the effect of procuring some sleep & quiet. On personal examination, patient keeps up a continual, constant, incoherent talk. Showed acute, delirious mania. —

Sep 3 — Sep 3/93. On admission was put on B² — Pulse 124. Bodily condition quite clean. No peculiarities or injuries noted. Found it impossible to take his temperature. Later in the day, Pulse 118. PM. Drank 4 cups of milk today. Bowels are constipated. Is extremely restless, noisy & very troublesome. Talks incoherently and continually. No complains or injuries to note. Pulse 110. T- could not be taken. Sep 4/93. Slept but 5 hours last night; was noisy & very restless when awake. AM. Pulse 116. Is very restless & noisy today; requires constant watching. PM. Has been very quiet this afternoon. Was visited by father; was worse-behaved afterwards. Ate a very good dinner; & supper, fairly. Pulse 108. Sep 5/93. Was extremely noisy, restless, and out of bed frequently, last night; slept but 1 hour. Has given 3 sleeping doses during the night. AM. Pulse 105. PM. Has been very noisy & extremely restless, all day; requires constant supervision; eats a fair amount of food; bowels are constipated. Pulse 110. Sep 6/93. Slept but 4½ hours last night; was restless & noisy when awake. AM. Pulse 120. Was, today, given 2 hot baths, with cold applications to head. Has been very restless & noisy, all day. Appetite only medium. Pulse 116 this PM. Sep 7/93. Was very restless & noisy all last night, sleeping none. AM. Pulse 110. Slept about 5 hours, this forenoon. Appetite medium. Given hot bath, & cold application to head. Was restless & noisy, during the afternoon. —

Sep 8/93. Slept 5 hours, last night; restless & noisy when awake. AM. Pulse 120. Is very restless & noisy this forenoon. PM. Is somewhat quieter. Appetite improving. Talk is continual & incoherent. —

Sep 9/93. Passed last night about as the one preceding. AM. Pulse 120. Continues very restless, noisy and incoherent, by day. Appetite medium. Bowels moved. Weight, today, 101 pounds. Cleanin habits.

Sep 10/93. Slept better, (7 hours), last night, but when awake, was restless & noisy. AM. Pulse 118.

Sep 11/93. Was very noisy last night; slept but 4 hours. Has given hypnotic. AM. Pulse 112. Sep 14/93. Since last note, sleep has somewhat improved — 6 or 7 hours each night. Still restless by day, but not so noisy. Pulse has been 110. 98 & 94 in the past 2 or present mornings. Seems quite sensible when spoken to, yet is continually talking incoherently and to himself. Sep 16/93. Pulse was 98 yesterday morning & 96 this morning. Has continued to sleep 6 or 7 hours each night. Appetite lately, has become good. Constipation still persists. Patient is clean, fairly tidy & of good personal habits. Continues more or less noisy, nervous & very restless by day; walking the floor a good deal. Will come to a window at one end of the hall, and, remaining for a short time, will talk vulgarly, obscenely & incoherently about "Indians shooting bullets &c" then will go away, to return shortly & talk in a similar strain. Does this quite often. Talk, at all times, is continual & very incoherent. Sep 22/93. For the past 3 days, and today, patient has been visited by his father. Was very quiet and seemed to much enjoy his father's company. After he left, patient became much excited & quite noisy. Sep 30/93. For the past 5 nights, rest & sleep have been much broken; patient sleeping only 3 or 4 hours each night.

Personal and Medical History of Edward R. Campbell Jr.

1893

Sep 30 Contd — though, more or less night, very restless, noisy, frequently out of bed & sleeping but 1 hour. By day also, is extremely noisy and somewhat destructive; requires constant attention & watching. Appetite is generally good. Is somewhat dirty in habits. Not much improvement noticed.

Oct 3 — Oct 3/93. Has been very restless, noisy, getting out of bed & destructive the past 3 nights. Also very badly-behaved during the day. Has to be closely watched. Weight, today, 107½ pounds. Pulse 90. —

" 12 — Oct 12/93. Rest at night Continues very much broken; is restless, noisy, frequently out of bed & destructive.

" 13 — Also dirty in habits. Sleeps only from 2 to 4 hours, last night. Oct 13/93. Is very quiet today; "Wants to go home". Oct 22/93. Was restless, sleeping but 3 hours, last night. Oct 24/93. Has been very quietly behaved for past 2 weeks, but is rather noisy and troublesome today. Appetite good. Bowels, as a rule, free. Physical condition is good. Talks incoherently. Manifest hallucinations.

" 27 — Oct 27/93. Has been restless & noisy in each of past 3 nights & has slept very poorly, ½ to 2 hrs each night.

" 28/30 — Oct 28/93. Restless & noisy, all last night; slept none. Oct 30/93. More quiet than for past few days. Was today, brought down to office for examination - (see particulars of same). Owing to the "spells" he has been having, almost since admission, it was found impossible to examine patient much before today.

" 31 — Oct 31/93. Is still very incoherent. Laughs in a silly, foolish manner. Has hallucinations "of sight" also "of hearing. Appetite Continues good & patient has much improved in physical health.

Nov 1 — Nov 1/93. Wt 114 pounds; (has gained considerably in flesh, since coming); Pulse 80. —

" 3 — Nov 3/93. Was visited by friends, yesterday. He has been very quiet & well-behaved, of late.

" 5 — Nov 5/93. Talks quite freely when addressed. Helps some with ward work. Continues quiet.

" 8 — Nov 8/93. Attended the patients' weekly dance; received, today, a book from home, which seemed to please him. Takes more interest, now, in what is going on around him. —

" 10 — Nov 10/93. Continues to improve. Talks when addressed. Works some on the hall. —

" 20/19 — Nov 20/93. Attended a play at the theatre in town. Nov 29/93. Has continued quiet & well behaved, now, for some time & has not had any of the "spells" above mentioned. Talks sensibly and has, of late especially, improved quite rapidly. Works on ward. Is in good physical condition.

Was today visited by his father and taken home by him, on trial. —

— Crossed off the Records; was illegally committed. —

Personal and Medical History of August Slauter (Slater)

COBERT, PICLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3465.
Residence, Poor-house, Dakota County.
Date Admission, 8th September 1893.
Admitted by, Dr. Phelps Hour, 11 Am
How Sent, Thos. P. Moran, J of P, Dakota County
Sex, male
Age, 80 (about).
Civil Condition, widower
Children, four
Age Youngest Child, —
Occupation, White-washer.
Degree Education, none
Profession Religion, Lutheran
Habits, not intemperate.
Nativity, Germany (parents also born there).
Physicians Committing, H. Van Beeck & A.A. Finch.
Correspondents, (Friend) Fred Rohr Hastings. Minn
Dr L. P Dodge, Farmington, Minn; is probably not capable of giving information —

No. for Year, 35
Insane Relatives, not known
Cause Exciting, Approaching old age
Cause Predisposing, previous attacks
Form, Senila Demuntia
Accompanying Bodily Disorder, Extreme weakness, hernia
Suicidal or Not, not
Date of this Attack, 2 weeks ago
Duration, 2 weeks.
No. of Attack, Several (for last 3 years).
No. of Admissions, 1st
Age First Attack, about 77.
Time of Leaving, August 1st 1894
Time in Hospital, 10 months; 23 days
Result, Died - Fatty heart

Exd by Dr. Eby. Sep 15/93.

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:
Is greatly troubled with asthma. Is very weak & infirm old man. Does not talk English. It is found difficult to make examination

Left for to be recommitted

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 August Slauter

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft WEIGHT, 119½ lbs NUTRITION,
WOUNDS OR ABNORMALITIES, hernia (bad).
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, equal Size, about normal
Response Light, Accommodation,
SIGHT, Impaired
HEARING, very much impaired
COORDINATION, Arms,
Legs,

Case No. 3465. August Slauter. Vol. 25.

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.

Left for

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

Records kept

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 August Slauter (Slater)

COBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3465.

Residence, Poor-house, Dakota County.

Date Admission, 8th September 1893.

Admitted by, Dr. Phelps Hour, 11 Am

How Sent, Thos. P. Moran, Jof P, Dakota County

Sex, male

Age, 80 (about).

Civil Condition, widower

Children, four

Age Youngest Child, —

Occupation, White-washer.

Degree Education, none

Profession Religion, Lutheran

Habits, not intemperate.

Nativity, Germany (Parents also born the

Physicians Committing, H. Van Beeck & A.H.

Correspondents, (Friend) Fred Rohr Hastings. Minn

N. L. P. Dodge, Farmington, Minn; is probably not capable of giving information —

No. for Year, 35

Insane Relatives, not known

Cause Exciting, Approaching old age

Cause Predisposing, previous attacks

Form, Senile Dementia

Accompanying Bodily Disorder, Extreme weakness, hernia

Suicidal or Not, Not

Date of this Attack, 2 weeks ago

Duration, 2 weeks.

No. of Attack, Several (for last 3 years).

No. of Admissions, 1st

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr. Eby. Sep 15 93.

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:

Is greatly troubled with asthma. Is very weak & infirm old man. Does not talk English. It is found difficult to make examination

left for examination

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 August Slauter

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft WEIGHT, 119½ pds NUTRITION,

WOUNDS OR ABNORMALITIES, hernia (bad).

TONGUE, Tremors, Coatings, Promptness Movement,

PUPILS, Equality, equal Size, about normal

Response Light, Accommodation,

SIGHT, Impaired

HEARING, very much impaired

COORDINATION, Arms,

Legs,

TREMORS, Hands, Tongue,

Facial Muscles, General, Yes

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE.

left for examination

OPHTHALMOSCOPIC EXAM.,

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

Records kept

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 August Slauter

ERNST, PICKAR & CHAMBERS, DAVENPORT, IOWA.

1893

Sep 8 — Was brought here by Jacob Horn, Sheriff's deputy, with the following history. Patient comes from Poor-House of Dakota County; has had attacks for last 3 years, every 5 or 6 weeks; duration about 3 days to 2 weeks. Was not sent to hospital. First symptoms of this attack were manifested about 2 weeks ago, by indecent exposure, wandering from poor house &c. Disease seems to be increasing but there are rational intervals about every 5 or 6 weeks. Derangement is now shown in that he considers himself abused & maltreated. Goes about without any clothing. Walks away from poor-house & loses his bearings. Voracious appetite. Filthy habits. Is neither disposed to injure others, nor suicidal. Not known as to insane relatives. Neither he nor parents have been addicted to intemperance. No severe disease or head-injury known of. Has not been restrained or confined. Cause, approaching old age. He has not been under medical treatment. On personal examination are found tremors of tongue; also hernia. Talks continually about being abused by others. Cannot obtain any definite answers from him. Wants to go away. Appearance & manner were quiet. Patient stays up at nights; probably eats his own feces; undresses himself 15 or 20 times daily; puts clothes on wrong; picks up clothing of others that has been thrown away & uses it.

" 9 — Sept 8/93. On admission, is in a weak & tottering condition. Was put on B[d]. Bodily condition, dirty. Pulse 72. R 32. Appetite good; bowels regular. Has a bad hernia. Is troubled greatly with asthma; also some cough. Seems feeble-minded. Well behaved, but very stupid. Sep 9/93. Slept for several hours last night. AM B70, R 30. Slept several hours today. Is quiet & well-behaved. Talks freely; has the delusion that everyone is against him. Appetite good; bowels seem normal. Right arm is badly swollen; seems injured somewhat.

" 10 — Sep 10/93. Slept 8 hours last night. AM. Pulse 74. R 37; no cough noticed today; but he is troubled with shortness of breath from asthma. Patient wishes several privileges, such as wearing a skull-cap on ward; to lie in bed, with his clothes on &c; appetite continues good & bowels regular. Is cleanly in habits.

" 11 — Sep 11/93. Slept 6 hours last night; also sleeps for hours, during the day. AM. Pulse 72, irregular; R 34. Complains greatly of right hand paining him. He is querulous & difficult to please. Appetite fair. Bowels apparently normal. Sep 12/93. Continues to eat and sleep fairly well: Otherwise, no change

" 13 — present. Pulse (this Am.) 88. R 36. Sep 13/93. Was restless last night & only slept 4 hours; but as

" 14 — he sleeps much during the day, this is not unusual. Pulse 70, irregular; R 32. Sep 14/93. Slept 5 hours, last night. AM. Pulse 78. R 28. Is quiet & well-behaved. Appetite good; bowels regular; no cough noticed, for some days; Still complains greatly of right arm paining him; (arm has been put in a sling & pain is considerably relieved). Sep 15/93. AM. Pulse 62. R 28. Still well behaved, but

" 15 — quite positive, & wishes his own way. Still some pain in his right hand. Was examined in office, today. Is a very weak & infirm old man; very greatly troubled with asthma; also bad hernia; sight impaired; hearing very much so. Does not talk English & it is found very hard to make an

" 16/17 — examination. Sep 16/93. AM. Pulse 70. R 30. Sep 17/93. AM. Pulse 86. R 32. Has not complained so

" 18 — much of pain in his hand, the past 2 days. Sep 18/93. AM " 78 " 26. Occasionally troubled

" 19 — with asthmatic cough. Sep 19/93. Pulse is now about normal. Appetite good; bowels regular.

" 20/21 — Sep 20/93. Not much cough today. Sep 21/93. During this second week, has continued to rest & sleep fairly well at night, sleeps also, considerably, in the day time. Has been quiet & well-behaved, by day. Clean in personal habits. At times, troubled a good deal with asthma & coughing. Appetite has been good & bowels regular. Pulse abnormal. The swelling of his right hand has reduced considerably

" 30 — and is apparently becoming well, though, as yet, he does not use this hand. Sep 30/93. No noticeable change.

Personal and Medical History of August Slauter

1893

Oct 3/10 — Oct 3/93. Height 120½ lbs. Oct 10/93. Patient eats well & sleeps fairly. Swelling in right hand is

" 15 — slowly reducing, but he is still unable to use it. Bowels regular. Habits clean. Oct 15/93. Condition

" 31 — is unchanged. Oct 31/93. Hand is now reduced to its normal size but is painful when squeezed. — He cannot use it much. Bodily health is fair.

Nov 2/30 — Nov 2/93. Weight 122 lbs. Pulse 82. Nov 30/93. Apparently rests & sleeps well, at night. — Appetite good; bowels regular. No cough noticed. Still troubled with asthma, which he claims he has had for years. Otherwise, is in fairly good health. Has unimportant complaints, however. Is quiet and well-behaved. Talks freely & coherently. Habits cleanly. —

Dec 3 — Dec 3/93. Appetite continues good. Patient occasionally complains of being sick & wishes

" 15 — medicine, but this is chiefly caused by his asthmatic trouble. Dec 15/93. He continues quiet & well-behaved. Inclined to sleep a good deal during the day, and, unless watched, will sleep, at night, with his pants on. Has some peculiar notions; not satisfied unless his shirt is kept open at the throat. Talks & complains, a good deal, about his asthma. Appetite good. No cough noticed. Habits are clean. —

" 31 — Dec 31/93. No change & note since the above report. —

1894

Jan 1/31 — Jan 1/94. Wt 122 lbs. Pulse 80. — Jan 31/94. Above note of 31st Dec still holds good. —

Feb 1/28 — Feb 1/94. Wt 121 " " 80. — Feb 28/94. No noticeable change. Is demented. Habits clean.

Mar 1/7 — Mar 1/94. Wt 121½ " " 86. — Mar 7/94. This patient was committed here under "Law of 1893", recently declared unconstitutional. He was, today, Taken Out and Returned under a "new

" 19 — Warrant" from Chickasaw County. Mar 19/94. Received some blows, about the head & breast,

" 31 — today, from a fellow-patient (Thomas Miland). Mar 31/94. Appetite good; bowels regular; patient still suffers from his asthmatic trouble & has often difficulty in breathing, accompanied with a slight cough. Is well-behaved; makes few complaints. Talks a good deal about his breathing. Complains, at times, that he is too cold; at others, too hot. Is evidently weak-minded. Patient is cleanly in his habits, though somewhat untidy about his dress. —

Apl 1/30 — Apl 1/94. Wt 122 lbs. Pulse 72. April 30/94. No material change to note. —

May 1/31 — May 1/94. Wt 122 " " 84. May 31/94. General notes, for last month, back, still hold good.

June 1 — June 1/94. Wt 122 " " 88. Patient continues about as usual. Is becoming, however, more feeble.

" 30 — June 30/94. No apparent change, either mentally or physically. Still much troubled by asthma.

July 1 — July 1/94. Wt 118 lbs. Pulse 96. Patient was seized with spasms, today, & water was copiously cast

" 9 — of his mouth: was of a livid color & very sick; was put to bed, for a short time & sickness gradually left him. July 9/94. When walking across the hall carpet, today, he tripped & fell, striking his right hip on the floor. — hip & thigh were much bruised & discolored & patient seemed to have received quite a shock. As he

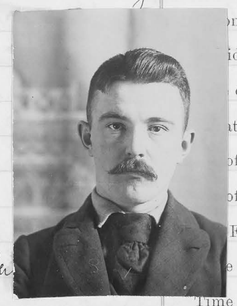
" 31 — was unable to walk he was carried, & put to bed. July 31/94. Patient has been steadily confined to his bed, since the 9th inst: appetite has fallen off considerably & he has become quite weak. Is also much troubled with Asthma & a cough. Seems failing very much. Mentally, no change requiring comment. (He has been sixty 23 days, during the month). —

Aug 1 — Aug 1/94. Wt 113 lbs (in bed). Pulse 98. Appetite & rather poor; bowels loose. Very greatly & continually troubled with asthmatic cough & shortness of breath. Patient is very weak & his weakness is gradually increasing. He is quite unable to stand alone & remains in bed, part of

(carried to 65)

LEIGHTY, PUGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3466.
Residence, Minnia Co. Minn.
Date Admission, 8th September 1893.
Admitted by, Dr. Phelps Hour, 11.30 A.M.
How Sent, H. L. Buck, Jof P, Minnia County.
Sex, Male
Age, 20 years
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Farmer
Degree Education, Common-School.
Profession Religion, not a church member
Habits, Not intemperate
Nativity, Warren, Minnia Co. Minn. (Father in Wales; Mother in Ky.)
Physicians Committing, Franklin Staples & E. D. Keyes
Correspondents, J. R. Howell, Minnia Minn
Family Physcn. Franklin Staples, M.D. Minnia. Minn.



No. for Year, 36.
Insane Relatives, Father's sister was insane
Cause Exciting, possibly effects of "Keely Cure".
Cause Predisposing, probably heredity
Form, Acute Mania.
[illegible]mpanying Bodily Disorder, Great Nervousness
[illegible]idal or Not, Not.
[illegible] of this Attack, Sept 2nd 1893.
[illegible]tion, 6 days or so
[illegible]of Attack, 1st
[illegible]of Admissions, 1st
[illegible] First Attack, 20 years
[illegible]e of Leaving, Jany 25. 94
Time in Hospital, 4 mos 17 days.
Result, Recovered

Crossed ✓ + ap Hyoscyc Liq. 6v.ii
1st, 60 Hyoscyc Hypody administered.

EXAMINATION ON ADMISSION.

Exd by Dr. Ely, Sept 15/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear at present
Quick or Sluggish, Quick now

MEMORY:
Past Events,
Recent Events, } Seems quite good now
Special Subjects,

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

REASONING POWER:
Ordinary Subjects,
Own Mental State, } Good, now
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Patient, at time of admission & for some days afterwards was in a "Spell", but at time of this examination he seems to have Completely recovered from it.

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

DELUSIONS:
Systematized or Not, None noted now
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Quite free

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Seems fairly good; somewhat thin
WOUNDS OR ABNORMALITIES, Probably none
TONGUE, Tremors, none Coatings, white Promptness Movement, Quite Prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, Good.
HEARING, Normal
COORDINATION, Arms, Inquiet nose, eyes shut, considerable inaccuracy; quite marked.
Legs, Standing, eyes shut, some swaying.
TREMORS, Hands, none Tongue, none
Facial Muscles, General, none
REFLEXES, Patellar, equal — about + — Dr. P's scale.
Other Reflexes,
ARTICULATION, ~~Hesitating~~, Quite good ~~Slurred~~,
FACIAL EXPRESSION, about normal now.
SENSIBILITY, Normal now
HEART, Sounds good
LUNGS, Sounds are good.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short ONSET GRADUAL OR SUDDEN, Sudden
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living, claims good health.
Father or Pat. Relations, father living " " } No history of heredity obtained.
Brothers or Sisters, one brother living " "

SIBLEY, PUGLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Sheriff Gay, attended by patient's brother, with the following history. There is no history of consanguinity but some of heredity (Father's sister was insane). This is first attack; occurring Sept 2d 1893. Was unruly, talkative, restless, sleepless: also had hallucinations. Disease seems increasing; no rational intervals. Derangement now shown by his being filled with a restless, sleepless activity; wants favorite articles for the Papers; buy all sorts of things &c &c. Is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Was, previously, rather quick-tempered. Neither he nor his parents have been addicted to intemperance. He has had no severe disease or injury to head, so far as is known. Mild, watchful restraint has been used. Has been treated with bromides, chloral - also Calomel cathartic.

On personal & examination, patient talked constantly in an irrational manner on innumerable subjects. Did not sit still but a few minutes, at a time. Appearance & manner, those of a man in a state of mild delirium & unable to sense what he said or did. Thinks his father & others are insane &c.

Sept 8 Sept 8/93. The patient is, on admission, found to be in fair physical condition. Was put on B[3] — Pulse 98. T @ 98.6. Bodily condition clean; was given a hot bath, with cold application to head. No injuries or peculiarities noted. Pt Has been very restless & noisy today, talking continually & incoherently: tried to run away several times; always wanting to get out of hall. Severy deluded. No cough noticed. Ate no supper

" 9 was violent and was put in seclusion for 30 minutes. Pulse 80. Sept 9/93. Slept 6 hours, last night. Was very quiet when awake. Am. Pulse 92. Slept 3 hours this forenoon: was very restless afterward. During afternoon was very quiet. Talks coherently, showing delusions. Was visited by brother. Wt. today, 147 pds.

" 10 Sep 10/93. Was very quiet, sleeping 8 hours, last night. Am. Pulse 78. Had a "spell" of talking & moaning during forenoon; thought he was dead & in "hell". In afternoon, conversed quite freely & was quiet. His

" 11 appetite is good. Bowels have moved. Sep 11/93. Again rested & slept well (8 hours) last night & was quiet. Am. Pulse 80. Seems greatly improved over his condition at time of admission. Talks freely; less delusional. Says "he is going to get well in 2 or 3 months". Seems fairly contented & to be in no hurry to get away.

" 12 Went out walking today. Bowels, apparently, regular. Sep 12/93. Am. Pulse 76. Is quiet & well behaved.

" 13 Talks quite freely & rationally. Appetite good. Does not walking regularly with the rest. Sep 13/93. Reads,

" 14 plays games, works some inward. Quiet & well-behaved. Pulse this Am, 80. Sep 14/93. Visited by uncle.

" 15 Sep 15/93. Was examined in office today. Mental activity was quite clear; memory & reasoning power quite good: no delusions noted; seemed to realize the condition he had been in for some days. At time of admission & for some days afterwards, patient was in a "spell", but at time of this examination, he seems to have completely

" 21 recovered from it. Sep 21/93. During this, the second week of his stay, patient has continued to rest & sleep well, uniformly 8 hours, each night. Pulse, for some days, has been about normal. Has continued quiet, well-behaved & gentlemanly in conduct. Clean, tidy & of good personal habits. Appetite has continued good and bowels, as a rule, have been regular. Was conversed freely & rationally; no delusions have been noted. Has spent his time, while in ward, in reading, playing games & has also assisted with ward-work. Has attended services in the Chapel. Makes no complaints & causes no trouble. Now that he is so much improved,

" 26 he seems somewhat anxious to go home. Physical health is good. Sep 26/93. Slept 6 hours. Was

" 27 sick & vomited several times, during the night. Ate too much. Sep 27/93. Has continued quiet and well-behaved. Free & rational in conversation. Neat, clean, tidy & of good personal habits. Was today

" 30 transferred to F[3] (the "Open-Ward"). Sep 30/93. Appetite inclined to be voracious; "wants a lunch between the meals" — Bowels somewhat inclined to be constipated & is given laxatives. Talks a good deal,

1893

Sep Contd 30 and sometimes incoherently and with delusions.

Oct 1 Oct 1/93. Was inclined to make himself very free about the "Centre", bothering and interrupting the Officers

" 5 and was moved back to B[3]. Weight 155 pounds. Pulse 78. Oct 5/93. Was today visited by his father.

" 8 Does not seem to do well as he was. Growing worse again. Oct 8/93. Has been noisy & out of bed the past

" 9 2 night, sleeping only about 4 hours in each. Has also been quite deluded. Oct 9/93. Very noisy and

" 10 frequently out of bed, last night. Was given a sleeping dose. Slept only 2 hours. Oct 10/93. Was again

" 14/17 very noisy, last night & slept only 4 hours. Oct 14/93. Is silly and troublesome today. Oct 17/93. Is

" 18 today better than he was. Talks quite freely & sensibly. Oct 18/93. Has a boil on his wrist. Says "he

" 30 was tipsy-like". Oct 30/93. Has seemingly recovered from his recent "spell" - Talks quite freely. Appetite & physical condition are good & patient is gaining decidedly in weight. Looks somewhat worn.

Nov 1 Nov 1/93. Was very restless, the greater part of last night; slept but 2 hours. Wt today, 161 pds (is still gaining

" 3 in flesh). Pulse 76. Nov 3/93. Restless & noisy last night; slept some. Has been worse for past 2

" 4/7 days. Nov 4/93. Is quite noisy today. Nov 7/93. Has been sleeping only 3 or 4 hours, on each of last 2 nights; has also been very noisy, by day; had a fight with a fellow patient (O'Connor) & received a black eye. Half realizes his own condition. Says "he is sick; is kind of crazy &c". Nov 10/93. Has

" 10 continued to sleep very poorly (only 3 or 4 hours) each night; has also been noisy by day, but not so much so as for past few days. Is full of delusions. Talks of "detectives" & "prize-fighters &c".

" 14/18 Visited by brother today. Nov 14/93. More quiet - nearly over "spell". Nov 18/93. Has about now

" 22 recovered from his "spell"; appears sensible, now. Nov 22/93. Visited by friends, today. —

" 24 Nov 24/93. Attended an entertainment (musical) at Opera House in the city, this evening.

" 28 Nov 28/93. Is in a "beginning spell". Restless & noisy by night; extremely sulky, by day.

Dec 3 Dec 3/93. During this "spell" also, he is acting about as in previous ones; noisy, restless, sleeping poorly &c. Appetite has become ravenous. Wt. today, 168 pounds (a further gain in flesh);

" 6 Pulse 80. Dec 6/93. Is becoming much quieter & gradually coming out of "spell".

" 8/11 Dec 8/93. Is now over "spell" & seems fairly rational. Dec 11/93. Visited, today, by brother.

" 15 Dec 15/93. Appetite good. Seems quite sensible now. Talks freely, plays games &c. Reads some.

" 26 Works inward. Is clean, tidy & of good personal habits. Dec 26/93. Patient has run over usual time between "spells"; has been quiet & well-behaved for some time. Works in the dining-room. Received Xmas Present from home, which pleased him much.

" 28/31 Dec 28/93. Transferred to F[3] during the day time. Dec 31/93. Appetite good. Bowels regular. Physical Condition very good. Quiet & well-behaved. Has had no "spells" for some time. Habits clean & tidy. Seems quite fairly contented here.

1894

Jan 1 Jan 1/94. Has gained considerably in flesh, for some time past. Still has privilege of being on the "Open Ward" in the day time, but sleeps on B[3]. Is pleasant & agreeable in conversation & very gentlemanly in manner. Health very good. Habits clean.

" 25 Jan 26/94. Was taken home by his brother today, on trial. Is said to have shown some vacillation & to have been less stable, this past week. —

Crossed off the Record; illegally committed —

Personal and Medical History of C. E. Lewis (A)

GIBERT, PICLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3468.
Residence, Co. Jail, Ramsey Co. Minn.
Date Admission, 8th September 1893.
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, Jno. B. Olivier, Jef. P. Ramsey County
Sex, Male
Age, 35 years.
Civil Condition, single
Children, none
Age Youngest Child,
Occupation, R. R. Clerk.
Degree Education, Good, business education
Profession Religion, House of Hope
Habits, Not intemperate
Nativity, Shellypalle, Indiana (parents born in U.S.)
Physicians Committing, Arthur B. Lucke & D. C. Jones.
Correspondents, Wm. Helen J. Bowler, H. Geyer San Francisco Cal.
Wm. Annie Creswell, Atchison.

No. for Year, 38.
Insane Relatives, none
Cause Exciting, mistake in his part, causing R.R. accident
Cause Predisposing, chronic
Form, Paranoia
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, unknown.
Date of this Attack, 10 years ago
Duration, 10 years
No. of Attack, not known (depressed past 10 years)
No. of Admissions, 1st
Age First Attack, about 25 (?)
Time of Leaving, Feb. 7th 94
Time in Hospital, 4 mo. 21 ds.
Result, Unimproved

Discharged from Hospital Feb. 7th 1894 Unimproved

EXAMINATION ON ADMISSION.

Exam'd by Dr. Eby, Sept 9/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, quite quick
MEMORY:
Past Events, Recent Events, Special Subjects, seems quite good
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Allusive
REASONING POWER:
Ordinary Subjects, seems good
Own Mental State, thinks himself quite sane
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Tells a long story of his trying to get work; of his securing it & doing it satisfactorily to his employers. Yet of his being continually put out of position; claiming this to be the work of R.R. officials &c

EMOTIONAL STATE:
Normal, Calm, normal but
Indifferent,
Exalted,
Depressed, somewhat
DELUSIONS:
Systematized ~~or Not~~, Special Subjects, Transitory or Not, of being continually persecuted by R.R. officials –
HALLUCINATIONS: none detected
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, voluble

Personal and Medical History of C. E. Lewis

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, seems quite fair.
WOUNDS OR ABNORMALITIES, none noted.
TONGUE, Tremors, some Coatings, none Promptness Movement, quite prompt
PUPILS, Equality, equal Size, normal
Response Light, yes Accommodation, yes
SIGHT, good
HEARING, some slight impairment
COORDINATION, Arms, finger to nose, eyes shut, some inaccuracy; more marked with right hand.
Legs, stands, eyes shut, quite firmly.
TREMORS, Hands, very slight Tongue, some
Facial Muscles, none noted General, none noted
REFLEXES, Patellar, equal – abnormal –
Other Reflexes,
ARTICULATION, ~~Hesitating,~~ quite good ~~Slurred,~~
FACIAL EXPRESSION, somewhat depressed
SENSIBILITY, seems normal
HEART, sounds are good
LUNGS, sounds are good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, some 10 years ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother dead – does not state cause.
Father or Pat. Relations, father dead – 78 – was very nervous of late years.
Brothers or Sisters, 3 sisters; all living; claims healthy.
no history of heredity obtained

EGBERT, PUCLAS & BRAMBERG, DAVENPORT, IOWA.

1893

Was brought here by P.C. Haas, deputy Sheriff, with the following history. There is no history of either consanguinity or heredity. Not known if first attack or not (but is probably 1st); has been depressed the past 10 years, but never sent to hospital. First symptoms of this attack were manifested 10 years ago; after causing a R.R. accident, by mistake, he commenced to labor under the delusion the R.R. Co was persecuting him. Disease seems stationary. He is never rational. Derangement is now shown by his imagining that he is the subject of persecution of the R.R.'s. He cannot assign any reason for same. His mental difficulty dates from an accident that occurred 10 years ago, owing to a telegraph he sent, causing 2 trains to collide, with consequent loss of life. If disposed to injure others or suicidal, is unknown. Is not disposed to filthy or destructive habits. Neither he nor his parents ever addicted to intemperance; not subject to any venereal disease &c or injury to head. He has been confined in County Jail for past week. Cause of disease is the aforesaid R.R. accident. Has not been under medical treatment. On personal examination, is found well-nourished. Seems all right, except in subject of his delusion. He says the R.R. Co are persecuting him for some unknown reason, except that the General Managers & Presidents of the different roads are jealous of his abilities.

Sept 8 Sept 8/93. On admission, is in fair physical condition. Has pupil on R'd'. Pulse 68 R 17 T @ 97. Bodily Condition clean.

" 9 Sept 9/93. Did not sleep well last night; said "patients made so much noise". Aft. Pulse 74 R 16 T @ 96. Appetite good; bowels regular. Is a little confused; Restless, most of the day, walking the floor a good deal. Does not care to say anything concerning himself. Was examined, in office, this afternoon. Thinks himself quite sane. Showed delusions of being continually persecuted by R.R. officials. Dwelt at length, on these points. Conversation quite voluble. Sept 10/93. Did not rest well, last night. Aft. Pulse 80 R 16

" 10 T @ 97. Quite restless, walks the floor most of time; asks many questions about the Hospital; does not,

" 11 however, seem to know what kind of an institution this is. Sept 11/93. Has been quiet today; not saying

" 12 much. Complains some of bowels troubling him. Pulse 79 R 16 T @ 97. Sept 12/93. Quiet & well-behaved;

" 13 walking; agreeable & pleasant in manner. No material change, so far. Pulse this Am 67 R 16 T @ 96.5.

" 14 Is very anxious to do some work in the offices. Sept 13/93. Aft. Pulse 62 R 16 T @ 97. Is cheerful and

" 15 pleasant. Does considerable reading. At times, quite free in conversation. Sept 14/93. Aft. Pulse 69 R 16

" 16 T @ 97. Is working in harness today; seems more contented. Sept 15/93. Finding this work too hard, he

remained in ward today. Aft. Pulse 58 R 16 T @ 97; Keeps about the same; good natured & cheerful.

Says "now that he is here, he does not let matters trouble him"; though he is very desirous of knowing why

and by whom he was sent here; also wished to see Dr K so that he can fully explain his case to him.

" 16 Sept 16/93. Says "he did not sleep well last night & that his rest has been much disturbed at

night ever since his Commg here". Aft. Pulse 66 R 17 T @ 96. Has been uneasy & restless today; keeping

a good deal by himself. Appetite is poor. Presses his request to go down & work in the offices. —

" 17 Sept 17/93. Slept well last night. Aft. Pulse 78 R 17. Is not so uneasy & restless as yesterday.

" 18 Sept 18/93. Aft. Pulse 104. R 20. Has been very restless & uneasy all day; did not remain still, any

" 19 length of time. "Wanted to see the Dr about his matters". Sept 19/93. Sleeps poorly, he says. Aft. P 76

R 17. Quite restless today; seems to worry about cause for his being sent here & the persons who sent him.

" 20 Walks the floor a good deal. Does some reading. Appetite is poor. Sept 20/93. Slight change today; is quiet,

" 21 cheerful & pleasant. Remained in his room, most of the day, reading. Does not rest well at night.

Pulse this morning was 80. R 17. Sept 21/93. Aft. Pulse 83. R 16. Is restless today, walking the floor,

" 22 much of the time. Appears somewhat excited. Is evidently worrying about being here, now that he has

found out the nature of the institution. Sept 22/93. Still complains of not resting well, at night.

1893

Sept 22 Aft. Pulse 96. R 19. Conduct & behavior, by day, are variable: at times, very nervous, restless & seemingly excited; at others, quiet, pleasant & sociable: at times, talking about his business & the way he has been persecuted by R.R. officials &c"; again saying nothing about his affairs. Every desirous to have an interview with the medical superintendent & explain his case fully to him; also is greatly troubled about who, and the cause that, sent him here. Has, at all times, been clean, tidy & of good personal habits; does not walking with the rest. Pulse has become more normal.

" 23 Sept 23/93. Has had no "spells" so far, but is, at times, quite nervous & restless. Complains of not sleeping

" 30 well, at night. Sept 30/93. Is a little restless in the mornings, but, on the whole, seems more contented. Has, the past day or so, been working outside in the greenhouse or on the lawn.

Oct 1 Oct 1/93. Wt 166 pounds. Pulse 95. Oct 11/93. Has continued quiet & well-behaved - Clean, tidy & of good personal habits. Was, today, transferred to H 3, the "Open Ward". Is now keeping

" 31 with work in the Store-room. Oct 31/93. Appetite good; bowels normal. Does not work any in the Store now. Is very restless; can scarcely sit still a moment. Said she of house in the Store-room. According to report, was quite a nuisance in St Paul, following about officials with his stories of injustice & persecution. Is very vain and conceited. Boasts a great deal of his abilities &c. Is continually admiring himself in the glass &c.

Nov 14/30 Nov 14/93. Wt 167½ pds. Pulse 80. Nov 30/93. Appetite good; bowels regular. Is very restless; admires himself a great deal. Does no work. Is gentlemanly in manner.

Dec 1/15 Dec 2/93. Wt 170 pounds. (& still gaining some in flesh.). Pulse 80. Dec 15/93. Does not

" 20 change much, if any. Is paranoiac in form; walking about restlessly; not setting down well to reading, writing or any occupation. Health seems good. Dec 20/93. Continues

" 31 very restless; is making himself somewhat more free than usual about the Centre & officers; becoming rather meddlesome. & Was today moved to B 3. Dec 31/93. Is very restless. Goes about ward in an aimless manner; asking many silly questions & requesting many favors. Continually admiring himself in the glass. Appetite fair. Bowels regular. Complains of not sleeping well, at night. Does no work. Physical health good.

1894

Jan 2/15 Jan 2/94. Weight 169 pds. Pulse 104. Jan 15/94. Continues about the same.

" 31 Jan 31/94. Still very nervous & restless; the least thing appears to excite him. Recently has been again given parole & is now out about the grounds the greater part of the day. — Still disinclined to help any with work on ward. Is clean & neat in personal habits.

Feb 2 Feb 2/94. Wt 173 pds. Pulse 78. Physical health continues very good. — —

" 7 Feb 7/94. Made his escape, while out on parole. Had been quite quiet & about as usual.

Crossed off the Records; was illegally committed.—

Personal and Medical History of Charles Olson #2
(Charles Victor Olson)

EGBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3469
Residence, 23 - 1st St. So. Minneapolis
Date Admission, 9th September 1893
Admitted by, Dr. Phelps Hour, 7 PM
How Sent, John A. Steele, Jof C. Hennepin County
Sex, Male
Age, 35.
Civil Condition, Single
Children,
Age Youngest Child, —
Occupation, Laborer
Degree Education, Moderate
Profession Religion, Lutheran
Habits, Not definitely known
Nativity, Sweden (Parents also born there).
Physicians Committing, Leo M. Crafts & R. J. Steel.
Correspondents, patient gives (Brother) John Olson, Olive, Polk Co. Iowa
(Brother) Oscar Olson, Des Moines Iowa.

No. for Year, 39.
Insane Relatives, Brother in Asylum in Iowa now
Cause Exciting, not known
Cause Predisposing, possibly heredity
Form, Chronic Mania
Accompanying Bodily Disorder, not known
Suicidal or Not, unknown
Date of this Attack, not known
Duration, not known
No. of Attack, cannot be determined
No. of Admissions, 1st
Age First Attack, unknown
Time of Leaving, Nov 30 93
Time in Hospital, 3 mos 21 d
Result, Rec'd.

Crossed from Alphabetic List April 1st, 1897, because illegally committed.

EXAMINATION ON ADMISSION.

Exd by Dr. Ely Sept 15/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Fairly quick
MEMORY:
Past Events,
Recent Events, Good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dulled
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State, Doesn't think there was any reason for sending him here
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Says he is feeling a good deal better than when he came here. Does not seem to realize his condition, and denies delusions he is said to have had.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Yes
Exalted,
Depressed, Slightly
DELUSIONS:
Systematized or Not, Denies those stated in history papers
Special Subjects,
Transitory or Not,
HALLUCINATIONS: Denies any
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Fairly free

Personal and Medical History of Charles Olson #2
(Charles Victor Olson)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Seems fairly good.
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, None Coatings, Some Promptness Movement, Fairly prompt
PUPILS, Equality, equal Size, dilated
Response Light, Yes Accommodation, Yes
SIGHT, Probably good
HEARING, Fairly Good
COORDINATION, Arms, Fairly good. Finger to nose, eyes shut, fairly correct. Standing, eyes shut,
Legs, Slight swaying.
TREMORS, Hands, None Tongue, None
Facial Muscles, General, None noted
REFLEXES, Patellar, Equal — abnormal.
Other Reflexes,
ARTICULATION, Hesitating, Quite good Slurred,
FACIAL EXPRESSION, Slightly depressed.
SENSIBILITY, Normal
HEART, Sounds good; quite slow
LUNGS, Sounds are good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,		Clean,	Careless,
BOWELS, Normal,		Constipated,	Irregular,
APPETITE, Good,		Medium,	Poor,
SLEEP, Good,	Seems kept	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 — aged 50 — Thinks lung fever.
Father or Pat. Relations, Father living; denies is healthy
Brothers or Sisters, 2 brothers living; denies healthy; 1 sister in Nebraska; healthy

At first, gave no history of heredity or nervous trouble; but, on questioning carefully, admits his brother been now in an Insane Asylum in Iowa.

Personal and Medical History of Charles Olson #2

(Charles Victor Olson)

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here, in due form, by a Sheriffs officer. History accompanying patient is rather meagre & indefinite. There is no history of consanguinity. He now has a brother in Asylum in Iowa. As to number of attack, if previously sent to Hospital, when first symptoms of this attack were manifested, State of the disease, disposition to injure others, suicidal propensities, previous peculiarities, if he has been subject to any severe disease or injury to head, supposed cause of the disease, nothing is known nor can it be ascertained. Symptoms were first shown by the delusion of ownership of House. Derangement is now shown in the belief that a man from above talks with him; tells him he owns a house and lot; (Entirely imaginary). Also by religious hallucinations. Is going to get a Bible. Spends much time praying. He is not addicted to filthy or destructive habits. Father was a moderate drinker. He has not been restrained or confined, nor under medical treatment. On personal examination, answers questions rationally; Appears stolid. Seems to act irrationally. Holding hands over head for Holy Water &c and to talk incoherently, at times. Said "the man above told him he owned a house & lot & told the people to vacate". Held up his hands for Holy Water. Stood for several minutes holding the hands elevated in a mechanical manner, almost cataleptic. Was stiff & constrained and appears dazed & speaks in a machine-like way.

Sept 9 Sept 9/93. On admission, Respiration 18. Pulse 58. R 24. Temp not taken. Apparently, is in good physical condition.
" 10 no peculiarities or injuries noted. Sep 10/93. Sleeps soundly at night; AM. Pulse 54. R 23. Appetite good; bowels
" 11 appear regular: no cough noticed. Is quiet and well-behaved. Talks coherently; answers questions intelligibly and without hesitation. No complaints or injuries, to note. Sep 11/93. Rested & slept well, last night. AM. P 80.
" 12 R 22. Appetite still good; bowels regular: no cough or bodily ailment noticed. Well-behaved; quiet; talks but
" 13 very little; "wishes to leave the Institution". Sep 12/93. AM. Pulse 48. R 20. Continues about the same from
" 14 day to day. Is apparently becoming more reconciled to his surroundings. Sep 13/93. No change to note. AM P 60
" 15 R 18. Sep 14/93. Sleeps well at night. AM. Pulse 52. R 20. Talks but little. Makes no complaints. Habits clean.
Sep 15/93. AM. Pulse 60. R 22. "Does not understand why he is kept here"; says "his mind is all right". Was examined today, in office. After considerable hesitation, admitted that his brother Oscar was an Insane
" 16 Asylum in Iowa. Did not seem to realize his condition & denies the delusions & hallucinations mentioned in
" 19 his "history paper". Conversation was coherent & fairly free. Sep 16/93. AM. Pulse 60. R 20. Well-behaved
and quiet, inward. Goes out walking daily. Sep 23/93. During this, the second week of patients stay here, he has continued to rest and sleep well, at night. Has also continued quiet & well-behaved by day.
Appetite Good; bowels normal; Pulse & temperature have also become normal. Has been clean in personal habits. Talks quite readily & rationally. No change noticeable in either his mental or physical condition. No delusions or hallucinations have, as yet, been detected. Patient does not yet seem to
" 30 realize his own condition. Sep 30/93. no noticeable change in patients condition.
Oct 3/ Oct 3/93. Weight, today, 164 pounds. Oct 17/93. Appetite good. Bowels regular. Sleeps well at
" 17 night. No cough noticed or other bodily ailment. Quiet, well-behaved. Talks freely and in an
" 31 intelligent manner. Is cleanly in his habits. Oct 31/93. Patient is in the same good physical health as already reported and he has shown no delusions or incoherence.
Nov Nov 1/93. Wt 174½ pds (a very marked gain in flesh in past month). Pulse 78.
" 30 Nov 30/93. Appetite good; bowels regular. No cough or other bodily ailment noticed. Patient has been quiet & well-behaved. Talks freely & quite rationally since admission. Till today, he spoke of feathers falling upon him, (when in his former home), as fast as he could pick them off, till he reached Dodge Centre, when they ceased falling. Habits have been cleanly. Patient is in good bodily health. Sent out on trial today.

Crossed off the Record – Illegally committed

Personal and Medical History of August Slauter.

Age From 56

Aug 1 the time & part, sitting in a chair. He is quietly behaved. Complains of pain caused by injury to hip & thigh – Talk is puerile & incoherent, partly – To day, patient had soiled his shirt & bed clothes and was taken into bath-room & bathed – after being bathed, he was placed in a chair to be dried off, as he could not stand, & when drying patient, attendant observed him to be breathing laboriously & some water & small portions of bread & unmasticated food were vomited by patient – He then began to take longer breaths & turned of a livid color. – Attendant summoned the Physician, who was in attendance, in from 2 to 3 minutes. Patient hovered, sank rapidly & died at 2 P.M.

– Died –

Andrew Jensen

From 4.

1894
Oct 1/ Oct 1/94. Wt 189 pds. Pulse 94. Oct 31/94. Patients Condition about the same for some months past.
Nov 1/30 Nov 1/94. Wt 193 " " 90. Dec 1/94. Wt 192 pds. Pulse 82: Jan 1/95. Wt 193 pounds. Pulse 84. —
Dec 1 Jan 31/95. Appetite good; bowels regular: no cough noticed; patient appears to be in fairly good health; talks
1895 freely & rationally. Is well-behaved: makes no complaints. Is cleanly in his habits. —
Jan 1/31
Feb 1 During these 3 months, there has been no special change noticeable – He has kept in quite good flesh
Apl 30 and health, for him. (Wt Feb 1/95. 195 pds. P 72: Wt Mar 1/95. 197 pds. P 73: Wt Apl 1/95. 202 pds. P 82).
Has been quiet & well behaved. No complaints or injuries to report: talks in a rational manner. Is cleanly.
May 1/31 May 1/95. Wt 202 pds. Pulse 86. May 31/95. Is well-behaved: makes no complaints: talks easily and rationally: is somewhat weak-minded, however, & childish: Cleanly in his habits and is
June 1/ in good physical health. June 1/95. Wt 202 pds. Pulse 88. June 30/95. no change to note.
July 1/31 July 1/95. Wt 200 pds. Pulse 92. July 31/95. Above note, for several months back, Still holds good.
Aug 1/31 Aug 1/95. Wt 202 " " 96. Aug 31/95. Bowels quite frequently constipated: require cathartics.
Does not walking, but has to be led on account of blindness (?): Complains of chills, at times. No
Sept 1 Change noted, mentally. Sep 1/95. Wt 194 pds. Pulse 100. Complained of being sick & went to bed in P.M.
" 2 refused supper: was given Seidlitz-Powder. Sep 2/95. Refused to get out of bed, but after getting him up he drank a
" 3/30 cup of Coffee. refused solid food – Bowels moved. Sep 3/95: Much better: not walking, today. Sep 30/95: keeps about the same, from month to month: Cheerful & contented, at present: has been talking about his son, who, he says, promised to come after him. "Wants to know when Dr K. will let him go home". Oct 1/95. Wt 193 pds P 100
Oct 1 Oct 30/95. Still no change from what is generally reported above. Seems Contented: Makes no Complaints
" 30 Nov 1/95. Wt 197 pds. Pulse 94. Dec 1/95. Wt 203 pds. Pulse 64. Jan 1/96. Wt 205 pds. Pulse 86.
Nov 1 Jan 2/96. During latter part of December, Patient suffered from a sore & inflamed eye: under treatment
Dec 1 it soon got well again. Condition does not Change any. He seems quite rational: talks freely
1896 in the Danish language: neat & clean in dress: behavior good: walks about inward: Appetite good:
Jan 1/31 bowels regular. Sleeps well. Makes no Complaints. Feb 1/96. Wt 204 pds. Pulse. Feb 29/96. No change
Feb 1/29 noted: Very quiet: sits in one place, most of the day, unless compelled to move: does not vomit, as he is nearly blind: Is clean & well-behaved. Mar 1/96. Wt 205½ pds. Pulse. March 31/96. No change during month.
Mar 1/31 Apl 1/96. Wt 204½ pds. Pulse. Apl 3/96. treated by friend. Apl 10/96. Has been constipated lately the past few days. Cathartics & salts
Apl 1/ Caused no action of bowels: was put to bed. Apl 18/96. Still ailing. Pulse 76 95° R 24. Complains of pain in back. Plaster applied
" 18 Apl 30/96. Still in bed: cannot walk: Complains of pain over whole body. Eats but very little. bowels moving. Sleeps considerably during day & night.
" 30

Personal and Medical History of Charles Nelson

ROBERT, FOLAR & CRAWBACK, DAVENPORT, IOWA

Whole No. 3470.
Residence, Itasca, Minn.
Date Admission, 9th September 1893
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, C. B. Collister Jof P. Itasca County.
Sex, Male
Age, 56 Years
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Laborer
Degree Education, Very limited
Profession Religion, Not a church Member
Habits, Intemperate for years –
Nativity, Norway (Parents also born there).
Physicians Committing, D. S. Cummings & F. A. Swartwood
Correspondents, (Says) Has no friends in this Country and cannot give address of any in Old Country.



No. for Year, 40
Insane Relatives, not known
Cause Exciting, Intemperance
Cause Predisposing, not given
Form, Chronic Mania
Accompanying Bodily Disorder, none noted
Suicidal or Not, Not
Date of this Attack, Sept 4/93
Duration, about 5 days
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 56 years
Time of Leaving, June 16. 1896
Time in Hospital, Two yrs. nine mo 7 da.
Result, Discharged Jan. 5. 97. Recovered.

EXAMINATION ON ADMISSION.

Exd by Dr. Ely. Sept 5/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Fairly Clear
Quick or Sluggish, Somewhat Sluggish
MEMORY:
Past Events, Probably good
Recent Events, Seems fairly good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dulled
Correct or Illusive,
REASONING POWER:
Ordinary Subjects, fairly good
Own Mental State, Perverted
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Says was sent here because some one outside wanted to kill him – Seems dull & depressed. Talks only in answer to questions – Somewhat dull of comprehension –

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Yes
DELUSIONS:
Systematized ~~or Not~~, fears "of being killed" –
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None detected
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent in form
Voluble or Reticent, Answers questions fairly freely.

Personal and Medical History of Charles Nelson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Fairly good.
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Some fine Coatings, some Promptness Movement, Slightly Sluggish
PUPILS, Equality, Equal Size, about normal
Response Light, Yes Accommodation, Yes
SIGHT, Probably some impairment
HEARING, Impaired some.
COORDINATION, Arms, Fairly Good. Inspects nose, Eyes Shut, finite good.

Case No. 3470. Chas. Nelson. Vol. 25.

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, Sad.
SENSIBILITY, Normal
HEART, Sounds are good
LUNGS, Sounds are good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother dead – Does not know cause.
Father or Pat. Relations, Does not know if he had a father.
Brothers or Sisters, Some in old Country.
Does not seem to know anything about his family – says he did not live at home much.

Personal and Medical History of Charles Nelson

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3470.
Residence, Itasca, Minn.
Date Admission, 9th September 1893.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, E. B. Collister Jof P. Itasca County.
Sex, Male
Age, 56 years
Civil Condition, single
Children,
Age Youngest Child,
Occupation, Laborer
Degree Education, very limited
Profession Religion, Not a Church member
Habits, Intemperate for years
Nativity, Norway (parents also born there).
Physicians Committing, D.S. Cummings & F.A. Evans
Correspondents, (Says) Has no friends in this country and cannot give address of any in Old Country.

No. for Year, 40.
Insane Relatives, not known
Cause Exciting, Intemperance
Cause Predisposing, not given
Form, Chronic Mania
Accompanying Bodily Disorder, none noted
Suicidal or Not, not.
Date of this Attack, Sept 4/93
Duration, about 5 days.
No. of Attack, 1st



EXAMINATION ON ADMISSION.

Exd by Dr Ely - Sept 5/93.

MENTAL CHARACTERISTICS.

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

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

PERCEPTIVITY:
Alert or Dull, Dulled
Correct or Illusive,

REASONING POWER:
Ordinary Subjects, fairly good
Own Mental State, perverted
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Says was sent here because someone outside wanted to kill him. Seems dull & depressed. Talks only in answer to questions - somewhat dull of comprehension.

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

DELUSIONS:
Systematized ~~or Not~~, fears "of being killed"
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none detected

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent in form
Voluble or Reticent, Answers questions fairly freely.

Personal and Medical History of Charles Nelson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Fairly good.
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, some fine Coatings, some Promptness Movement, Slightly Sluggish
PUPILS, Equality, Equal Size, about normal
Response Light, Yes Accommodation, Yes
SIGHT, Probably some impairment
HEARING, Impaired some.
COORDINATION, Arms, Fairly Good. Inject to nose, Eyes shut, quite good.
Legs, Staving, Eyes shut, some swaying.
TREMORS, Hands, some Tongue, some fine
Facial Muscles, General, ~~none~~ noted
REFLEXES, Patellar, Equal; about 3 on D & P Scale.
Other Reflexes,
ARTICULATION, ~~Hesitating;~~ quite good Slurred, Foreign accent
FACIAL EXPRESSION, Sad
SENSIBILITY, Normal
HEART, Sounds are good
LUNGS, Sounds are good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Records kept 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 dead - Does not know cause.
Father or Pat. Relations, "Does not know if he had a father".
Brothers or Sisters, Some in old Country.
Does not seem to know anything about his family - says he did not live at home much.

Personal and Medical History of Charles Nelson.

HERBERT, FISLER & CHAMBERS, DAVENPORT, IOWA

1893

Has brought here by Sheriff's Officer E.O. Latham, with following history. There is no history of insanity; no knowledge as to heredity. This is 1st attack; Symptoms manifested Sept 4/93 (about 5 days ago) He began wandering about, refusing to eat or sleep, & imagines that some one is trying to kill him. Disease seems to be increasing; no rational interval so far. Derangement now shown as about stated. He neither disposed to injure others, nor suicidal, nor filthy nor destructive. He has never been very bright, but has shown no predominant passions. Has been, for years, considered by many people as deranged. Has been intemperate, years. Has not been subject to any severe disease or injury to head. Has not been restrained or confined. The supposed cause of the disease is Intemperance. He has not been under medical treatment. On personal examination, he acts indifferent; averse to conversation; & constantly fears violence from others. He said "a man is trying to kill me with a knife". Appearance & manner, stupid & indifferent.

Sept 9 — Sept 9/93. On admission, is found to be in fair physical condition. Has put on 3 lbs. Pulse 100. T. 99.2. Body, clean at bath, was quite dirty; no injuries or peculiarities noted. Sept 10/93. Slept 8 hours, last night & was quiet. AM. 8.15 T. 98.6. PM. Pulse 96. T. 98.8. Has some cough. Sits quietly on a seat most of the time, while in hall; talks but little; "thinks some one is going to kill him". No complaints or injuries to note. Sept 11/93. Was quiet and slept 5 hours, last night. AM. Pulse 88. T. 99. PM. Pulse 88 T. 98.8. Appetite only medium. Talks but little. Is depressed. Sept 12/93. Was restful, sleeping 8 hours, last night. AM. Pulse 88 T. 99.2 PM. Pulse 86 T. 99. Is very quiet; well-behaved. Appetite good. Talks some, but is still depressed. Sept 13/93. Was quiet and slept 7 hours, last night. AM. Pulse 86. Appetite only medium. Very quiet during the day; seldom speaks. Sept 14/93. AM. Pulse 84. Has been somewhat constipated since coming. Bowels moved to day. Habits clean. Sept 15/93. Sits quietly by himself, most of the day. Is depressed. Appetite only medium. Was examined in office to day; still holds his delusions (as above mentioned). Was found to be somewhat stupid & dull of comprehension (see further notes). Sept 22/93. Since last note on this subject, patient has been resting & sleeping well, uniformly 8 hours, each night. Has been very quiet by day; well-behaved; personal habits are good. Keeps by himself on a seat most of time, when in ward, or walks about hall slowly. Is depressed. Talks but little. Still holds to his delusions, though he may not so often speak of them. Appetite is very changeable; most of the time, however, it is only medium. Pulse has been about normal. Sept 23 — Sept 23/93. Slept well, last night. Looks somewhat brighter today. Talks some with his countrymen. — Sept 24 — Sept 24/93. Was today visited by Rev. Mr. Anderson, after service in Chapel. Sept 30/93. Seems to be improving. Appetite good. Bowels regular, as a rule. Talks some. Keeps with the ward-work. Oct 3/30 — Oct 3/93. Weight 147½ pounds. Pulse 80. Oct 20/93. Continues to improve some. Health good. Oct 20 — Oct 30/93. Appetite good. Talks freely when spoken to. No delusions noted. Works some in ward. Is improving & is in good physical condition.

Nov 1 — Nov 1/93. Wt 138½ pds. (Has lost 9 pounds in past month, without apparent cause). P. 72. Nov 8 — Nov 8/93. Always quiet & well-behaved. Talks freely. Works well a ward. Goes walking. Nov 13/30 — Nov 13/93. Physical condition good. Nov 13/93. Transferred to B3. today. Nov 30/93. Continues quiet and well-behaved. Plays at games. Works well. Appears to be quite contented.

Dec 2/15 — Dec 2/93. Wt 139 pds. Pulse 72. Dec 15/93. Apparently rests & sleeps well, at night. Quiet and well-behaved, at all times. Does not seem to have variations in behavior. Appetite fair; bowels regular. Works industriously & intelligently on A3 (Open Ward). While in his own ward, is much inclined to be alone. Seldom speaks. Does not play or take part in games. Personal habits good.

Personal and Medical History of Charles Nelson

1893

Dec 31 — Dec 31/93. Apparently rests and sleeps well, at night. Appetite good. Bowels regular. Quiet and well-behaved, at all times; pleasant & agreeable. A willing worker, daily, on A3 ("the Open Ward"). Does not seem to have any "Spells". Reticent; speaks only when spoken to.

1894
Jan 7/31 — Jan 2/94. Wt 141 pds. Pulse 84. Jan 31/94. No change from Dec 31/93 note. Works well, daily.
Feb 7/28 — Feb 7/94. Wt 141½ " " 92. Feb 28/93. Lives along quietly here. Appears quite contented. Works well.
Mar 3 — Mar 3/94. Wt 140½ " " 92. This patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned under new warrant" from Olmsted County. — Mar 31/94. Apparently rests & sleeps well, at night. Appetite good; bowels regular. Always quiet and well-behaved. Has no "spells". Sometimes to be by himself. Plays cards & checkers. Works willingly in the hall. Personal habits are good.
April 2/30 — April 2/94. Wt 142 pds. Pulse 83. April 30/94. Continues about the same from month to month. Works well & intelligently in the ward. Always well-behaved. Seems quite contented here.
May 3/31 — May 3/94. Wt 141 pds. Pulse 74. May 15/94. No noticeable change: a good & willing worker in the ward. Was, to-day, transferred to A4 an "Open-Ward". May 31/94. Always about the same. Has no "spells". Works well & willingly. Is always quiet & well-behaved; causes no trouble. Habits are cleanly.
June 4/30 — June 4/94. Wt 145 pds. Pulse 85. June 30/94. No change & no report in either mental or physical condition.
July 4/31 — July 4/94. Wt 141 " " 74. June 31/94. Patient does not change any, from month to month. always well-behaved. Works industriously. very reticent, but answers questions readily. Is in quite good physical condition. Habits are cleanly. He seems quite contented here.
Aug 8/31 — Aug 8/94. Wt 136 pds. Pulse 75. Aug 31/94. Keeps about the same, from month to month.
Sep 1/30 — Sep 1/94. Wt 140 " " 74. Sep 30/94. Uniformly quiet & well-behaved. A good & willing worker.
Oct 5/31 — Oct 5/94. Wt 142 " " 74. Oct 31/94. No change. Seems quite contented here. Quiet & reserved.
Nov 5 — Nov 5/94. Wt 140 " " 60. Dec 4/94. Wt 143 pds. Pulse 72. Dec 29/94. Owing to a change about to be made in the occupancy of this ward, patient was, with several others, to-day moved to C2.
Dec 4/29 1895 Jan 4/31 — Jan 4/95. Wt 142 pds. Pulse 72. Jan 31/95. No delusions noted. Is always quiet & well-behaved. Clean & tidy. A good & willing worker on the hall; also works about centre office, cleaning &c. Is contented — During this quarter, condition has been about the same, as above reported. He keeps in quite good flesh and physical condition (Wt 7/1 145 pds: Wt 8/1 148 pds. Wt 4/4 150 pds. — Pulse about normal). He is quiet & well-behaved, talks sensibly but is rather reticent. Helps willingly with any work.
Feb 1 "Mar 1 April 30 — Mar 1/95. Wt 141 pds. Pulse 76. May 31/95. Has been complaining of soreness in chest & also of constipation, the past week or so. Given treatment, (cathartics &c): he eats & sleeps well. Mental and physical condition seems good, though he is somewhat dull of comprehension & slow in movements & action. Behavior very good. Works every day; has "limited parole".
May 1/31 — June 1/30 — June 1/95. Wt 142 pds. P 63. June 30/95. No change noticeable, in patient's condition, either mentally or physically. July 1/95. Wt 146½ pds. Pulse 90. July 31/95. Still no change.
July 1/31 — Aug 1 — Aug 1/95. Wt 142 pds. Pulse 68. Sep 1/95. Wt 141½ pds. Pulse 73. Sep 17/95. Transferred to A3, to day.
Sept 1/17 — Oct 1/31 — Oct 1/95. Wt 144 pds. Pulse 68 — Oct 13/95. Complains of a cold: Oct 31/95. Quiet & well-behaved. Talks quite rationally: helps with work. Reads a good deal. Seems contented. Has a "parole".
Nov 1 Dec 1/30 Jan 31/96 — Nov. Dec 1/95 Jan 31/96. Patient keeps in about his usual health: (Wt 1/1 140½ Wt 1/1 141 Wt 11/96 140½ pds) Pulse, when taken, about normal. No special change in any way. Works a little. Reads some. Seems contented.

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Personal and Medical History of William Williams

HERBERT, PUELAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3471.

Residence, 2201 - 2nd St No. Minneapolis

Date Admission, 11th September 1893.

Admitted by, R. Kilbourne Hour, 7 PM.

How Sent, John St. Steele Jof P, Hennepin County

Sex, male

Age, 25 years

Civil Condition, single

Children,

Age Youngest Child,

Occupation, Carpenter

Degree Education, Common-School.

Profession Religion, Not a church member.

Habits, Not intemperate

Nativity, Wales; (Parents also born Here)

Physicians Committing, H H Brazie & S A Locke

Correspondents, Wm R Williams, Bangor. Wisconsin



No. for Year, 41

Insane Relatives, not known

Cause Exciting, Love and worry

Cause Predisposing, not stated

Form, Acute Mania

Accompanying Bodily Disorder, none stated in history.

Suicidal or Not, Not; but homicidal tendencies.

Date of this Attack, about July 22nd 1893 (?)

Duration, about 7 weeks

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 25.

Time of Leaving, June 29. 1894

Time in Hospital, 3 yrs. 9 mos. 30 ds

Result, Transferred to Fergus Falls

J P Jon

EXAMINATION ON ADMISSION.

Exd by Dr. Ely Feb/1894.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, fairly quick at present

MEMORY:

Past Events, Seems good

Recent Events, not so clear

Special Subjects,

PERCEPTIVITY:

Alert or Dull, somewhat dulled

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, fairly good

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Does not seem to comprehend well. In many cases, has to have questions repeated, before answering them. Tells an incoherent and vague story of seeing some one, of marrying her &c: "got worrying about the girl and his work & says: went Crazy about it." -

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not, Denies any

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Inclined "of hearing" -

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent in answer to questions -

Voluble or Reticent, Answers questions after some hesitation.

Personal and Medical History of William Williams

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10 in WEIGHT, 139 lbs (usually 150 lbs) NUTRITION, somewhat below normal.

WOUNDS OR ABNORMALITIES, none (known); Nystagmus

TONGUE, Tremors, some marked Coatings, some Promptness Movement, prompt

PUPILS, Equality, equal Size, somewhat dilated

Response Light, Yes Accommodation, Yes

SIGHT, good.

Case No. 3471. Wm. Williams. Vol. 25.

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 - 7 or 8 - D. V. Scale -

Other Reflexes,

ARTICULATION, Hesitating, Seems fair Slurred,

FACIAL EXPRESSION, somewhat vacant.

SENSIBILITY, seems normal

HEART, sounds good

LUNGS, sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short ONSET GRADUAL OR SUDDEN, probably sudden

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

Mother or Mat. Relations, Mother living - about 50 - Claims has good health.

Father or Pat. Relations, Father dead — Don't know cause

Brothers or Sisters, one brother in Australia; Claims healthy.
" " in Wales " "
one sister in Wales " "

No history of insanity obtained

Personal and Medical History of William Williams

ROBERT, FICLAR & CRAMBERS, DAVENPORT, IOWA

Whole No. 3471.

Residence, 2201 - 2nd St No. Minneapolis

Date Admission, 11th September 1893.

Admitted by, R. Kilbourne Hour, 7 Pm

How Sent, John H. Steele J of P. Hennepin County

Sex, male

Age, 25 years

Civil Condition, single

Children,

Age Youngest Child,

Occupation, Carpenter

Degree Education, Common-school.

Profession Religion, Not a church member

Habits, Not intemperate

Nativity, Wales; (Parents also born there).

Physicians Committing, H.W. Brazie & J.A. Locke

Correspondents, Wm. R. Williams, Bangor, Wisconsin

No. for Year, 41.

Insane Relatives, not known

Cause Exciting, Love and worry

Cause Predisposing, not stated

Form, Acute Mania

Accompanying Bodily Disorder, none stated in history.

Suicidal or Not, Not; but homicidal tendencies.

Date of this Attack, about July 2nd 1893 (?)

[redacted] hospital, 2 yrs 7 mos. 20 da

Result, Transferred to Fergus Falls.

J.C.Jan

EXAMINATION ON ADMISSION.

Exd by Dr. Ely 9/15/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, fairly quick at present

MEMORY:

Past Events, seems good

Recent Events, not so clear

Special Subjects,

PERCEPTIVITY:

Alert or Dull, somewhat dulled

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, fairly good

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Does not seem to comprehend well. In many cases, has to have questions repeated, before answering them. Tells an incoherent and vague story of seeing some one, of marrying her to: "Got worrying about the girl and his work to say: went Crazy over it." -

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not, Denies any

Special Subjects,

Transitory or Not,

HALLUCINATIONS: has had "of hearing" -

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent in answer to questions -

Voluble or Reticent, Answers questions after some hesitation.

Personal and Medical History of William Williams

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10 in WEIGHT, 139 lbs (usually 150 lbs) NUTRITION, somewhat below-normal.

WOUNDS OR ABNORMALITIES, none (tumors); Nystagmus

TONGUE, Tremors, some marked Coatings, some Promptness Movement, prompt

PUPILS, Equality, equal Size, somewhat dilated

Response Light, Yes Accommodation, Yes

SIGHT, is good

HEARING, fairly good

COORDINATION, Arms, quite good: finger to nose, eyes shut, quite good.

Legs, standing, Eyes shut, fairly steady.

TREMORS, Hands, not much Tongue, some marked.

Facial Muscles, none noted General, none noted

REFLEXES, Patellar, Equal - 7 or 8 - Dr. Ps Scale -

Other Reflexes,

ARTICULATION, ~~Hesitating~~, seems fair ~~Slurred~~,

FACIAL EXPRESSION, somewhat vacant.

SENSIBILITY, seems normal

HEART, Sounds good

LUNGS, Sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short ONSET GRADUAL OR SUDDEN, probably sudden } no history of heredity obtained

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

Mother or Mat. Relations, mother living - about 50 - claims has good health.

Father or Pat. Relations, Father dead - Don't know cause

Brothers or Sisters, one brother in Australia; claims healthy.

" in Wales "

one sister in Wales "

EARLY, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here in and from, by a Sheriff's officer with the following history of case. As to consanguinity or heredity, is not known. This is 1st attack; symptoms of same manifested about July 22nd 1893; thought that some one was going to kill him. Disease has been gradually growing worse since above date. Derangement is now shown in following way; says he is going to acquire great wealth; that some one is going to kill him; and says: "everything looks red". One night, he went into an adjoining room with a razor & threatened to kill the occupants. Is neither suicidal, nor filthy nor destructive. The only thing previously noticeable was his talking of getting married and being disappointed. Neither he, nor his parents, have ever been addicted to intemperance, nor has he been subject to any severe disease &c or injury to head, nor restrained or confined, except by having a close watch kept upon him by his landlord. Supposed cause of disease is love and worry; has had no treatment except by palliatives. On personal examination, following points noted: Pulse 96. Tongue heavily furred, livid, haggard expression of the Eye, disconnected thoughts, aberrations. Was quiet, however.

Sep 11 Sep 11/93. On admission, was put on B3. Pulse 110. Refused to allow taking of temperature. Bodily Condition quite
" 12 clean. No injuries or peculiarities noticed beyond nystagmus. Sep 12/93. Slept 7 hours, last night; was quiet
A.M. Pulse 100 P.M. Pulse 106. (T & on each occasion refused). Appetite good. No cough noticed. No injuries or
Complaints. Is quiet. Reads some. Goes out walking with the rest. Talks quite freely when spoken to;
" 13 Is quite nervous. Thinks some one is going to hurt him. Sep 13/93. Slept well last night & was quiet.
A.M. Pulse 96. P.M. Pulse 90. Appetite good. Is quiet & well behaved, during day; reads some; talks
" 14 when addressed. Sep 14/93. A.M. Pulse 92. Appetite good. Bowels regular. Is not so nervous as he has been,
" 15 the past few days. Sep 15/93. A.M. Pulse 90. Talks freely; Reads some & goes out walking regularly.
Does not seem so deluded as he was. Was examined today, in office. Denied delusions stated in history.
" 16 Has had Hallucinations of hearing, however. (see further notes thereon). Sep 16/93. A.M. Pulse 84. Appetite still
" 17 keeps good. Talks freely & sensibly in room. Works some on the ward. Sep 17/93. Complains some of
" 18 headache today. Pulse 80. Sep 18/93. Again complains of headache this forenoon. Pulse 76. P.M. Is now
" 23 feeling better. Sep 23/93. Has continued to rest & sleep well each night (uniformly 8 hours). Pulse, for
some days, has been normal. Appetite good; bowels regular, as a rule. Has been quiet & well-
behaved by day; clean, tidy & of good personal habits. Talks freely; no delusions noted, of late.
Writes occasional letter home; plays billiards & assists with hall-work. Is occasionally "cranky".
" 24 Sep 24/93. Rested & slept well, last night. Is today inclined to be very religious; reading the Bible;
" 25 cries, at times. Is again showing delusions. Sep 25/93. Again slept well last night. Pulse, con-
tinues normal. Appetite poor. Is very deluded today; says "everybody is looking at him". Talks
" 30 but little. Is somewhat depressed. Complains of headache. Sep 30/93. No material Change.
Oct 3 Oct 3/93. Weight 147½ pounds. (Has gained 8½ pounds since admission). Pulse 80. Works some
" 10 in the ward. Oct 10/93. Usually sleeping well, at night, was, last night, noisy & out of bed & slept
" 31 only 3 hours. Oct 31/93. Appetite continues good. Patient is indifferent. Inclined to be very lazy.
Reads. Plays games. Does not go out walking. Is deluded.
Nov 1/10 Nov 1/93. Weight 141 (a loss of 6½ pds); pulse 78. Nov 10/93. Foolish, at times; talks to himself
" 13 and laughs. Shows delusions still. Works some onward. Nov 13/93. Today, transferred to B3.
" 25/30 Nov 25/93. Is, at times, very restless. Nov 30/93. Apparently rests & sleeps well, at night.
Continues somewhat restless by day. Has spells of talking to himself and getting angry.
Does considerable work on the hall. Is clean, tidy & of good personal habits.

1893

Dec 2/15 Dec 2/93. Wt 140 pds. Pulse 80. Dec 15/93. Has "spells" of talking and laughing to
himself, at times, still. Restless, walking the hall, a good deal of the time. Has a poor
memory. Is contrary and disagreable at times. Does not seem to improve any. Appetite poor.
" 31 Dec 31/93. Much inclined to be alone. Will talk and laugh to himself. Also inclined to be ugly, at
Times; striking the floor with his feet & will not stop, when told. Does not seem to improve any.
Has been restless & noisy, during the past few nights from 4 to 6 hours, at each & has slept very poorly.

1894
Jan 2/31 Jan 2/94. Wt 139 pds. Pulse 85. Jan 31/94. Has "bad spells" of talking quite loud to himself,
and laughing. While in one of these "Spells", will put books, papers & anything else he can find
into his pockets. Sleeps in B3; takes his meals at A3 Bowels regular. Does no work.—
Feb 2/30 Feb 2/94. Wt 137½ pds. Pulse 101. Feb 20/94. Is of a mean disposition - Quite disagreeable
and stubborn while in one of these "Spells"; will go into other rooms & take things and carry
" 23 them away. Does not seem to improve any. Feb 23/94. Not quite so restless the past few days.
" 24 Feb 24/94. This patient was committed hereunder the "Law of 1893" recently declared unconstitu-
-tional. He was, today, Taken out and Returned under "new Warrant" from Allamakee County
" 28 Feb 28/94. No material Change from what is reported in last general note. —
Mar 3/27 Mar 3/94. Wt 139 pds. Pulse 84. March 27/94. Patient appears, for some days, to be getting
worse. Has "spells", when he will laugh & talk to himself, all day. Is noisy and troublesome.
Keeps his pockets full of papers & books. Continually going about ward, talking & laughing. —
" 28/29 March 28/94. Was, today, transferred to B3 East. March 29/94. Was restless & noisy
for 6 hours & slept but 3 hours, last night. Is noisy, restless & troublesome also today. —
Apl 2/29 April 2/94. Wt 138½ pds. Pulse 88. April 29/94. On 8 nights, (during the past 30), he
has been noisy & restless, for from 4 to 5 hours & has slept poorly (4 or 5 hours each night). Has
" 30 continued restless & noisy by day. April 30/94. Continues more or less noisy, on some
nights, though on the whole has been more quiet, nightly. Appetite good; bowels regular. Is
still restless & noisy by day; always walking about the hall, unless compelled to sit down.
Talks all day, continually to himself; is incoherent; habits are clean. He does no work.
May 1/28 May 1/94. Wt 141 pds. Pulse 96. May 28/94. Escaped from the ground, while out for exercise, today.
" 31 Was retaken on College Ave by J.P. Hansen (NW) & brought back. May 31/94. No change during month.
June 1/30 June 1/94. Wt 146 pds (is gaining some in flesh). Pulse 98. June 30/94. Continues about the same.
July 2/31 July 1/94. Wt 143 " Pulse 80. July 31/94. General notes for past few months still hold good. —
Aug 1/31 Aug 1/94. Wt 141½ " " 78 — Aug 31/94. Is occasionally noisy restless at night & then sleeps poorly.
" 31 Aug 31/94. As a rule, sleeps quite well. Noisy restless, by day. Talks incoherently. Habits Clean. Does no work
Sep 3/30 Sep 3/94. Wt 145 pds. Pulse 110. Sep 30/94. Conduct & behavior do not Change any. Is very much
Oct 1/31 Oct 1/94. Wt 149 " " 76. Oct 31/94. Has not been feeling very well, the past couple of days;
" 10 Pulse, this Am, 114. Put to bed this P.M. Oct 10/94. Is up, on ward, today & is feeling better. —
" 31 Oct 31/94. Is not so noisy since getting up (on 10th inst), but this seems the only change with him
Nov 1/5 Nov 1/94. Wt 150 pds. Pulse 98. Nov 5/94. Has been noisy & restless the past few nights. Sleeping very poorly.
Dec 1/29 Dec 1/94. Wt 150 " " 90. Dec 29/94. Had some trouble with patient Geo. Knight: no marks noticed.
1895
Jan 2/31 Jan 2/95. Wt 145 " " 88 - Appetite good; bowels regular. Behavior rather restless & noisy; talks
incoherently. Habits clean but he is touchy about his dress: does not work any. — .

to Transfer Book A" page 104

Personal and Medical History of Charles Nihart
(Returned patient)

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3212½ 3473. (See note on page 79).
Residence, Wabasha, Minn
Date Admission, 12th September 1893.
Admitted by, D. Kilbourne Hour, 7 PM
How Sent, Malcolm Kennedy, Jof P, Wabasha County
Sex, male
Age, 20 (Day & 20).
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, Never has had any
Degree Education, none
Profession Religion, not a Church member
Habits, Probably not good
Nativity, Reed's Landing, Minn (Parents in US.)
Physicians Committing, P. N. Keely & P. A. Low.
Correspondents, no cards in papers
Family Physcn. P. A. Low
Wabasha, Minn.

No. for Year, 143
Insane Relatives, None
Cause Exciting, unknown
Cause Predisposing, previous attacks
Form,
Accompanying Bodily Disorder, more notes in history
Suicidal or Not, Not
Date of this Attack, has been about same always
Duration, a long time
No. of Attack, 2nd probably (?)
No. of Admissions, 2nd
Age First Attack, not given
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,

Returned Patient
Recommitted through Error of P.A.L.

Personal and Medical History of Charles Nihart

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

HEIGHT, 5 Feet 10½ WEIGHT, 131½ lbs NUTRITION,
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Size,
Response Light, Accommodation,
SIGHT,
HEARING,
COORDINATION, Arms,
Legs,
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Charles Nicart

EBERT, FICAR & SCHAEBER, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriff E. M. Schmidt, with the following history. No history given of either consanguinity or heredity. This is not 1st attack. He has been about the same all his life, but friends have concluded to send him away on account of his irresponsibility. Disease seems stationary; is not variable. Derangement now shown by his running out at night, after women. Pulled a knife upon a girl last Sunday. Is neither disposed to filthy or destructive habits, nor suicidal, nor addicted to intemperance. Has had no severe disease or injury to head. Was in Reform School at St. Paul & at Redwing for 10 years. Also in this asylum for some months (9). Cause of the disease is not known. On personal examination appearance is good; he answers questions quite intelligently. When asked, if he liked living in Rochester? replied "Yes, I have been there so often. I am used to it." "I was there 3 months". When asked also, How he spelt his name? Said C-H-A-R-L-E-S N-I-H-A-R-T. During examination, he sat upon a chair, behaving himself quite well.

New Commitment papers came, this date, with this patient, but Records show that he was never ever recommended for discharge. For this reason he is treated, in usual way, as "Returned", and this entry is "null & void".

PM

June 7th.

Charles Nelson

Feb's / Mar 1 / Apl 1/30 / May / June 1/16

Feb 1/96. Wt 142 pds. P 76. March 1/96. Wt 141 pds. P 78. Apl 1/96. Wt 139½ pds. P 74. Apl 30/96. Appetite good: he sleeps well: bowels regular: behavior good: habits neat: physical condition apparently good. — mental condition not considered very good: poor memory: very slow to comprehend: hesitates when questioned: not very active or ambitious. Talks very little: does not seem to have any delusions or hallucinations. No improvement noticed. Walks a little around. Is on "parole". May 1/96. Wt 133 pds. P 8. June 1/96. Wt 139 pds. June 15/96. Recently a friend called on him & desired him to go out into the Country to work, but patient seemed to well contented here that he did not care to accept the offer: made many trivial excuses: did not seem to care to do for himself: more inclined to argue than work. June 16/96. Was allowed to leave the Institution this morning: he going to work for farmer in neighborhood, here

Discharged

Personal and Medical History of Oscar Peekstrom

1894 Cont'd from 88.

Mar 31 / Apl 2/30 / May 1/31 / June 1/30 / July 2/31 / Aug 1/31 / Sep 3/30 / Oct 1/31 / Nov 1/30 / Dec 1/31 / Jan 2/95 / 31 / Feb to Apl 30 / May to June 5 / July 31 / Aug 1 / Sept / Oct 31 / Nov 1 / Dec 1894 / Jan 31 / Feb 4 / March to Apl 30 / May 1/96 to Aug 29/97

restless at night. Appetite is good; bowels regular. Behavior foolish & destructive. Appears to be idiotic & looks as if he is gradually growing worse. Laughs a good deal. Destroys his clothing, both by night & by day. Habits are clean. Is indolent; does not work any.

April 2/94. Wt 191½ pds. Pulse 72. April 30/94. No material change to note in his condition.

May 1/94. Wt 188½ pds. Pulse 70. May 31/94. Continues about as described in General note for March except that, of late, he has been less destructive. He now assists some with the work on the ward. —

June 2/94. Wt 191 pds. Pulse 72. June 30/94. On about ½ of the nights during this month, he has been reported as restless from 5 to 6 hours & sleeping only 3 or 4 hours each. Otherwise no change.

July 2/94. Wt 190 pds. Pulse 68. July 31/94. Is very noticeable change in his condition. Is however less restless at night & is sleeping much better. In other respects, continues about the same —

Aug 1/94. Wt 178 pds (also off ½ pd in past month, without apparent cause). P 62. Aug 31/94. On about 5 nights during this month, patient has been reported as restless & slightly noisy & sleeping poorly. Behavior, by day is quiet, but he acts silly & foolish. Habits clean, but slouchy in dress. Does not work any.

Sep 3/94. Wt 182 pds. (some gain in flesh). Pulse 86. Sep 30/94. No special change to note.

Oct 1/94. Wt 182 " Pulse 71. Oct 3/94. Received a cut over left eye by a kick from Krueger (a patient at C 3). Oct 31/94. Very infrequently restless or noisy at night. No change to note during month.

Nov 1/94. Wt 189 pds. Pulse 84. Nov 30/94. Appetite good; bowels regular. Inclined to be rather surly at times: talks incoherently & appears imbecile.

Dec 1/94. Wt 192½ pds. Pulse 92. (Has been gaining some, in flesh). Dec 31/94. No special change. Jan 2/95. Wt 191 " " 80. Jan 19/95. Transferred to Annex.

Jan 31/95. Patient has been quiet, obedient & well-behaved, so far. Does a little work on the ward.

During this Quarter, there has been nothing special to note. He is quiet: does no work: seldom speaks: rather nervous in behavior. Habits clean: health good. He has been caught, several times, today (March 31) in act of trying to twist gas-fixture from its fastenings; (purpose unknown).

During these 3 months, patient has been quiet; seldom speaking; during latter part of June, he was in bed, for several days, had worked outside a few days previously & seemed physically exhausted. Appetite was poor. Remained inward for some time, but is at present (July 31) again working outside. Habits are clean: he is rather slouchy & untidy in dress: Is in good physical health. —

During these 3 months, there has been no change to note. Is quiet. Usually walks about on his tip-toes: does not speak unless compelled to. Works about grounds. Habits, clean: health good.

Nov 4/95. Wt 194 pds. Pulse 98. Nov Dec & to Jany 31/96. Patient was in bed, for several days, during Early part of December: he did not seem to be ill: (Attendant thought he was merely lazy). He has been quiet & stupid: seldom speaking: no work: Habits clean. Health apparently good —

Feb 1/96. Wt 190 pds. P 102. Feb March & to Apl 30/96. During the period, quiet: no work: sits in one place, most of time: seldom speaking. Steals knives, forks & other articles from dining-room requires searching every day. Habits clean. Health apparently good. —

Summary Nurses Notes by Dr. Phelps. Patient quiet, stupid & demented: Health apparently quite uniformly good: Wt. averages 145 lbs. Feb 8/97 patient without warning attacked Nurse Yokes injuring him so severely as to keep him in bed for two weeks: After that time kept on violent ward: has been very restless & cranky & occasionally destructive. June 29/97. Transferred to Fergus Falls.

Personal and Medical History of John Behrs

LIBERTY, PUGAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3474.
Residence, Utica, Winona County, Minn
Date Admission, 14th September 1893.
Admitted by, Dr. Kilbourne Hour, 11.30 A.M.
How Sent, H.L. Buck, J of P, Winona County
Sex, Male
Age, about 40.
Civil Condition, married
Children, Three
Age Youngest Child, —
Occupation, Blacksmith
Degree Education, Can read & write
Profession Religion, Lutheran
Habits, probably temperate —
Nativity, Germany (Parents also born there).
Physicians Committing, Thos A Pierce & L.H. Kelly
Correspondents, 2nd Mrs John Behrs, Utica, Minn
Family Physcn S.C.N. Clark, St Charles, Minn

No. for Year, 44.
Insane Relatives, Brother (died at Rochester hospital)
Cause Exciting, Softening of brain
Cause Predisposing, probably hereditary
Form, General Paresis
Accompanying Bodily Disorder, Tremors of whole body
Suicidal or Not, not
Date of this Attack, 3 years ago
Duration, 3 years.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack,
Time of Leaving, 15th October 1893
Time in Hospital, 1 month & 1 day
Result, Died: Exhaustion in General Paresis.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr Eby, Sept 15/93.

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

MEMORY:
Past Events, } Perverted
Recent Events, }
Special Subjects, }

PERCEPTIVITY:
Alert or Dull,
Correct or Illusive, Illusive

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

GENERAL DESCRIPTIVE REMARKS:
Is quite weak & infirm; & gait ataxic. Says his wife is now living here in hospital, with him —

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

DELUSIONS:
Systematized or ~~Not~~, of grandeur & of owning property
Special Subjects,
Transitory or Not,

HALLUCINATIONS: —
ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Incoherent
Voluble or Reticent,

Personal and Medical History of John Behrs

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 3¼ WEIGHT, 138 lbs. NUTRITION, fairly good for one of his age.
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, very coarse Coatings, Some Promptness Movement, rather slow
PUPILS, Equality, Equal Size, dilated
Response Light, Accommodation,
SIGHT, somewhat impaired
HEARING, Impaired
COORDINATION, Arms, } poor
Legs, } by usual tests
TREMORS, Hands, None Tongue, very coarse
Facial Muscles, General, more or less
REFLEXES, Patellar, equal; very much exaggerated.
Other Reflexes, ankle-clonus.
ARTICULATION, Hesitating, Yes Slurred, Yes
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds are good
LUNGS, Sounds are normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, —
Father or Pat. Relations, —
Brothers or Sisters, Brother died in this hospital

Personal and Medical History of John Bevrs

EBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA.

1893

This patient is brought here by Sheriff Gay, with the following history. There is no history of consanguinity. Brother, however, was insane; died in Rochester Hospital. This is the 1st attack. First symptoms manifested 3 years ago; continuous; has never been sent to hospital. At that time, he wanted to leave home; to go to the Poor-House. Disease appears increasing. There are rational intervals, however, irregular, liable to come on at anytime. Derangement is now shown by his being dissatisfied with anything connected with business; wants to get away from business & family. Is disposed to injure others, but is not suicidal. Has filthy habits. Talks drank beer, but not to excess. Patient has not been subject to any severe disease or injury to head. He has been locked in his room for past 3 weeks. Supposed cause of disease is softening of the brain. He has been treated by narcotics or anodynes, but without affecting relief. On personal examination is pale & anemic; restless; and incoherent in conversation. "His Shop" he says "is round the corner"; cannot tell where his home is. All answers to questions incoherent. Wants to go. Has to be restrained. Appearance & manner demented. There is also found a loss of memory; is easily excited; and there are tremors of the whole body.

Sep 14 Sep 14/93. On admission, is in poor physical condition. Has put on Bt. Pulse 76. R 14. Appetite is good. Bowels normal; no cough noticed. Is well-behaved, but restless & excited. Talks freely. Is under the delusion that the Hall belongs to him, and, generally, is rambling & incoherent in his speech. Left leg seems swollen
" 15 and discolored (probably bruised in a fall). Sep 15/93. Slept well, last night. Appetite continues good; bowels regular. No cough yet noticed. Pulse, this morning 74. R 14. Was anxious to get home yesterday, but is more contented today; says he feels better in every way. Was examined in office today. Is very weak and infirm; reflexes very much exaggerated; gait ataxic; shows delusions of grandeur, of owning property and
" 16 various others. Speech very incoherent; articulation hesitating & slurred. Sep 16/93. Slept 7 hours, last night.
" 17 AM. Pulse 72. R 16. Restless today; wont keep still, any length of time. Sep 17/93. Somewhat restless, but slept 6 hours, last night. AM. Pulse 78. R 14. Patient continues restless; wont stay in one place or
" 18 remain in bed; always trying to get his clothes off. Soils his clothes & bed. Sep 18/93. Slept 7 hours, last night.
" 19 AM. Pulse 88. R 12. Severy restless & troublesome today. Filthy in habits. Sep 19/93. Very restless, slept but 4 hours, last night. AM. Pulse 88. R 12. Wishes to go home. Severy restless both by day & night.
" 20 Sep 20/93. Slept 8 hours last night; was very restless in early part. Pulse is now normal. Very restless
" 26 today & very dirty in his habits. Left leg still somewhat discolored & sore. Sep 26/93. During this second week patient has been resting & sleeping much better, as a rule, at night. Appetite has continued good & bowels have been regular. Pulse & respiration about normal. Restless by day; excited & nervous; continually moving about, and, as he is very weak & unsteady on his limbs he falls frequently on to the floor. Habits are very
" 27 filthy. Still holds to his delusions. Sep 27/93. Slept well last night. Yesterday, he fell & appears to have hurt his hips, as he moves about with great difficulty this morning.

Oct 3 Oct 3/93. Weight 132½ pds. Pulse 74. (Has lost 5½ pds in flesh, since admission). Patient's appetite is good; bowels regular; somewhat inclined to looseness. He was, formerly, very restless and nervous, walking about most of the time, but this (3rd Oct) afternoon & evening, from being restless, he fell into a heavy sleep, in a chair; was waked up for supper & fell asleep while being fed. He can now hardly
" 10 walk. He is confined to bed. Oct 10/93. During the past week, the patient appears to have been gradually sinking & notwithstanding the greatest care, the bed sore, which he suffered from when admitted, has
" 11 gradually become worse & other bed sores are breaking out. Oct 11/93. Today transferred to C2 (Sick-ward)

Personal and Medical History of John Bevrs

1893

Oct 11 Oct 11/93. 11 Am. On "Sick-ward". Severy restless. 5 Pm. Pulse 100 R 16 Tx 100. Bowels moved.
" 12 Oct 12/93. 7 Am. Pulse 100 R 18 Tx 101. 5 Pm. " 110 " 16 " 102. Medicine
" 13 given for bowels at 12. 2. 6 and 8 Pm. Oct 13/93. 7 Am. " 112 " 18. Pm. Pulse 112. R 24
Tx 101. Bowels have moved freely today. Pulse very irregular. Bowels very much inflated. at
" 14 7.30 Pm. Respiration 40. Oct 14/93. 7 Am. Pulse 96 R 22 Tx 97 4/5 Pm. Pulse 108 R 30 Tx 102.4
Appears very weak. Has a very bad bed-sore, a cavity extending about 2½ inches in left hip.
" 15 Oct 15/93. 7 Am. Pulse 104 R 26 Tx 101.2. 5 Pm. R 32. Appears today, appeared to be in
great pain, groaning much. Breathing labored. 6.30 Pm. Is perspiring freely.

Patient has failed steadily since coming. Has been rapidly changing also. State was typically paretic. Was, mentally, much more rational than usual, however. Mind seemed dulled, but acted correctly, as far as it went. Had a left hematoma auris. Died at 11.15 P.M.

His wife was kept advised of his failing and critical condition. Remains were removed by relatives.

Died —

Frederick Andresen

From 28.

1895 Nov 1 Nov 1/95. Wt 174 pds. P 74. Dec 1/95. Wt 173 pds. Pulse 80. Jan 2/96. Wt 174 pds. Pulse 74.
Dec 1 Jan 2/96. Got into some trouble with John Leaulon & the two, while in bed-room & struck Leaulon.
1895 Jan 2/96
Jan 2/96 Jan 31/96. Patient's health is rather poor & he makes frequent Complaints of pains in back & limbs: of feeling
" 31 bad, generally: of headaches &c. Is given medicine often. Appetite is good & bowels regular. Goes outside on
Feb 3 the grounds, when weather permits. Mentally, no change noticeable. Feb 3/96. Wt 172 pds. Pulse 90.
" 29/96 Feb 29/96. Complains of pain in legs & back. Feb 29/96. Is very feeble: can hardly move about. Goes outside the door,
Mar 3 when fair weather: worries at times, about his folks not coming after him. Mar 3/96. Wt 174½ pds. P 90.
" 12/96 Mar 12/96. Complains of pain in back. March 29/96. Has a severe pain in head & limbs. Mar 31/96. No change noted.
Apl 1/96 Apl 1/96. Wt 174½ pds. P 76. Apl 29/96. Complains, still, of pains in back & limbs. April 30/96. Is very quiet.
Seems some stronger, of late, as he now goes walking, every day; appetite fair: bowels in good condition: makes
no complaints, now: sleeps well: is clean in habits.

May 1/96 to Aug 1/97 Summary Nurses Notes by Dr. Phelps. Patient old, feeble & paretic. Wt Dec. 96 175 lbs. June 27/96 a note states that he choked at dinner-time: Sept 5/96 had a stroke of paralysis & was transferred to infirmary where with a slight temperature he got along quite well. The third day however, he fell while trying to get up from bed. During next few weeks he grew in ability to use his arms & legs & improved slowly. Was kept upon sick-ward until Nov. 30, since which time he has been walking around with a cane with little difficulty. He has had parole to go out & wander around the grounds just outside of the ward. Wt. 165 lbs. Aug. Careless & untidy in personal appearance: Manages to get around slowly with aid of cane. Nov 1 Can get around slightly better: shows no marked deterioration but a mild symmetrical dementia. Jan 15/98 Is growing weaker & more unsteady in footing & occasionally falls to floor. Mental condition unchanged.

Folio 96

Personal and Medical History of Oscar Weekstrom

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3476.
Residence, 28. Wash. Ave. No. Minneapolis.
Date Admission, 15th September 1893.
Admitted by, D. Kilbourne Hour, 7 P.M.
How Sent, John A. Steele, Sh. O. Hennepin County
Sex, Male
Age, 24.
Civil Condition, Single
Children, none
Age Youngest Child, —
Occupation, Laborer
Degree Education, Common School.
Profession Religion, not a church member.
Habits, somewhat intemperate
Nativity, Sweden (Parents also born there)
Physicians Committing, Chas. A. Hunter & H. A. Jones.
Correspondents, James Jamstad — 2707. Wash. Ave. No.
Family Physcn. C. A. Hunter Syndicate Block Telfl.

No. for Year, 46.
Insane Relatives, Step brother insane.
Cause Exciting, Defection (?). Syphilis probably
Cause Predisposing, probably hereditary.
Form, Acute Mania
Accompanying Bodily Disorder, probably Syphilis.
Suicidal or Not, not
Date of this Attack, March 1893.
Duration, about 6 months —
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 23.
Time of Leaving, June 29. 1897
Time in Hospital, 3 yrs. 9 mo. 14 da.
Result, Transf. to Insane Asylum.

OK Jm

EXAMINATION ON ADMISSION.

Exd by D. Ely - Sep 20/93 -

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Recent Events, Special Subjects, } seems fairly good

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

REASONING POWER: Ordinary Subjects, Own Mental State, Special Subjects, } not very Good

GENERAL DESCRIPTIVE REMARKS:
Was at St. Anthony Hospital about a week, hospital for 5 weeks before Coming here. Complains of tongue being hard for him to get his tongue "around words" as it were. Doesn't understand English well, consequently examination is made under some difficulties.

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

DELUSIONS:
Systematized ~~or Not;~~ visceral delusions
Special Subjects, on subject of his disease
Transitory or Not,

HALLUCINATIONS: unnoted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, coherent
Voluble or Reticent, inclined to be voluble on subject of his disease.

Personal and Medical History of Oscar Weekstrom

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet 1½ in. WEIGHT, 171 lbs NUTRITION, fairly good
WOUNDS OR ABNORMALITIES, none noted
TONGUE, Tremors, none fine Coatings, white Promptness Movement, ✓
PUPILS, Equality, Equal Size, dilated
Response Light, Yes Accommodation, Yes
SIGHT, says "Cannot see well" —
HEARING, somewhat impaired. Complains of a "ringing" in his ears.

Case No. 3475. Oscar Weekstrom. Vol. 25.

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, somewhat Slurred, somewhat
FACIAL EXPRESSION, somewhat depressed; also a vacant look. —
SENSIBILITY, normal
HEART, sounds good.
LUNGS, sounds are good; but breathing quite rapid.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother living in Sweden; history says she was insane.
Father or Pat. Relations, father living in Sweden.
Brothers or Sisters,

very little information can be obtained from patient at this point, as he does not seem to comprehend questions.

Personal and Medical History of Oscar Weekstrom

EBBERT, FIDLAR & CRAMBERS, DAVENPORT, IOWA

Whole No. 3476.

Residence, 28. Wash. Ave. No. Minneapolis.

Date Admission, 15th September 1893.

Admitted by, D. Kilbourne Hour, 7 PM.

How Sent, John A. Steele, Sof P. Hennepin County

Sex, Male

Age, 27.

Civil Condition, Single

Children, none

Age Youngest Child, —

Occupation, Laborer

Degree Education, Common School.

Profession Religion, not a church member.

Habits, somewhat intemperate

Nativity, Sweden (Parents also born there)

Physicians Committing, Chas A. Hunter & H. A. Jones.

Correspondents, James Jamstad — 2707 Wash. Ave. No.

Family Physcn Dr C. A. Hunter Syndicate Block Bdfl

No. for Year, 46.

Insane Relatives, States brother insane.

Cause Exciting, Defection (?). Syphilis probably.

Cause Predisposing, probably heredity.

Form, Acute Mania

Accompanying Bodily Disorder, probably Syphilis.

Suicidal or Not, not

Date of this Attack, March 1893.

Duration, about 6 months —

Result, Transf. to Insane Asylum.

EXAMINATION ON ADMISSION.

Exd by D. Ely - Sep 20/93 -

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, somewhat confused

Quick or Sluggish, somewhat sluggish

MEMORY:

Past Events, } seems fairly good

Recent Events, }

Special Subjects, }

PERCEPTIVITY:

Alert or Dull, fairly Good

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, }

Own Mental State, } not very Good

Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

Was at St. Anthony Hospital about a week, Hospital for 5 weeks before Coming here - Complains of his being hard for him to get his tongue "around words" as it were. Doesn't understand English well, consequently examination is made under some difficulties.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized ~~or Not~~, visceral delusions

Special Subjects, on subject of his diseases

Transitory or Not,

HALLUCINATIONS: un-noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, coherent

Voluble or Reticent, inclined to be voluble on subject of his diseases.

Personal and Medical History of Oscar Weekstrom

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet 1½ in WEIGHT, 171 pds NUTRITION, fairly good

WOUNDS OR ABNORMALITIES, none noted

TONGUE, Tremors, some fine Coatings, white Promptness Movement, ✓

PUPILS, Equality, Equal Size, dilated

Response Light, Yes Accommodation, Yes

SIGHT, says "Cannot see well" —

HEARING, somewhat impaired. Complains of a "ringing" in his ears.

COORDINATION, Arms, says "cannot shut eyes and do it" (test) -

Legs, some sways (standing, Eyes shut).

TREMORS, Hands, some Tongue, some fine

Facial Muscles, ✓ General, none

REFLEXES, Patellar, unequal; right about 3; left about normal.

Other Reflexes,

ARTICULATION, Hesitating, somewhat Slurred, somewhat

FACIAL EXPRESSION, somewhat depressed; also a vacant look. —

SENSIBILITY, normal

HEART, sounds good.

LUNGS, sounds are good; but breathing quite rapid.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, mother living in Sweden; history says she was insane.

Father or Pat. Relations, father living in Sweden.

Brothers or Sisters,

very little information can be obtained from patient on these points, as he does not seem to comprehend questions.

1893

Was brought here by Deputy-Sheriff Kavanaugh, with the following history. As to consanguinity, unknown. Patient states, however, his mother is insane. This is 1st attack. Has been in St Anthony Hospital; benefit temporary. First symptoms of this attack manifested in March 1893; melancholia & visceral delusions. Disease seems increasing; but he improves, at times, rational under parti-specifics. Derangement now shown by visceral delusions. At times, delirious, maniacal; threatened to injure other patients. Is victim suicidal, non disposed to filthy & destructive habits. Patient has some drink-habit. Also, his father. As to any severe disease &c, is not known. Has been at hospital (above) 2 or 3 days. Supposed cause of disease is defection (?); syphilis probably. He has been under antisyphilitic treatment. Improved under crowded doses. On personal examination, pupils are observed to be dilated; face expressionless. Was incoherent; excited in speech & ideas. Appearance & manner, those of an insane man or a defective. There is also a past history of delirium, excitement, stiffness of muscles, relieved by iodides, by bi-argyrum; also of continued incoherency & expansive ideas.

Sep 15 Sep 15/93. On admission, was put on B3. Pulse 86. T 99.4. Bodily condition clean. No injuries or peculiarities noted. Sep 16/93. Was quiet & slept 8 hours, last night. AM. Pulse 78. T 99.6. Appetite good. Bowels are constipated. Complains of not feeling very well. Is very talkative; converses freely with his Countrymen, as he cannot talk much English. Goes out walking. No cough has been noticed. PM. P 76.
" 17 T 99.4. Sept 17/93. Quiet & restful, sleeping 8 hours, last night; AM. Pulse 74. T 99. Appetite continues
" 18 good. Is quiet & well-behaved today. Talks quite freely. PM. Pulse 78. T 99.2. Sep 18/93. Slept 7 hours last night; was quiet. AM. Pulse 80. T 99. Walks about the hall. Talks some. Quiet & orderly.
" 19 Sept 19/93. Quiet & slept 8 hours last night. AM. Pulse 78. Is restless & uneasy today. Talks considerably. "Wants to die". Appetite only medium. Sep 20/93. Restless & uneasy last night, and
" 20 slept but 3 hours. AM. Pulse 72. Has been quiet during the day. Appetete only medium.
" 21 Sep 21/93. Slept only 4 hours last night; uneasy & disturbed the greater part of the night. AM. P 72. Continues quiet & well-behaved by day. Talks & converses freely. Says "he is now feeling better".
" 22 Sept 22/93. Slept somewhat better (6 hours) last night, but was restless, when awake. AM. Pulse 74. Complains of pain in his bowels; is constipated; Appetite good. Is quiet. Talks quite freely.
" 23 Sep 23/93. Was very restless & disturbed nearly all last night; slept only 2 hours. AM. Pulse about normal.
" 24 Sep 24/93. During this, the second week of his stay, patient's rest and sleep at night have both improved, he now sleeping 8 hours, each night. Has continued quiet & well-behaved by day. Appetite has continued good & bowels regular. Talks freely. Is somewhat inclined to be obstreperous, at times. Has commenced to help around with the ward-work, the past few days.

Oct 3/24 Oct 3/93. Weight 181 pounds (?). Pulse 86. Oct 4/93 Was noisy, pugnacious & violent, last night;
" 5 slept but 1 hour. Oct 5/93. Again violent, pugnacious & noisy & slept only 4 hours, last night. Is in
" 8 a "spell", today. Oct 8/93. Was, today, transfered to B3. Oct 9/93. Was noisy for 6 hours, last night.
" 10 violent & fought the night-watch. Has to be put in C3, in a single room. Oct 10/93 Noisy & again
" 11 violent, last night; slept only 4 hours. Oct 11/93. Slept but 2 hours, last night. Was out of bed, standing up in corner of his room and in the radiator. Oct 12/93. Did not sleep an hour, all last night. Was
" 13 noisy; tearing his clothes. Soiled his room. Oct 13/93. Was given sleeping dose. Slept 5 hours;
" 14 but was restless for 3 hours. Again destructive of his clothing & soiled his room. Oct 14/93 Slept but
" 15 4 hours last night Oct 15/93. Last night, slept 5 hours. Has been restless, noisy, destructive and

1893

Oct 16 dirty in habits, the past 2 nights. Oct 16/93. Restless for 2 hours, but slept 7 hours, last night.
" 17/18 Oct 17/93. Restless & out of bed most of last night, slept only 2 hours. Oct 18/93. Restless 4 hours; slept 8
" 20 hours, last night. Oct 20/93. Slightly restless & noisy for 5 hours, last night. Was also destructive.
" 23/24 Oct 23/93. Last night, was slightly restless & noisy for 5 hours; slept but 4 hours. Oct 24/93. Restless 6
" 27 hours, sleeping but 3 hours, last night. Would not keep covered up. Oct 27/93. Noisy & restless 6 hours,
" 28 last night; slept but 3 hours. Tore up a mattress. Oct 28/93. Restless & noisy for 6 hours, slept 3 hrs;
" 31 Tore up his bed-clothing. Oct 31/93. Has been resting somewhat better the past 2 nights, sleeping 6 to 7 hours on each. Appetete continues good. Bowels regular. Is very restless & destructive, tearing his clothing, both night & day. Talk is incoherent. —

Nov 1/2 Nov 1/93. Wt 178 lbs. Pulse 72. Nov 2/93. Was very restless during the night; tore up his bed-clothes,
" 3 also his mattress. Slept but 2 hours. Nov 3/93. Slept 6 hours, last night; restless for 3 hours &c &c.
" 22/26 Nov 22/93. Destructive, day & night. Tore up two shirts & one pair of socks, last night. Nov 26/93 Was restless 2 hours, but slept 7 hours, last night. Tore up his drawers & shirt during the night. —
" 30 Nov 30/93. Slept but 4 hours last night, was restless for 5 hours. Appetite continues good & bowels seem regular. Is restless, at all times, destructive, tearing his clothing both by night & day. Incoherence of speech. Habits are fairly clean. Physical health seems good.

Dec 4/8 Dec 4/93. Wt 180 lbs. Pulse 74. Dec 8/93. On a good many of the nights is restless for from 5 to 6 hours each, sleeping only 3 or 4 hours. Also destructive. Is now beginning to get ugly & at times will offer resistance, when wanted to do anything. Otherwise, no special change. —
" 31 Dec 31/93. No noticeable change. Habits are clean. —

1894
Jan 1 Jan 1/94. Was restless for 7 hours, sleeping but 2 hours, last night. Is restless, by day; also
" 2 destructive - Talks incoherently. Is kept in C3, in the day time. Jan 2/94 Wt 182½ lbs. Pulse 72.
" 21 Jan 21/94. Restless from 5 to 6 hours, each of the past 2 nights & has slept very poorly.
" 31 Jan 31/94. Appetite good; bowels regular. Not so destructive as in the past. Habits clean.

Feb 1/4 Feb 1/94. Wt 194 lbs (a marked gain, in the past month). Pulse 70. Feb 4/94. Very restless,
" 7 and sleeping poorly, the past 3 nights. Feb 7/94. While being searched this evening, after coming out of dining room, he attacked the attendant (Justice) & was going to throw him down, when help arrived. Patient was very vicious & ugly; has been so for the last few days. —
" 19/23 Feb 19/94. Still occasionally restless & sleeping poorly, at night. Feb 23/94. Appetite good; bowels apparently regular. Is badly behaved, at times; wild, vicious & ugly: Destroys clothing. Talks incoherently. Does no work. Habits are clean.
" 24 Feb 24/94. His Patient was Committed here under the "Law of 1893" recently declared unconstitutional. He was, today, Taken out and Returned under "new warrant" from Olmsted County. Feb 28/94. No change, since report of 23rd inst, to date. —

Mar 1/2 March 1/94. Wt 196 lbs. Pulse 76. March 12/94. Has been restless for from 5 to 6 hours,
" 2/23 on each of last few nights, sleeping only 3 to 4 hours on each. Has also been very destructive.
" 27 March 27/94. Struck by a fellow patient (Steers) today, causing nose bleed. Mar 28/94. Slept
" 29/31 only 4 hours, last night: was restless & noisy for about 5 hours. Mar 27/94. Is very destructive, breaking every thing he gets hold of; has a habit, of late, of tearing the handles from the doors.
Mar 29/94. Restless 5 hours; slept only 4 hours, last night. March 31/94. Is quite often

(Carried to 80.)

Personal and Medical History of J. R. Spaulding

VOBEY, PICKAS & CHAMBERS, DAVENPORT, IOWA

Whole No. 3477

Residence, 1817 - 4th Ave S. Minneapolis

Date Admission, 16th September 1893

Admitted by, Dr Kilbourne Hour, 7 PM

How Sent, John A. Stelle J of P Hennepin Co.

Sex, Male

Age, 79 years

Civil Condition, widowed

Children, one

Age Youngest Child, —

Occupation, Painter

Degree Education, Common school

Profession Religion, Congregationalist (Lapsed)

Habits, not of the best

Nativity, Vermont (parents also born there).

Physicians Committing, H. Storch & A. Williamson

Correspondents, (Son) C. L. Spaulding 1817 - 4th Ave S.

Family Physician Henry L. Spaulding - Dr Nicollet Ave steps

No. for Year, 47.

Insane Relatives, unknown

Cause Exciting, senility

Cause Predisposing, not stated

Form, Senile Dementia

Accompanying Bodily Disorder, Epileptoid convulsions

Suicidal or Not, not

Date of this Attack, 1½ years ago

Duration, 1½ years.

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 77 -

Time of Leaving, 2nd December 1894

Time in Hospital, 1 Year 2 mos 16 Days.

Result, Died; Exhaustion in Senile Dementia.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by D. Phelps - Nov 4/93.

MENTAL ACTIVITY:

Clear or Confused, clear and

Quick or Sluggish, fairly quick

MEMORY:

Past Events,

Recent Events, not very bad

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Quite good

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State, Quite impaired

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Mental State weak; clouded. —

EMOTIONAL STATE:

Normal, Calm, normal

Indifferent,

Exalted,

Depressed,

DELUSIONS: ✓

Systematized or Not,

Special Subjects,

Transitory or Not, ✓

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, voluble

Personal and Medical History of J. R. Spaulding

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ WEIGHT, ✓ NUTRITION, Quite Good

WOUNDS OR ABNORMALITIES, probably none

TONGUE, Tremors, Flabby & large ~~Coatings~~, not inflamed Promptness Movement, ✓

PUPILS, Equality, equal Size, about normal

Response Light, ✓ Accommodation,

SIGHT, Impaired

HEARING, Slightly impaired.

COORDINATION, Arms, Cannot stand with eyes shut. Has difficulty in standing at all; typical ataxia.

Case No. 3477. J.R. Spaulding. Vol. 25.

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, Senile Dementia

SENSIBILITY,

HEART, Murmur after 1st Sound.

LUNGS, good; arteries normal.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Kept 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 J. R. Spaulding

GIBERT, FICKLE & CHAMBERS, DAVENPORT, IOWA

Whole No. 3477

Residence, 1812 - 4th Ave S. Minneapolis

Date Admission, 16th September 1893

Admitted by, Dr Kiebourne Hour, 7 PM

How Sent, John A. Steele Jof P. Hennepin Co.

Sex, Male

Age, 79 years

Civil Condition, widowed

Children, one

Age Youngest Child, —

Occupation, Painter

Degree Education, Common school

Profession Religion, Congregationalist (Lack

Habits, not of the best

Nativity, Vermont (parents also born there).

Physicians Committing, H. Herrick & A. Williamson

Correspondents, (Son) C. L. Spaulding. 1812 - 4th Ave So.

Family Physician Henry S. Spaulding - 58 Nicollet Ave Neffs

No. for Year, 47.

Insane Relatives, unknown

Cause Exciting, senility

Cause Predisposing, not stated

Form, Senile Dementia

Accompanying Bodily Disorder, Epileptiform convulsions

Suicidal or Not, not

Date of this Attack, 1½ years ago

Duration, 1½ years.

No. of Attack, 1st

Dementia —

Ed by D. Phelps - Nov 4 93.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, clear and

Quick or Sluggish, fairly quick

MEMORY:

Past Events,

Recent Events, } not very bad

Special Subjects,

PERCEPTIVITY:

Alert or Dull, } quite good

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State, } quite impaired

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Mental State weak; clouded. —

EMOTIONAL STATE:

Normal, Calm, normal

Indifferent,

Exalted,

Depressed,

DELUSIONS: ✓

Systematized or Not,

Special Subjects,

Transitory or Not, ✓

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, voluble

Personal and Medical History of J. R. Spaulding

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ WEIGHT, ✓ NUTRITION, Quite Good

WOUNDS OR ABNORMALITIES, probably none.

TONGUE, Tremors, Flabby & large ~~Coatings~~, not inflamed Promptness Movement, ✓

PUPILS, Equality, equal Size, about normal

Response Light, ✓ Accommodation,

SIGHT, Impaired

HEARING, slightly impaired.

COORDINATION, Arms, } cannot stand with eyes shut. Has difficulty in standing at all;

Legs, } due to weakness of old age, rather than a typical ataxia.

TREMORS, Hands, not much Tongue,

Facial Muscles, General,

REFLEXES, Patellar, 2 to 3 — somewhat sluggish. —

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Senile dementia

SENSIBILITY,

HEART, Murmur after 1st Sound.

LUNGS, Good; arteries normal.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Kept Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Record 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,

TUBBY, FICKAS & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriffs Adolph Peterson, attended by Lewis Marsch, with the following history. As to consanguinity or heredity, unknown. This is 1st attack; time of first symptoms not precisely known, but about one year & a half ago. Disease seems increasing; is not variable; no rational intervals. Is now demented upon all subjects involving mental action. Has stumbates openly; habits are filthy. Urine & feces are passed involuntarily. Is also destructive of clothing. Is not disposed to injure others nor suicidal. No history of intemperance known. Has had epileptoid convulsions from excessive masturbation. Was confined one day in jail. Supposed cause of disease is senility. Has not been under treatment. ——

On personal examination, is found lying on floor, with clothing disarranged, shirt torn open; had also urinated where he was lying, and person was exposed. Gave age incorrectly; replied as to birth place correctly. But language was usually irrelevant & he was decidedly irritable. Lay quietly on floor, partially disrobed. Appearance & manner indicative of mental failure.

Sep 16 Sep 16/93. On admission, is Completely helpless; an aged and infirm man. Had to be carried up to ward. Was put on 13th. Pulse 78. R 24. There are noticed bruises & discolorations on ribs & arms. (Appears rather helpless.)

" 17 Sep 17/93. Slept fairly well, last night. AM. Pulse 78. R 22. Appetite fairly good; bowels normal. No cough has been noticed. Has been quiet & well-behaved today; inclined to crawl about the ward. Talks readily.

" 18 Makes no complaints. Sep 18/93. Slept well for 6 hours, last night; afterwards, was restless. AM. Pulse 76 R 20. Appetite fairly good; bowels regular; no cough noticed. Patient still quiet & a little more Contented.

" 19 Answers are correct. Sep 19/93. Passed last night, about as the one preceding. AM. Pulse 82. R 18.

" 20 Sleeps & eats fairly well. Bowels regular. Seems to become more quiet. Sep 20/93. Slept fairly well, last night. Am. Pulse 92. R 19. appetite is good. Sep 21/93. Last night, patient slept well, after being in bed 2 hours or so. Am. Pulse & Respiration about normal, now. Appetite fair. Patient is

" 22 quiet & well-behaved. Sep 22/93. Slept but 5 hours last night; was somewhat restless. Appetite sometimes good. Is quiet. Talks feebly & incoherently. Sep 23/93. Slept fairly well, though he was restless

" 23 in the early part of night. Appetite good. No cough noticed. Is rather restless by day. Talks readily

" 24 and Connectedly, though very childish in his remarks. Sept 24/93. Slept well, last night. Eats well.

" 25 Is restless by day & anxious to move around. Conversation childish. Sep 25/93. Continues about the same. Pulse & respiration about normal. Is peevish & difficult to please. Very particular in his movements.

" 26 Sep 26/93. Slept well, last night. Appetite good. Very troublesome; also very difficult to please him.—

" 27 Sep 27/93. Mentally, he is peevish & wrat-minded & is failing, quite surely. Sep 28/93. No change, though he

" 28 appears to be rapidly growing more helpless. Sep 30/93. Condition remains about as last reported; no apparent change. Patient is in the helpless stage of Paresis.

Oct 1/7 Oct 1/93. Weight 143 pounds. Pulse 67. Oct 7/93. Eats & sleeps fairly well. Bowels are regular & he is not now so dirty in his habits as at time of admission, and he does not now soil his clothes during the day. No cough noticed. He is well-behaved. Talks freely & rationally. Has been 17 days dirty since

" 31 admission and three prior to Oct 10th. His health seems good. Oct 31/93. Patient is in a fair state of bodily health. Has again become quite dirty in habits, soiling & wetting his bed.

Nov 1/30 Nov 1/93. Wt 146 pds. Pulse 100. Nov 30/93. Appetite fair; bowels loose. No cough observed. Has scarcely any power in his lower limbs. Is well-behaved, but peevish & has a great many imaginary wants & complaints. Talks freely, but feeble-mindedly. Habits are dirty. (was 29 days dirty, during the month). Patient recently fell against radiator & got his hand burned slightly.

1893

Dec 1/31 Dec 1/93. Wt 147 pounds. Pulse 68. Patient is gaining some, in flesh. Dec 31/93. Appetite fair; bowels regular. No cough noticed. Has lost power of his lower limbs, and cannot walk. There is no change in his conduct, behavior or mental condition, since last reported. (Has been dirty 29 days, this month).—

1894
Jan 1/31 Jan 1/94. Wt 148 pds. Pulse 90. Jan 31/94. No material change. Cannot walk, owing to the weakness in his limbs. Has to be placed in bed, dressed & undressed; is very helpless. Is a very troublesome patient; continually calling upon the attendants for trifles &c. Physical health seems good. Is fairly well-behaved; but is querulous, discontented, complains groundlessly. Talks well & readily. Habits continue dirty. (Was dirty or wet 30 days, during the month.) ——

Feb 1/23 Feb 1/94. Wt 154 pds. (a gain of 6 pd, in past month). Pulse 84. Feb 23/94. Above note of Jany 31st still holds good. Patient is still very dirty in his habits. — ——

" 24 Feb 24/94. This Patient was committed here under the "Act of 1893" recently declared unconstitutional. He was, today, Taken out and Returned under "new Warrant" from

" 28 Olmsted County. Feb 28/94. Patient does not change any from what is reported in note of Jany 31/94. Has been dirty 28 days during the month. His very filthy habits may, to a certain extent, be attributed to his paralyzed condition. Is in fairly good health, for him —

Mar 1/31 March 1/94. Wt 159 pounds (a further gain in flesh). Pulse 84. Mar 31/94. No change to note.

Apl 1/30 April 1/94. Wt 158 " Pulse 84. April 30/94. No change; habits very dirty everyday during month.

May 1/31 May 1/94. Wt 161 " " 91. May 31/94. Does not change any from month to month, but of late, is becoming destructive. Habit continues very dirty. (was dirty 31 Days during this month)

June 1/30 June 1/94. Wt 154 pds. Pulse 84. June 30/94. No change (" 30 " " ")

July 1/31 July 1/94. Wt 160 " " 83. July 31/94. About the same (" 31 " " ")

Aug 1 Aug 1/94. Wt 154 " " 72. (There is senile dementia, with great inability to walk. D.P.)

" 31 Aug 31/94. Sits in chair all day; owing to his paralyzed condition, he has to be dressed & undressed. Is quietly-behaved. Talks very little, but answers questions sensibly. (Dirty 31 Days during month).

Sep 1/30 Sep 1/94. Wt 154 pds. Pulse 72. Sep 30/94. No change to report, in Case. (Dirty 30 " " ")

Oct 1/31 Oct 1/90 Wt 148 " " 76 Oct 31/94. Condition has remained unchanged (Dirty 31 " " ").

Nov 1/30 Nov 1/94. Wt 136 pds. Is failing quite markedly, of late. Pulse 99. Nov 1/94. Appetite rather poor. Is fed extra diet. Bowels normal; no cough noticed. Is now quite helpless. Talks very little, but his answers to questions are sensible. Is childish & very feeble-minded. Habits are very dirty, this.

" 29 Nov 29/94. Patient groaned considerably, when being dressed this morning. Took no breakfast. His eyes were almost closed & he appeared to be suffering & unable to speak. Took a few mouthsful at dinner & he was evidently weak & sick, he slept in bed. Was in a half stupid condition.

" 30 Pulse 96. R 24. T 102 2/10 deg. Nov 30/94. Patient's temperature rose during the night, but was reduced to 101 6/10 deg in the morning. Pulse intermittent; arteries atheromatous. Slept well & partook of some food. P 96. R 37. My 102 4/10 deg. Continues to fail. (Was dirty 30 day, during the month)

Dec 1 Dec 1/94. Wt (in underclothes) 117 pds. (a quite marked loss in flesh). P 92, intermittent. Patient passed a quiet night. R 36. T 101°. Bowels are active; he was given 4 enema; bowels then moved slightly. He took sufficient food during the day to sustain life. Dec 2/94. His temperature rose during the night to 103 2/10 deg but fell, this morning, to 102 1/10. Pulse 103. R 28. Took light nourishment, during Day. He was, however evidently growing much weaker & breathing was much labored

(Carried to Page 116)

Personal and Medical History of C. A. Sorenson

HERBERT, PIGLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3478.
Residence, Alden, Freeborn
Date Admission, 18th Septe
Admitted by, D. Kilbourne
How Sent, Heman Black
Sex, Male
Age, 38
Civil Condition, Married
Children, 3
Age Youngest Child,
Occupation, Farmer
Degree Education, Liquite
Profession Religion, Lutheran
Habits, unknown; probab
Nativity, Denmark (Parents
Physicians Committing, J. M.
Correspondents, Jens. P. Olesen
Nearest family Physician

J. F. Meagher.

Mr. Meagher moves,

Karen Maria Sorenson

Kolstrup Huus

Wolstrup Sogn Pr. Soby

Denmark

wife's address

1/8/93

Ole

EXAMINATION ON ADMISSION.

Exd by Drs Ely & Morgog. Dec 8/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
- Clear or Confused, fairly clear.
- Quick or Sluggish, somewhat sluggish

MEMORY:
- Past Events, seems fair
- Recent Events, fair
- Special Subjects,

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

REASONING POWER:
- Ordinary Subjects,
- Own Mental State, Does not know what he is here for.
- Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Understands only his native tongue. (Examination conducted through Rev. Severson (Attendant Ward 3) acting as interpreter -

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

DELUSIONS:
- Systematized or Not, none detected now.
- Special Subjects,
- Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:
- Coherent or Incoherent, Coherent
- Voluble or Reticent, reticent

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5 in. WEIGHT, 159 lbs. NUTRITION, Good, now.
WOUNDS OR ABNORMALITIES, none
TONGUE, Tremors, very slight Coatings, slight: large, tooth marks Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, ✓
HEARING, ✓
COORDINATION, Arms, } quite good. Finger to nose, eyes shut, very fairly done.
Legs, } Standing, eyes shut, quite steady.
TREMORS, Hands, none Tongue, very slight
Facial Muscles, ✓ General, none noted.
REFLEXES, Patellar, equal; absent, even on reinforcement.
Other Reflexes,
ARTICULATION, ~~Hesitating~~, fair ~~Slurred~~, foreign accent
FACIAL EXPRESSION, somewhat blank.
SENSIBILITY

Case No. 3478. C.A. Sorenson. Vol. 25.

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

OPHTHALMOSCOPIC EXAM.,

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

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") } no history of heredity obtained - says there is none -
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

GIBBS, PICKAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3478.
Residence, Alden, Freeborn County, Minn.
Date Admission, 18th September 1893
Admitted by, D. Kilbourne Hour, 11. A.M.
How Sent, Heman Blackmer, Jo. P. Freeborn County
Sex, Male
Age, 38
Civil Condition, married
Children, 3 (9?)
Age Youngest Child, —
Occupation, Farmer
Degree Education, Limited.
Profession Religion, Lutheran
Habits, unknown, probably not good
Nativity, Denmark (Parents also born there)
Physicians Committing, J. M. Todd & A. Nissen.
Correspondents, Jens. P. Olesen Alden Freeborn Co. Minn
Nearest Friends, Physcn

No. for Year, 48
Insane Relatives, Unknown
Cause Exciting, Unknown
Cause Predisposing, Unknown
Form, Chronic Mania (Alcoholic Insanity?)
Accompanying Bodily Disorder, None given in history.
Suicidal or Not, not
Date of this Attack, During last winter
Duration, about 9 months.
No. of Attack, 1st (so far as known)
No. of Admissions, 1st
Age First Attack, about 37 (?)
Time of Leaving, Dec. 1st '94
Time in Hospital, 1y, 2ms, 13ds,
Result, Improved

EXAMINATION ON ADMISSION.

Exd by Drs Ely & Herzog. Dec 8/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, fairly clear.
Quick or Sluggish, somewhat sluggish
MEMORY:
Past Events, seems fair
Recent Events, fair
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, correct
REASONING POWER:
Ordinary Subjects,
Own Mental State, Does not know what he is here for.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Understands only his native tongue. (Examination conducted through Mr. Severson (Attendant B3) acting as interpreter —

EMOTIONAL STATE:
Normal, Calm, Yes
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None detected now.
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, reticent

—(Continued.)

NUTRITION, Good, now.
ness Movement, Prompt
nal
yes
shut, very fairly done.
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gn accent

Case No. 3478. C.A. Sorenson. Vol. 25.

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

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Records kept Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") no history of heredity obtained - says there is none -
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of C. A. Sorenson

HERBERT, PUCAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3478.

Residence, Alden, Hardin Co

Date Admission, 18th Septe

Admitted by, D. Kilbourne

How Sent, Iowa Electric

Sex, Male

Age, 38

Civil Condition, Married

Children, 3

Age Youngest Child,

Occupation, Farmer

Degree Education, Limited

Profession Religion, Lutheran

Habits, Unknown; probably

Nativity, Denmark (Parents

Physicians Committing, J. M.

Correspondents, Jens. P. Olesen

Heredity Physical

J. F. Meagher.

Mr. Meagher moves,

Karen Marie Sorenson

Kielstrup Huus

Walstrup Sogn Ror Selv

Denmark

wife's address

17/8/93

EXAMINAT

MENT

Exd by Drs Ely & Herzog. Dec 8/93.

MENTAL ACTIVITY:

Clear or Confused, fairly clear.

Quick or Sluggish, somewhat sluggish

MEMORY:

Past Events, seems fair

Recent Events, fair

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects,

Own Mental State, Does not know whether is here for.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Understands only his native tongue. (Examination conducted through Mr. Severson (Attendant B3) acting as interpreter -

Normal, Calm, ✓

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None detected now.

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, coherent

Voluble or Reticent, reticent

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5 in WEIGHT, 159 lbs NUTRITION, Good, now.

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, very slight Coatings, slight: large, tooth marks Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation, Yes

SIGHT, ✓

HEARING, ✓

COORDINATION, Arms, quite good. Finger to nose, eyes shut, very fairly done.

Legs, Standing, eyes shut, quite steady.

TREMORS, Hands, none Tongue, very slight

Facial Muscles, ✓ General, none noted.

REFLEXES, Patellar, equal; absent, even on reinforcement.

Other Reflexes,

ARTICULATION, ~~Hesitating~~, fair ~~Slurred~~, foreign accent

FACIAL EXPRESSION, somewhat blank.

SENSIBILITY,

HEART, sounds somewhat faint; no murmurs.

LUNGS, sounds are good.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Records kept Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") no history of heredity obtained - says there is none -

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of C. A. Sorenson

SMULEY, PIDLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by H. C. Mitchell, Sheriff, with the following history which is rather meagre in many points. There is no history of consanguinity; as to heredity, unknown. This is 1st attack, so far as known, occurred during last winter; made an indecent assault on a little girl. Disease appears stationary; is not variable; no rational interval. Derangement is now shown by his making frequent assaults on women & girls; refusal to work, and refusal to stay in places, where he might be cared for. Is not suicidal. Is careless in personal habits. As to any previous peculiarities, history of intemperance, any severe disease or injury to head, nothing seems to be known. Has not been restrained or confined nor under medical treatment. Dont know cause of disease. — On personal examination, denies the charges against him, & other facts. Answers all questions; and appeared rational; was quiet; good(3) physical condition.

Sep 18 Sept 18/93 Patient is in poor physical condition. Was, at admission, put on B³. Pulse 72. R 18. Refused to allow taking of temperature. No injuries or peculiarities noticed. Appetite good; bowels moved. No cough noticed. While out for exercise today, was caught in the act of masturbating. No complaints or injuries to note. Sept 19/93 Slept well, 7 hours, last night. AM. Pulse 70. Appetite is good. —

" 19 " 20 Sept 20/93. Again rested & slept well, last night. AM. Pulse 74. Appetite continues good. Will occasionally talk to himself & will also, at times, sing quite loudly. Does not seem to realize where he now is.

" 21 Sept 21/93. Slept well, last night. AM. Pulse 72. Appetite good. Sept 22/93. Slept 8 hours, last night.

" 22 " 23 AM. Pulse 70. Appetite continues good. Sept 23/93. Was restless for 2 hours but slept 7 hours last night.

" 24 AM. Pulse 66. Appetite good. Is troubled with frequent micturation. Sept 24/93. AM. Pulse 66.

" 25/26 Sept 25/93. Has slept 8 hours, a each of past 2 nights. AM. Pulse 66. Sept 26/93. Slept 6 hours, being restless for 3 hours, last night. AM. Pulse 72. T 97.2 (R). Appetite good. Bowels regular.

" 27 Sept 27/93. Slept well, 8 hours, last night. AM. Pulse 84. T. 99. Always seems happy. Quite often asks to go home. Says "there is nothing the matter with him". Sept 28/93. Slept but 6 hours, last night; restless 3 hours or so. AM. Pulse 90. T 99. Appetite Continues Good; bowels regular.

" 28 " 29 Sept 29/93. Passed last night similarly to the one preceding. AM. Pulse 84. T 99. Sings & talks to himself a good deal. Does not yet seem to realize where he is. Sept 30/93. Slept 7 hours, restless for 2 hours, last night. AM. Pulse 86. T 99.2. Appetite good. Bowels move.

Oct 1 Oct 1/93. Restless for 2 hours or so, but slept 7 hours, last night. AM. Pulse 66. T 99. Bowels regular.

" 2 " 31 Appetite remains good. Oct 2/93. Slept well, 8 hours, last night. AM. Pulse 82. T 98.4. Is well-behaved, inward. Weight, today, 161 pounds. (a slight gain). Oct 31/93. Appetite is good; bowels regular. Walks the floor & sings a good deal of the time. Otherwise quiet & well-behaved. Talks rather foolishly. Says "he wants to go home, as there is not anything the matter with him". Passes his urine every 10 minutes. Habits are clean.

Nov 1/30 Nov 1/93. Wt 166 pds. (is still gaining in flesh). Pulse 78. Nov 30/93 Appetite Continues good; bowels regular. Is quietly behaved; does not cause any trouble. Talks to himself; sings &c. Seems to have some trouble with his urinary organs, as he passes his water very often. Habits are clean.

Dec 1/31 Dec 1/93. Wt 169½ pds (a gain of 1½ pds in past month). Pulse 70. Dec 31/93. No change since last quarterly note.

Jan 2/31 Jan 2/94. Wt 171 pds (shows some loss). Pulse 78. Jan 31/94. Apparently rests and sleeps well, at night. Appetite good. Bowels regular. No delusions noted, though possibly he may have some, as he is always talking to himself. Does no work. Habits clean. Is in good physical condition.

Feb 1/28 Feby 1/94. Weight 172 pds. Pulse 80. Feby 28/94. Appetite continues good & bowels regular.

Personal and Medical History of C. A. Sorenson

1894

Cont'd

Feb 28 Is well-behaved. Does not speak English. Is continually talking to himself. Is not very tidy about his clothing, but habits are fairly clean. Seems in good physical condition. Does no work.

Was taken out today, and committed under "old law" from Olmsted County

Returned to B³. Feb 28/94. Appetite good; bowels regular. Behavior is good, though he is always talking to himself; talks incoherently; still seems to have some trouble with his urinary organs, as he passes his urine every little while. Habits fairly clean. Works some. Physical condition seems good.

Mar 1 March 1/94. Wt 170½ pds. Pulse 72. March 31/94. No change to note. —

Apr 2/30 April 1/94. Wt 174 " " 78. April 30/94. Patient does not seem to be so much bothered in passing his urine as he has previously been. Mother suspects there is no change to note.

May 1/31 May 1/94. Wt 174 pds. Pulse 84. May 18/94. Above general note (Feby 28) still holds good to this date.

June 30 Was transferred to Annex today. June 30/94. Patient keeps about the same. Works on the farm.

July 31 July 31/94. Keeps in good flesh & physical condition. Does not work at present. Otherwise about same.

Aug 31 Sept 30 Oct 31 Nov 30 During this period, Patient has remained in or the hall; has quit work; is noisy & restless, walking the floor, most of the time, & sings incessantly. (Attempted to escape on Sept 18th). Habits are clean, but he is untidy about his dress & personal appearance. Health is good. —

Nov 30/94. Still continues noisy & restless; walks the floor a great deal; talks & sings loudly, nearly all the time, causing a good deal of trouble from this source. Speech is incoherent. He is much inclined to be indolent. Does no work, at present. Habits clean; dress neat; health apparently good. (Was visited by relatives on 28th inst & arrangements were made for their taking patient home to Denmark).

Dec 1 Dec 1/94. This morning, patient was taken by the Supervisor, as far as St Paul, Minnesota, where it was arranged he would be met by the relatives. He was donned, & in the evening of that day, they left with him for the Old Country.

Discharged Feb. 6th '95.

From Folio 84

Frederick Andreason

Mch 1 Still gets about with considerable difficulty: Rather more irritable than before. Apr 8 5:55 PM. Had apoplectic stroke, fell heavily to floor: Left side paralyzed: Condition aphasic & helpless: Temp 100 P 112 R. 24. Breathing stertorous. Mch 9 Took 6 glasses milk during day. Still comatose: Has difficulty in swallowing. Visited by daughter. Mch 10 Evening temp 105 P 120 R 45. Still unconscious: During night failed gradually: Heart's action becoming more labored. At 8:30 AM. died. Cause of death apoplexy, probably haemorrhage. Face was always red. Arterial tension high.

Died.

Personal and Medical History of John Langan

HERBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3480.
Residence, Wykoff, Minn.
Date Admission, 19th September 1893.
Admitted by, D. Kilbourne Hour, 11 AM.
How Sent, E.V. Parrington, Jof C. Fillmore County
Sex, Male
Age, 34 years
Civil Condition, married
Children, Two
Age Youngest Child, —
Occupation, Carpenter
Degree Education, Common School
Profession Religion, Catholic
Habits, Very Intemperate
Nativity, New York, (Parents born in Ireland)
Physicians Committing, C. A. Robbins & J. A. Phillips
Correspondents, (Husband and) W. L. Rutherford. Wykoff, Fillmore Co Minn
Family Physician D. C. A. Robbins

No. for Year, 50
Insane Relatives, None
Cause Exciting, not Known
Cause Predisposing, not Known
Form, Mania a-potu
Accompanying Bodily Disorder, great nervousness & tremor
Suicidal or Not, not; but has threatened others.
Date of this Attack, abut 10 days ago
Duration, abut 10 days
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 34 years
Time of Leaving, Oct. 14" 93
Time in Hospital, 26 ds.
Result, Recovered

EXAMINATION ON ADMISSION.

Exad by D. Ely Sep 20/93 —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, quite quick

MEMORY:
Past Events, } seems quite good
Recent Events, }
Special Subjects, }

PERCEPTIVITY:
Alert or Dull, not very alert
Correct or Illusive, Correct

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

GENERAL DESCRIPTIVE REMARKS:
Admits having been drinking quite hard, for some days. Seems to have a craving for liquor & once he gets started cannot stop; "can't control his desire" he says.

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

DELUSIONS:
Systematized or Not, } none noted
Special Subjects, }
Transitory or Not, }

HALLUCINATIONS: none detected
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, fairly free

Personal and Medical History of John Langan

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9 in WEIGHT, 142 ½ lbs NUTRITION, Seems quite good, tho he is somewhat anaemic
WOUNDS OR ABNORMALITIES, none noted
TONGUE, Tremors, some Coatings, white centre; clear edges Promptness Movement, quite prompt
PUPILS, Equality, Equal Size, dilated
Response Light, yes Accommodation, yes
SIGHT, good
HEARING, Good
COORDINATION, Arms, fingers to nose, eyes shut, slight inaccuracy.
Legs, standing, Eyes shut, some swaying.
TREMORS, Hands, some Tongue, some
Facial Muscles, General, some general tremulousness
REFLEXES, Patellar, equal; abnt normal
Other Reflexes,
ARTICULATION, ~~Hesitating,~~ quite good ~~Slurred,~~
FACIAL EXPRESSION, abnt normal; though somewhat depressed.
SENSIBILITY, normal
HEART, Sounds good; action quite rapid
LUNGS, Sounds are good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, } mother living; claims healthy; father died of tumor. } no history of heredity
Father or Pat. Relations, } known —
Brothers or Sisters, living, and healthy, he claims.

1893 It was brought here by his brother-in-law H. J. Rutherford, with the following history. There is no history of consanguinity or heredity. This is 1st attack, occurring about 10 days ago; left his home; went to a neighboring town to get liquor & has been drunk ever since. Drinking seems increasing, but is variable and there are rational intervals. He has an impulse to get drunk once in 2 to 4 weeks: he has no control over this impulse & will run away to other towns to get liquor. Has threatened to injure others and his wife is afraid of him. Is not suicidal, nor filthy nor destructive. Has not been subject to any severe disease or injury to head. Has not been restrained or confined. Don't know cause of disease. On personal examination, is found to be very nervous & tremulous; pupils widely dilated; skin yellow; temperature about 101. He said he could not control his desire for drink & wished to be confined in a hospital. Manner very nervous & excitable. He has been away, without food for 10 days & was found in an old shed in an adjoining town, almost exhausted.

Sep 19 Sep 19/93. On admission, is in fair physical condition. Quiet. Has put on Bx. Bodily condition clean. No injuries or peculiarities noticed. Pulse 100. T @ 99 (in PM). Appetite is good; but bowels constipated. No cough noticed. Is quietly behaved, clean, tidy & of good personal habits. Went out walking today.

" 20 Talks freely & sensibly; no delusions noted. No injuries or complains to note. Sep 20/93. Slept 8 hours last night, and was quiet. AM. Pulse 100. T @ 98.8. Given dose of salts today. Appetite is good. Talks freely; reads some; plays games; seems to be a rational patient. Willing to help with the ward-work.

" 21 PM. Pulse 96. T @ 98.6. Sep 21/93. Rested & slept well, 8 hours, last night. AM. Pulse 90. T @ 98.8. Appetite continues good. Quiet & well-behaved. Talks quite freely. PM. Pulse 92. T @ 98.6.

" 22 Sep 22/93. AM. Pulse 106. Conduct & behavin about the same. Appetite good. Is on medicine.

" 23 Sep 23/93. AM. Pulse 102. Makes no complaints. Seems fairly contented. Sep 24/93 AM Pulse 88.

" 25 Sep 25/93. Has continued to sleep well, uniformly 8 hours, each night. Has been quiet. Appetite good. Bowels have become about normal. Plays games; reads; goes out walking & helps with hall-work.

" 26 Sept 26/93. Was today transferred to B3. Is quiet; pleasant & sociable. Talks some of going home.

" 27 Sep 27/93. Went out walking this morning, with the rest. Plays billiards some. Appears to be quite

" 28 sensible in his talk & actions. Pulse 84. R 17. Sep 28/93. Quiet & well-behaved. Appetite good.

" 29 Says that he rests well, at night. Pulse 80 - R 17. Sep 29/93. AM. Pulse 81. R 18. Has been somewhat uneasy today; asking many questions about the Hospital & about going home.

" 30 Pulse 81. R 18. Sep 30/93. AM. Pulse 82. R 17. Seems to be discontented. Complains of his bowels troubling him.

Oct 1 Oct 1/93. Has had no "spells" since coming here. Appears to be getting along nicely here.

" 2 Does no work. Plays games, billiards &c. Reads some. Oct 2/93. Since coming on to this ward, patient has not changed much, except that he would get a little uneasy about home at times. Has complained, from time to time, of constipation & of pains in his bowels. Pulse & Respiration have become about normal. Appetite is good & physical health has improved. Is quiet & well-behaved. Says "he feels better than he has been for some time."

" 4 Oct 4/93. Wt 150 pounds (a gain of 7½ pounds since admission). Pulse 84.

" 14 Oct 14/93. Has continued about the same. Has been uniformly quiet & well-behaved. Does not care to say anything about himself or his business. Appeared to worry & fret, at times. Was a little irritable & reserved about being placed here. Professed to have seen enough of the effects of liquor here to prevent his ever drinking again. Went home with his brother today, on trial.

1893 Oct 14 (Contd) Discharged

1893 Oct 8/ From 20. Albert Luning

and takes but little interest in anything. Oct 8/ 10/94 Has

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DETAILED HISTORY OF SICKNESS OF MR Albert Luning
DIAGNOSIS.

DATE	HOUR	PULSE: AM	PULSE: PM	RESP: AM	RESP: PM	TEMP: AM	TEMP: PM	
Oct 1.								Weight 150 lbs. Chin rather in convex order every day - was bowels regular Sept 27th - appetite good - bowels fairly regular
Oct 7.								Chin still sore - dressed as before - Patient visits all over ward - appetite very good - bowels regular - Patient seems pleasant and takes little interest in anything.
Oct 8th								Patient visited by father - would not talk to him -
Oct 10th								Chin still sore - kept wet with Carbon oil - very sore - Appetite good - bowels regular - Patient does not talk - and takes no interest in his surroundings.
Oct 11								Chin dressed - treatment well - Carbon oil to be continued
Oct 14								Chin dressed every day - Sore still open - will not let it heal - keeps packing the sore off - and will not clean - dressing very painful - Patient gives us - hands to keep him from - pressing dressing - Look out for him
Oct 23								Chin much better - Patient still dull - and takes no interest in any thing going on - about him - appetite very good - bowels regular.
Oct 25								Transferred to B3.
								26 Slept 8 hours
								Visited by Father & Brother
Oct 30								Appetite good - Bowels regular - Behavior
	31							Still stupid - never speaks to anyone - sits all day - does sitting in one place most of the time

4

1893
Oct 14 (Contd) seem enough of the effects of liquor here to prevent his ever drinking again.
Went home with his brother today, on trial.

Discharged

From 20. **Albert Luning**

and takes but little interest in anything. Oct 8/94. Visited by father; would not talk to him. Oct 10/94. Chin still kept sore by patients picking at it continually. Brow is dressed daily. He does not talk. Is dull & uninterested. Oct 23/94. Brow still keeping sore, by patients picking at it & has been put in mitts during the past 5 days. Mitts were removed today. Oct 25/94. Brow has healed nicely & chin is now much better. Patient is still very dull, stupid & uninterested in anything going on about him. Was, today, transferred to Ward B3. Oct 30/94. Was visited by father & brother. Oct 31/94. Patient does not seem to make any improvement. He is very dull, stupid & uninterested in his surroundings. foolish in manner & actions. Never speaks to anyone; sits in one place, most of the time. Is slouchy in dress (See attached Nurse's record). Nov 1/94. Wt 142 lbs. Pulse 90. Behavior quiet. Nov 30/94. Continues very quiet: never speaking to any one: appears dull & stupid: never moving unless calls of nature demand it: habits dirty & filthy. Dec 1/94. Wt 145 lbs. Pulse 96. Dec 17/94. Quite often restless, at night; sometimes noisy; sleeps poorly. Dec 20/94. Visited by father & mother. Dec 30/94. No special change. Is dull & stupid. Dirty in his habits. 1895 Jany 1/95. Jany 3/95. Wt 148 lbs. Pulse 88. Jan 11/95. Transferred to Annex. Jan 31/95. Patient sleeps quite well. Is quietly-behaved: dull & stupid. Appetite good; bowels regular. Is dirty & filthy, still, in habits Feb 28/95. Patient has been in bed for some days: will not help himself & has to be fed, most of time. Feb 28 never speaks; habits filthy. March 31/95. Lies in bed: is filthy: spits on floor & walls. Appetite fair. March 31 Apl 5/95. He has had a slight cold, for several days; coughs a little, with abundant expectoration. His Apl 5 appetite keeps good. Apl 10/95 No cough, but still a expectoration of thick slimy sputum. — Apl 15/95 Apl 18/95. Transferred to B3 East. Apl 29/95. Visited by father & mother. Apl 30/95. Has been very restless, the past few nights & sleeping very poorly. Appetite good, but bowels regular. Is quiet. Was never known to speak & hardly ever moves around at ward, but will sit in one place, not even moving to attend to calls of nature. (Was 7 Days Dirty since coming to this hall, this time.) — May 1/95 May 1/95. Wt 141 lbs. Pulse 116. May 31/95. No change in any way. Habits filthy. (14 Days Dirty during month) June 1/95 June 1/95. Wt 148 " " 98. June 2/95. Visited by father. June 30/95. No special change (2 " " " ") July 1/95 July 1/95. Wt 154 " " 100. (Is gaining in flesh). July 31/95. No change. No note (4 " " " "). Aug 1/95 Aug 1/95. Wt 157 " " 116. Aug 31/95. Always stupid, quiet & dull: never speaking to anyone: always sitting in the same place: staring into vacancy & taking no interest in his surroundings: entirely helpless: has to be dressed & undressed — habits very dirty & filthy. Sept 2/95. Wt 152 lbs. Pulse 100. Sept 15/95. No change Sept 2/95 in any way. (Number of Days Dirty, this month, 11). Sept 17/95. Visited today by father, Sept 17 who was allowed to take patient home with him.

Oct 17 Oct 17/95. Parents were unable to get along with him at home: could not give him the care & watching he required; so his father brought him back this PM. Patient put on B3 —

carried to A. (Transferred) page 224

1893
Oct 1 Oct 1/93. Has had no "Spells" since coming here. Appears to be getting along nicely here. Does no work. Plays games, billiards &c. Reads some. Oct 2/93. Since coming on to this ward, patient has not changed much, except that he would get a little uneasy about home at times. Has complained, from time to time, of constipation & of pains in his bowels. Pulse & Respiration have become about normal. Appetite is good & physical health has improved. Is quiet & well-behaved. Says "he feels better than he has been for some time". —
" 14 Oct 14/93. Wt 150 pounds (a gain of 7½ pounds since admission). Pulse 84. —
" 14 Oct 14/93. Has continued about the same. Has been uniformly quiet & well-behaved. Does not care to say anything about himself or his business. Appeared to worry & fret, at times. Was a little irritable & reserved about being placed here. Professed to have

Personal and Medical History of Ole Swanson



Whole No. 3481.
Residence, St. Paul. Minn.
Date Admission, 19th September 1893
Admitted by, Dr. Kilbourne Hour, 7 PM.
How Sent, John B. Oliver, Jr. P., Ramsey County.
Sex, Male
Age, 38 years
Civil Condition, Single
Children,
Age Youngest Child, —
Occupation, Laborer
Degree Education, Limited
Profession Religion, Lutheran
Habits, Intemperate (but parents temperate)
Nativity, Sweden (Parents also born there).
Physicians Committing, Arthur B. Archer & J. M. Graves
Correspondents, Alex. Swanson (brother) North Branch, Chisago Co. minn

No. for Year, 51.
Insane Relatives, None
Cause Exciting, Weak Intellect & bad habits generally
Cause Predisposing, Weak Intellect &c
Form, Chronic Mania
Accompanying Bodily Disorder, None noted in history
Suicidal or Not, Not
Date of this Attack, 2 days ago
Duration, 2 days.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 38 years.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exd by Dr. Ely; Sept 20/93. MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, admits it is very poor.
Recent Events, fairly good
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Dulled
Correct or Illusive,

REASONING POWER:
Ordinary Subjects, not very good
Own Mental State, perverted
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Says I was in Workhouse St. Paul; was sent badly there; tells a story of a bad law-suit he had. Has been hunting for a job for 2 or 3 years, to marry Lev. Was good deal of money; "Christ Pet"; in 2 or 3 Bank "7500.000" — Says his brother is taking charge of it for him. Was divorced from a girl & this was reason people were going to kill him." Admits having drunk quite hard.

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

DELUSIONS:
Systematized or Not, regarding marriage & wealth; also
Special Subjects, about people, lots of them, going
Transitory or Not, to kill him.

HALLUCINATIONS: None noted —

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Fairly Coherent
Voluble or Reticent, Ref in answering to questions.
More so, re subject of his delusions.

Personal and Medical History of Ole Swanson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 114 lbs. NUTRITION, only fairly good; skin is quite yellowish Patient is anaemic.
WOUNDS OR ABNORMALITIES, of wrists, probably nerve; has a contractive of some of muscles producing deformity of wrist and fingers of right hand; caused by being stabbed, circular saw — Rupture (?)
TONGUE, Tremors, None Coatings, None Promptness Movement, rather slow
PUPILS, Equality, Equal Size, dilated
Response Light, Yes Accommodation, Yes
SIGHT, Some impairment.
HEARING
Case No. 3481. Ole Swanson. 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.
d.
REFLEXES, Patellar, equal & about 4 — 5th Ost scale.
Other Reflexes,
ARTICULATION, ~~Hesitating,~~ Quite good ~~Slurred,~~ Some foreign accent.
FACIAL EXPRESSION, drawn & depressed
SENSIBILITY, Normal
HEART, Sounds are good; beats quite rapidly.
LUNGS, Sounds are good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother living; quite nervous; sick all the time } no history of heredity beyond the above as to mother.
Father or Pat. Relations, father dead — about 65 — don't know cause
Brothers or Sisters, brothers & sisters living are healthy.

Personal and Medical History of Ole Swanson

HERBERT, PUGLAM & CHAMBERS, DAVENPORT, IOWA



Whole No. 3481.

Residence, St. Paul. Minn.

Date Admission, 19th September 1893

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

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

Sex, Male

Age, 38 years

Civil Condition, Single

Children,

Age Youngest Child, —

Occupation, Laborer

Degree Education, Limited

Profession Religion, Lutheran

Habits, Intemperate (but parents temper

Nativity, Sweden (Parents also born there).

Physicians Committing, Arthur B. Ancker & J.M. Graves

Correspondents, Alex. Swanson (brother)
work Mauch, Chicago Comm

No. for Year, 51.

Insane Relatives, None

Cause Exciting, Weak Intellect & bad habits generally

Cause Predisposing, Weak Intellect &c

Form, Chronic Mania

Accompanying Bodily Disorder, none noted in history

Suicidal or Not, Not

Date of this Attack, 2 days ago

Duration, 2 days.

Result,

EXAMINATION ON ADMISSION.

Exd by Dr. Eby; Sept 20/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Fairly Clear

Quick or Sluggish, Active

MEMORY:

Past Events, admits it is very poor.

Recent Events, fairly good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dulled

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, not very good

Own Mental State, perverted

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Says was in Workhouse, St. Paul; was used badly there; tells a story of a law-suit he had. Has been hunting for a girl for 2 or 3 years, to marry her. "Has a good deal of money"; "Charity Girl"; in 2 or 3 years "7500.000," Says his mother is taking charge of it for him. Was divorced from a girl & this was reason people were going to kill him!" Admits having drunk quite hard.

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Yes

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or ~~Not~~, regarding marriage & wealth; also

Special Subjects, about people, lots of them, going

Transitory or Not, to kill him.

HALLUCINATIONS: none noted -

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Fairly Coherent

Voluble or Reticent, Yes in answer to questions.

More so, on subject of his delusions.

Personal and Medical History of Ole Swanson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 142 lbs NUTRITION, only fairly good; skin is quite yellowish & patient is anaemic.

WOUNDS OR ABNORMALITIES, of wounds probably recent; has a contracture of some of muscles producing deformity of wrist and fingers of right hand; caused by being violently circular saw — Reputed (?)

TONGUE, Tremors, None Coatings, None Promptness Movement, rather slow

PUPILS, Equality, Equal Size, Dilated

Response Light, Yes Accommodation, Yes

SIGHT, Some impairment.

HEARING, Some slight impairment.

COORDINATION, Arms, Finger to nose, eyes shut, fairly correct.

Legs, Standing, Eyes shut, Some swaying.

TREMORS, Hands, none marked Tongue, None

Facial Muscles, General, None noted.

REFLEXES, Patellar, Equal & about 7 — Dr. P's Scale.

Other Reflexes,

ARTICULATION, ~~Hesitating,~~ Quite good ~~Slurred,~~ Some foreign accent.

FACIAL EXPRESSION, Drawn & depressed

SENSIBILITY, Normal

HEART, Sounds are good; beats quite rapidly.

LUNGS, Sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother living; quite nervous; sick all the time } no history of heredity beyond the above as to mother.

Father or Pat. Relations, father dead — about 65 — don't know cause

Brothers or Sisters, Brothers & sisters living are healthy.

Personal and Medical History of Ole Swanson

SIBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Deputy Sheriff R C Haas, attended by Dr. F. Simonds, with following history. No history given of consanguinity or heredity. This is 1st attack; was never sent to hospital. Came home about 2 days ago; talked incoherently & had delusions. Disease seems increasing; not variable & no rational intervals. He now believes that he has great wealth; that some unknown girl is waiting to marry him, and that her family are conspiring to kill him & that others have tried to kill him for his alleged wealth. Is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Patient has never been very strong, mentally. Has been intemperate as to use of tobacco & liquor, but his parents were temperate. There is no history of any severe disease or head-injury. Has not been restrained or confined nor under medical treatment. The supposed cause of disease is, primarily, weak intellect & bad habits generally. On personal examination is found badly nourished, physically & mentally. Laughed in an imbecile way. Talked of marriage, great wealth & murderous enemies. Talked of a girl who would marry him, as soon as he saw his brother Swan, who, he alleges, has a large sum of money belonging to him & of enemies who wanted to kill him for his money. His manner was that of an insane person.

Sep 19 Sep 19/93. The patient is in good condition, apparently. On admission, put on B3. Has a scar on his right arm; says he got it from a Circular Saw; came very near losing his arm. Sep 20/93. Slept fairly well, last night. Appetite good. Bowels have moved. No cough has been noticed. Is quiet and well-behaved. No complaints or injuries to note. Says he has been here once before, but does not recollect when or how long ago. Has been asking for his brother, several times, during the day. Has not done any work for about 4 years. Sep 21/93. Slept 7 hours last night & was quiet. Appetite good. Sep 22/93. Was restless for 2 hours or so, last night, but slept 7 hours. Sep 23/93. Slept well, 8 hours, last night. Appetite continues good. Bowels regular. Sep 24/93. Sep 25/93. Sep 26/93. Sep 27/93. Sep 28/93. Sep 29/93. Oct 1/93. Oct 2/93. Oct 3/93. For the past 10 nights, patient has been sleeping well, only on 2 nights being restless for a short time. Has also been quiet & well-behaved by day. Appetite has been good; bowels regular. Patient keeps along in a rather dull way; seems to be in a chronic condition. Habits are clean. Weight 157 pds. (again of 10 pounds since his admission). Pulse 70. Oct 20/93. Appetite continues good & bowels regular. Very quiet. Hardly Ever speaks, yet will answer questions. Has a very bad rupture; seems to have trouble in walking. Actions are rather childish. Habits clean. Oct 31/93. No change to report, since last note.

Nov 1/30 Nov 1/93. Wt 159 pds. (Has made quite a gain in weight). Pulse 78. Nov 30/93. Appetite good; bowels regular. Quiet & well-behaved. Sits in one place, most of the time; will answer when he is spoken to. Is contrary, however, & stubborn at times. Habits are clean.

Dec 1 Dec 1/93. Wt 153 pounds (a further gain in flesh). Pulse 72. Dec 31/93. No material change. —

Dec 31 Jan 2/31 Jan 1/94. Wt 155 " Pulse 80. Jan 31/94. Appetite good; bowels regular. Talks rationally, at times, but still shows delusions. Is fairly well-behaved. Habits clean. Does no work. Physical condition good.

Feb 1 Feb 1/94. Wt 147 pounds. (Has made a very marked gain in flesh, since coming). Pulse 76. —

" 3/22 Feb 3/94. Struck a fellow patient (Mr Thoms) during the night, blacking his eye. Feb 22/94. Appetite good; bowels apparently regular. Behavior is cranky & irritable & will, at times, fight with his fellow patients. Does no work at the ward. Still manifests delusions. Habits are clean. —

Personal and Medical History of Ole Swanson.

1894

Feb 23 Feb 23/94. Was taken out today and returned under "new Commitment papers" from Olmsted County. Patient had previously been committed here under Laws of 1893 (recently declared illegal)

Feb 28 Feb 28/94. no particular change to note, from what is reported in Febry 22d note, above.

Mar 1/31 Mar 1/94. Wt 170 pds. Pulse 64. March 31/94. Keeps about the same, from month to month.

Apl 2/30 April 2/94. Wt 174 " " 70. April 30/94. No change to note. Is cranky & irritable. Still shows delusions. Habits are clean. Is indolent. Does no work.

May 1/18 May 1/94. Wt 181 pds. Pulse 72. May 18/94. Appetite good; bowels regular. He is fairly well-behaved. Still shows delusions; inclined to be ugly & cranky, at times; plays cards a good deal. Habits clean. He does not work any.

June 30 Transferred to Annex, today. June 30/94. Former note good, to this date.

July 15 July 15/94. Patient, for some days, has been very noisy & violent. Attendants have had trouble with him

CASE RECORD.

25/101

Patient's Name Swanson, Ole. Name Disease Name Physician

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
Oct. 1st 2 45 pm	98.8	88	24		On regular and Extra diet.	Patient received on ward from Annex slight rash broken out on body. Put to bed.
" 7 am	98.6	84	22			Appetite good.
" " pm.	98.6	64	20			
" 3 am	98.5	78	19	Gave bath.		Rash entirely left. Transfered to Annex.

Transferred to Annex at this date.

June / July 31 During this period, no special change noticeable. He has been quiet, unless irritated; speech rather irrational; habits clean; dress neat. Seems good physical health. June 29/95. Recently, commenced working outside and is still so employed.

Aug 22 Aug 22/95. Patient is restless; annoys the others: deluded: speech irrational. work on ward: habits clean: health good. Sep 25/95. No special change in his condition. Still restless at times.

Sep 25 Oct 1 Oct 1/95. Slight rash appeared on patient's arms & body. Has eighty fevers. Transferred to T.W. Put to bed there. Oct 3/95. Rash entirely left. Patient moved back to Annex. Oct 31/95. No change from former condition, for month past. Habits clean. He works on ward. Health good.

" 3/31 Nov 4 Nov 4/95. Wt 195 pds. Pulses 80. Nov Dec & to Jan 31/96. Generally well-behaved. Delights in basin; the others: speech seems quite rational, in ordinary conversation, but when aroused he becomes threatening & irrational. Habits clean. Health good. Feb 1/96. Weight 194 pounds. Pulse 76. —

Dec Jan 31/94 Feb 1 March to Apl 30 Feb Mar & to Apl 30/96. During the period, no change noticeable in any way: Still talks wildly & irrationally when aroused. At present, works with upholstering: habits clean: health good.

May 1/96 to Aug 1/97 Summary Nurses Notes by Dr. Phelps. Patient quiet & well-behaved: works outside: Talks laughs & whispers to himself. Eats & sleeps well. 72. 190 lbs.

See Page 37 Transfer Book A.

Personal and Medical History of Ole Swans

ROBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy Sheriff R.C. Haas, attended by H. F. Sm
No history given of consanguinity or heredity. This is 1st attack; was
about 2 days ago; talked incoherently & had delusions. Disease seem
rational intervals. He now believes that he has great wealth; that some
him, and that his family are conspiring to kill him & that others have
Is neither disposed to injure others, nor suicidal, nor filthy nor destructive.
mentally. Has been intemperate as to use of tobacco & liquor, but his par
of any severe disease or head-injury. Has not been restrained or confine
The supposed cause of disease is, primarily, a weak intellect & bad habits
is found badly nursed, physically & mentally. Laughed in an imbec
great wealth & murderous enemies. Talked of a girl who would marry
brother Swan, who, he alleges, has a large sum of money belonging
kill him for his money. His manner was that of an insane

Sep 19 Sep 19/93. The patient is in good condition, apparently. On admission, pat
" 20 arm; says he got it from a Circular Saw; came very near losing his arm. Sep 20/93. Slept
fairly well, last night. Am. Pulse 82. R 18. T 99 100. A. Appetite good; bowels have moved. No cough has
been noticed. Is quiet and well-behaved. No complaints or injuries to note. Says "he has been here once before,
but does not recollect when or how long ago." Has been asking for his brother, several times, during the day. Has
" 21 not done any work for about 4 years." Sep 21/93. Slept 7 hours last night & was quiet. Am. Pulse 80. T 99.4
" 22 Appetite good. Sep 22/93. Was restless for 2 hours or so, last night, but slept 7 hours. Am. Pulse 92. T 99.
" 23 Sep 23/93. Slept well, 8 hours, last night. Am. Pulse 88. T 98.2. Appetite continues good. Bowels regular.
" 24/25 Sep 24/93. Am. Pulse 80. T 98.8. Sep 25/93. Am. Pulse 90. T 98.8. Sep 26/93. Am. Pulse 82. T 99.2.
" 27/28/29 Sept 27/93 " " 84 " 99.8 Sep 28/93 " " 76 " 98.6 Sep 29/93 " " 67 " 99.
Oct 1/93 Oct 1/93 " " 72 " 98.8 Oct 2/93 " " 100 " 99. Oct 3/93. For the past 10 nights,
patient has been sleeping well, only a 2 nights being restless for a short time. Has also been quiet &
well-behaved by day. Appetite has been good; bowels regular. Patient keeps along in a rather dull
way; seems to be in a chronic condition. Habits are clean. Weight 152 pds. (a gain of 10 pounds since
" 20 his admission). Pulse 70. Oct 20/93. Appetite continues good & bowels regular. Very quiet. Hardly
Ever speaks, yet will answer questions. Has a very bad rupture; seems to have trouble in walking.
" 31 Actions are rather childish. Habits clean. Oct 31/93. No change to report, since last note.
Nov 1/93 30 Nov 1/93. Wt 154 pds. (Has made quite a gain in weight). Pulse 78. Nov 30/93. Appetite good; bowels
regular. Quiet & well-behaved. Sits in and places, most of the time; will answer when he is spoken to.
Is contrary, however, & stubborn, at times. Habits are clean.

Dec 1893 Dec 1/93. Wt 153 pounds (a further gain in flesh). Pulse 92. Dec 31/93. No material change.—
Jan 31 Jan 1/94. Wt 165 " Pulse 80. Jan 31/94. Appetite good; bowels regular. Talks rationally, at times,
but still shows delusions. Is fairly well-behaved. Habits clean. Does no work. Physical condition good.
Feb 1 Feb 1/94. Wt 172 pounds. (Has made a very marked gain in flesh, since coming). Pulse 78.—
" 3/28 Feb 3/94. Struck a fellow patient (Wm Brown) during the night, blacking his eye. Feb 22/94. Appetite
good; bowels apparently regular. Behavior is cranky & irritable & he will, at times, fight with his
fellow patients. Does no work on the ward. Still manifests delusions. Habits are clean.—

Personal and Medical History of Ole Swanson.

2 23/94. Was taken out today and returned under "new Commitment Papers" from
ted County. Patient has previously been committed here under "Law of 1893" recently declared illegal)
2 25/94. "no particular Change to note from what is reported in Febry 22d note, above.
1/94. Wt 171 pds. Pulse 84. March 3/94. Keeps about the same, from month to month.
el 2/94. Wt 174½ " " 70. April 30/94. No change to note. Is cranky & irritable. Still
delusions. Habits are clean. Is indolent. Does no work. ——
5/94. Wt 181 pds. Pulse 72. May 18/94. Appetite good; bowels regular. He is fairly well-behaved-
shows delusions; inclined to be ugly & cranky, at times: plays cards a good deal. Habits clean-
e not work any. Transferred to Annex, today. June 30/94. Former note good, to this date.
15/94. Patient, for some days, has been very noisy & violent. Attendants have had trouble with him
eral times, today. He imagines he is kept here unjustly & threatens vengeance upon the nurses.
Also shows other delusions. July 16/94. Transferred to B3. July 31/94. No special change to note.
Aug/94. Wt 180½ pds. Pulse 58. Aug 31/94. Continues rather mean & stubborn; overbearing; has delusions. Does no work
Sep 3/94. Wt 184 " " 82. Sep 30/94. No change noted. Rather troublesome & hard to get along with.
Oct 1/94. Wt 192½ " " 90. Oct 29/94. Has been complaining of not feeling well, today. Seems
cold, but says "he is plenty warm". Oct 28/94. Feeling better, today. Oct 31/94. No special Change to note.
Nov 1/94. Wt 191 pds. Pulse 82. Dec 1/94. Wt 189 pds. Pulse 74. Jan 1/95. Wt 192½ pds. Pulse 82.—
Jan 31/95. Appetite good; bowels regular. He is of a mean disposition & abusive, at times. Has a good opi-
-nion of what he can do. Habits clean. Does not work any. Is, apparently, in good physical condition.
Feb 1/95. Wt 193 pds. Pulse 70. Feb 28/95. Is rather noisy & cranky. Still holds a rather exalted
opinion of his abilities. Shows delusions. Is lousy: filthy in habits. Does not work any.—
March 1/95. Wt 195 pds. Pulse 84. March 31/95. No change noticeable in Condition.
April 1/95. Wt 197 " " 88. Apl 10/95. Works a little at ward. Apl 15/95. Transferred to Annex.
April 30/95. Above notes, for several months past, still hold good, at this date.
May & June- During this period, no special Change noticable. He has been quiet, unless irritated;
July 31 Speech rather irrational; habits clean; dress neat. Is in good physical health.
June 29/95. Recently, commenced working outside and is still so employed.
Aug 31 Aug 31/95. Patient is restless; annoys the others! deluded; Speech irrational. Works at ward. Habits
Sep 30 clean: health good. Sep 30/95. No special change in his condition. Still somewhat restless.
Oct Oct 1/95. Slight rash appeared on patients' arms & body: he is slightly feverish. Transferred to T.W.
" 31 Put to bed there. Oct 31/95. Rash entirely left. Patient moved back to Annex. Oct 31/95: No change
from former condition, for months past. Habits clean. He works on ward. Health good.
Nov 4/95. Wt 195 pds. Pulse 80. Nov Dec & to Jan 31/96. Generally well-behaved. Delights in teasing
Dec Jan 31/96 the others: Speech seems quite rational, in ordinary conversation, but when aroused he becomes
Feb & March threatening & irrational. Habits clean. Health good. Feb 1/96. Weight 194 pounds. Pulse 76.—
Feb March 30/96 Feb March & Apl 30/96. During the period, no change noticeable in any way: still talks wildly & irrationally
when aroused. At present, work with upholstery: habits clean: health good.
May/96 to Aug 1/97. Summary Nurses Notes by Dr. Phelps. Patient quiet & well behaved: works outside: talks
laughs & whispers to himself. Eats & sleeps well. Wt. 190 lbs.

See Page 37 Transfer Book A.

Personal and Medical History of Gottfried Bergmann

EBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3482.
Residence, St. Paul. Minn
Date Admission, 19th September 1893.
Admitted by, D. Kilbourne Hour, 7 PM
How Sent, John. B. Olivier, Jof. P. Ramsey County.
Sex, Male
Age, 31 years
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Grocer
Degree Education, Sprobably good (in own language)
Profession Religion, Swiss Church
Habits, Not intemperate
Nativity, Switzerland (that of parents also)
Physicians Committing, G. Stamm & C. Eugene Riggs
Correspondents (friend) Mrs James Graham, 399 Olive Steet
Family Physician Dr. Gottfried Stamm =

No. for Year, 52.
Insane Relatives, mother & sister
Cause Exciting, not known
Cause Predisposing, hereority
Form, Acute Melancholia
Accompanying Bodily Disorder, none mentioned in history
Suicidal or Not, Yes & propensity now active
Date of this Attack, 4 months ago (about)
Duration, about 4 months.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 31.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

(friend) Cred by Dr Ely, Sep 20/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, rather quick
MEMORY:
Past Events, Poor
Recent Events, Does not know how long he is here
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Illusive
REASONING POWER:
Ordinary Subjects, } Poor
Own Mental State, }
Special Subjects, }
GENERAL DESCRIPTIVE REMARKS:
Is dull & sluggish in movements — Hard to make him comprehend questions.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Yes
Exalted,
Depressed, Yes
DELUSIONS:
Systematized ~~or Not~~, about his brother being sick &
Special Subjects, various others.
Transitory or Not,
HALLUCINATIONS: ?
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Answers questions Coherently,
Voluble or Reticent, at times, & after much hesitation. But Conversation is so incoherent, as a rule, that not much can be made out of it.

St. Paul Pioneer Press
Sep 20/93

ONE DEAD, ONE INSANE

THE SAD FATE OF EMANUEL AND GOTTFRIED BERGMAN

Almost Inseparable in Life, Living in Seclusion and Enjoying Only Each Other's Society, One of Them Dies and the Other Becomes a Hopeless Maniac—The Sad Story of Two Lives.

The death of Emanuel Bergman and the commitment to the Rochester insane asylum of Gottfried Bergman, his brother, yesterday, was the culmination of a chain of peculiarly sad circumstances. Yesterday morning Gottfried Bergman was taken to the asylum suffering, it is claimed, with incurable mania, and in the afternoon the dead body of Emanuel was placed in a vault at Oakland cemetery.

The Bergmans owned a grocery store at 457 St. Peter street, which they established seven years ago. From an insignificant beginning their trade increased in volume until Bergman Bros. commanded one of the most desirable grocery trades in St. Paul. Despite the fact of their success the Bergmans were little known. They lived almost in seclusion with the family of their brother-in-law, Gustave Mosher, at 1961 West Seventh street, bound up in each other's society like Damon and Pythias of ancient times. The story of their lives prior to their coming to St. Paul is interesting. Born in the shadow of the Tyrol mountains in Switzerland of industrious and well-to-do peasant parents, they were induced to leave their native home by European tourists who engaged them and their father as guides through the wild mountain passes. Emanuel served as the valet of an English lord until his master was killed in a duel with a Frenchman in Paris. Thrown on his own resources, Emanuel served as a waiter in a Parisian cafe, and later established a restaurant of his own. Becoming tired of existence in the French capital, Emanuel emigrated to America and came to St. Paul, where Mrs. Mosher, his sister, resided. He had considerable money when he landed here, and, wishing for the companionship of his younger brother, he wrote for him to

Leave the Tyrolese Home

and come here. In the meantime he established the grocery store on St. Peter street, and when Gottfried reached St. Paul he was given a half interest in the business. For several years their lives moved along undisturbed and their business venture proved successful. They erected a handsome residence on West Seventh street to take the place of the unpretentious cottage, still living in mysterious seclusion. About a year ago Gottfried's health began to fail, and he wasted away until he became but a shadow of his former self. Emanuel was greatly worried about his brother's condition, and six months ago his health began to fail also, and he signified his intention of visiting his home in Switzerland. At the intimation of a separation Gottfried, it is said, at first protested, and when his brother announced a firm intention to leave him he became despondent. As the day for Emanuel's departure drew near Gottfried began to show symptoms of intense melancholia, which almost imperceptibly changed to mania and he became a childish idiot, possessed of the one fear that he was going to lose his brother. So strong became his mania that physicians told Emanuel it would be the cause of his brother's death if he went to Europe, and Gottfried remained in St.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

WEIGHT, 137 lbs. NUTRITION, apparently quite good.
IES. blackened eye: unnatural protrusion of eyeballs; exophalmus.
Coatings, quite heavy Promptness Movement, fairly prompt
Size, dilated
Accommodation, Yes
impaired
impairment.
per to raw, eyes shut, slightly inaccurate.
wing, eyes shut, swaying slight.
Tongue, Some
none noted General, none noted
l — absent. —
fairly good ~~Slurred~~, Some foreign accent
el
e good
are good

Case No. 3482. Gottfried Bergmann. 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.

Clean,	Careless,
Constipated,	Irregular,
Medium,	Poor,
Poor,	Irregular,
RESP.,	TEMP.,

is kept

HISTORICAL.

ont 4 months ONSET GRADUAL OR SUDDEN,
y," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, ~~History~~ State mother was insane
Father or Pat. Relations, father dead
Brothers or Sisters, History State Sister was insane

Personal and Medical History of Gottfried Bergmann

EBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3482.
Residence, St Paul. Minn
Date Admission, 19th September 1893.
Admitted by, Dr Kilbourne Hour, 7 PM.
How Sent, John. B. Olivier, Jo P. Ramsey County.
Sex, Male
Age, 31 years
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Grocer
Degree Education, Probably good (in own language)
Profession Religion, Swiss Church
Habits, Not intemperate
Nativity, Switzerland (that of parents also)
Physicians Committing, G. Stamm & C. Eugene Riggs
Correspondents (friend) Mr James Graham, 599 Olive Street
Family Physician Dr. Gottfried Stamm =
(friend) Exd by Dr Ely, Sept 20/93.

No. for Year, 52.
Insane Relatives, Mother & Sister
Cause Exciting, Not known
Cause Predisposing, Heredity
Form, Acute Melancholia
Accompanying Bodily Disorder, None mentioned in history
Suicidal or Not, Yes & prosperity now active
Date of this Attack, 4 months ago (about)
Duration, about 4 months.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 31.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Poor
Recent Events, Does not know how long he is here
Special Subjects,

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

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

GENERAL DESCRIPTIVE REMARKS:
Is dull & sluggish in movements — Hard to make him comprehend questions.

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

DELUSIONS:
Systematized ~~or Not~~, about his brother being sick &
Special Subjects, various others.
Transitory or Not,

HALLUCINATIONS: ?

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Answers questions Coherently,
Voluble or Reticent, at times, & after much hesitation. But Conversation is so incoherent, as a rule, that not much can be made out of it.

Paul. At first it was thought Gottfried's mania could be cured, and he was placed under the treatment of skilled physicians at the Hudson, Wis., sanitarium, but their

Skill Was Unavailing

and after three months' incarceration at the hospital Gottfried was brought home by Emanuel and a keeper was engaged to care for him, while his brother was attending to his duties at the store.

Finally, about two months ago, Emanuel's health began to fail more rapidly. Physicians diagnosed his case and told him he was suffering from cancer of the stomach, which had gained such a hold upon his system that death was inevitable. Then the condition of the brothers became pitiable. Emanuel was unable to attend to his duties at the store, and Mr. Graham, another brother-in-law, took charge of the business. Like two children, the neighbors say, Gottfried and Emanuel, with the shadow of death hovering over him, could be seen day after day, wandering about the grounds of their home, hand in hand, never alone. Emanuel's health failed rapidly, and last Sunday afternoon he died at his home. Gottfried seemed unable to realize the death of his brother. He would sit by the side of the dead and stroke the lifeless hand with eyes unwet with tears, and implore him to not leave him. It was a said scene at the deathbed, and the friends of the family who were there speak of it with hushed voices. Another peculiar circumstance where fate appears to have stepped in and arranged things to suit its own inclination lies in the fact that a sister of the brothers left her home in the Tyrol several weeks ago to visit them here. The ship was delayed and a telegram was received from her yesterday dated at New York. She had not heard of the death of her brother, and said she would come here on the first train West from New York. The casket containing the body of Emanuel was placed in a vault so that she can see the features of her elder brother before it is lowered to a grave. Emanuel, the dead brother, was forty-two years of age, and Gottfried was thirty-eight. For the present Mr. Graham is attending to the grocery business.

l History of Gottfried Bergmann

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

WEIGHT, 137 lbs. NUTRITION, apparently quite good.

S. blackened eye: unnatural protrusion of eyeballs; exophalmus.

Coatings, quite heavy Promptness Movement, fairly prompt

Size, dilated

Accommodation, Yes

Yes
impaired
impairment.
to now, eyes shut, slightly inaccurate.
ing, eyes shut, swaying slight.

Tongue, Some

ome noted General, none noted
— absent. —

irly good ~~Slurred~~, Some foreign accent

SENSIBILITY, Normal

HEART, Sounds are good

LUNGS, Sounds are good

EXAM. URINE.

Case No. 3482. Gottfried Bergmann. 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.

OPHTHALMOSCOPIC EXAM.

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

Records kept

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, About 4 months ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, History State mother was insane

Father or Pat. Relations, father dead

Brothers or Sisters, History State Sister was insane

Personal and Medical History of Gottfried Bergmann

SEIBERT, VIOLAN & CHAMBERS, DAVENPORT, IOWA



Whole No. 3482.
Residence, St. Paul. Minn
Date Admission, 19th September 1893.
Admitted by, Dr Kilbourne Hour, 7 Pm
How Sent, John. B. Olivier, Jof C. Ramsey County.
Sex, Male
Age, 31 years
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Grocer
Degree Education, Probably good (in own language)
Profession Religion, Swiss Church
Habits, not intemperate
Nativity, Switzerland (that of parents also)
Physicians Committing, G. Stamm & C. Eugene Riggs
Correspondents (friend) Mrs James Graham, 599 Olive Street
Family Physcn Dr. Gottfried Stamm =
(friend) Cor. by Dr Ely, Sept 20/93.

No. for Year, 52.
Insane Relatives, Mother & Sister
Cause Exciting, not known
Cause Predisposing, hereority
Form, Acute Melancholia
Accompanying Bodily Disorder, none mentioned in history
Suicidal or Not, Yes & propensity now active
Date of this Attack, 4 months ago (about)
Duration, about 4 months.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 31.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Poor
Recent Events, Does not know how long he is here
Special Subjects,

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

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

GENERAL DESCRIPTIVE REMARKS:
Is dull & sluggish in movements — Hard to make him comprehend questions.

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

DELUSIONS:
Systematized ~~or Not~~, about his brother being sick &
Special Subjects, various others.
Transitory or Not,

HALLUCINATIONS: ?

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, } Answers questions Coherently,
Voluble or Reticent, } at times, & after much hesitation. But Conversation is so incoherent, as a rule, that not much can be made out of it.

DUFFY'S PURE MALT WHISKEY

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 4½ in. WEIGHT, 137 lbs. NUTRITION, apparently quite good.
WOUNDS OR ABNORMALITIES, blackened eye: unnatural protrusion of eyeballs; exophthalmus.
TONGUE, Tremors, None Coatings, quite heavy Promptness Movement, fairly prompt
PUPILS, Equality, equal Size, dilated
Response Light, Yes Accommodation, Yes
SIGHT, somewhat impaired
HEARING, some impairment.
COORDINATION, Arms, Finger to nose, eyes shut, slightly inaccurate.
Legs, standing, eyes shut, swaying slight.
TREMORS, Hands, none Tongue, none
Facial Muscles, none noted General, none noted
REFLEXES, Patellar, equal — absent. —
Other Reflexes,
ARTICULATION, ~~Hesitating~~, fairly good ~~Slurred~~, Some foreign accent
FACIAL EXPRESSION,
SENSIBILITY, normal
HEART, Sounds are good
LUNGS, Sounds are good
EXAM. URINE.

Case No. 3482. Gottfried Bergmann. 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.

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

Records kept

HISTORICAL.

LENGTH OF INVASION, about 4 months ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, History State mother was insane
Father or Pat. Relations, father dead
Brothers or Sisters, History State Sister was insane

Personal and Medical History of Gottfried Bergmann

1893

Was brought here by Deputy Sheriff P.C. Haas, attended by W. F. Grimmer, with following history. No history of consanguinity, not known. Mother and sister have been insane. This is 1st attack; has not been in hospital before. First symptoms of this attack manifested about 4 months ago, by apprehension about his brother's health. Disease appears about stationary; but is variable & there are rational intervals. At times is said to be rational; then, without apparent cause, becomes excited. He is, now always thinking about his brother, and worrying about his health. He has, occasionally, shown a disposition to injure others. Has attempted suicide, by various methods; propensity now active. No filthy or destructive habits. No peculiarities to were previously shown. No history of intemperance, nor of any acute disease or injury to head. Has been kept at home & watched. Don't know cause of the disease. Has been treated by good care & constructives.

Sep 19 — Sep 19/93. On admission, is in good condition, apparently. Has a bruised & blackened eye. Was put on B.T. Pulse 90. Te 99.6. Bodily condition quite clean. Sep 20/93. Slept but 4 hours, last night; was very restless & uneasy when awake. AM. Pulse 84. Te 99.4. Appetite poor; bowels constipated; no cough noticed. Stands around stupidly. Talks none; no complaints or injuries to note. PM. Pulse 88. Te 99.6.

" 21 — Sep 21/93. Slept 8 hours last night & was quiet. AM. Pulse 86. Te 99.2. Is dull & stupid. Talks none

" 22 — or but seldom. Wants to get away. PM. Pulse 88. Te 99. Ate nothing today. Sep 22/93. Rested & slept well last night (8 hours); was quiet. AM. " 96 " 99.4. Talks but little. Very stupid. Ate some today.

" 23 — PM. Pulse 98. Te 99.6. Sep 23/93. AM. Pulse 92. Appetite is very poor. Patient inclined to be stubborn.

" 24 — Sep 24/93. Slept well last night. AM. Pulse 96. Ate but little. PM. Talks some in German: is incoherent.

" 25 — Has been very restless during the day. Sep 25/93. Slept 7 hours; restless & out of bed; last night.

" 26 — AM. Pulse 98. Stands around very stupidly; is stubborn. Sep 26/93. Last night, slept but 5 hours: was very

" 27 — restless & noisy & frequently out of bed. Appetite is very poor. Resists interference. Sep 27/93. Quiet & slept

" 28 — well, last night. PM. Ate nothing today. Says "he isn't going to eat any more". Sep 28/93. Slept but 6 hours, last night; Restless noisy & out of bed often. AM. Pulse 86. Stubborn. Ate nothing today. —

" 29 — Sep 29/93. Was frequently out of bed, restless, noisy, sleeping only 5 hours, last night. AM. Pulse 82.

" 30 — PM. Still eats nothing. Is stupid. Sep 30/93. Last night was passed similarly to the one preceding. AM. Pulse 80. PM. Ate but little today. Talks but very little.

Oct 1 — Oct 1/93. Passed a poor night, last night; restless, uneasy & sleeping only 5 hours. Appetite poor. —

" 2 — Oct 2/93. Restless & often out of bed last night; slept but 4 hours. Appetite quite poor. Quiet during the day.

" 3 — Oct 3/93. Rested better last night; was quiet & slept 7 hours or so. Ate but very little today. Talks none.

" 4 — Is dull, stupid & stubborn in behavior & steadily the same, without much variation. Oct 4/93. Was noisy, frequently out of bed, last night; slept only 5 hours. Pulse has now become about normal.

" 20 — Weight 131 pounds; (has lost 8 pound in flesh). Pulse 86. Oct 20/93. On account of the nights, this month, he has been noisy restless & out of bed, sleeping then only 3 or 4 hours. Is steadily dull & stubborn,

" 21 — as previously reported. Is growing quite dirty, also. Oct 21/93. Very noisy nearly all last

" 22 — night; getting out of bed. Also very dirty. Was today transferred to B 3d. Oct 22/93. Patient is very restless & persists in dressing himself during the night & walking about ward; his clothes

" 24 — have now to be kept from him. He sleeps on floor, in hall. Oct 24/93. Keeps standing about Entrance

" 25 — door to hall & wishes to get away. Does not know what he is doing. Oct 25/93. At dinner time today, was struck by some one in the right eye, causing a discoloration of the skin. His two

Personal and Medical History of Gottfried Bergmann

1893

Oct 25 (cont'd) — sisters visited him today and remained with him several hours. Patient seemed to enjoy

" 31 — their visit very much. Oct 31/93. Is still very restless & persists in dressing himself, at night. Is as above described by day. Health apparently good.

Nov 2 — Nov 2/93. Wt 118 pds. (has lost 12 pds in weight, in past month, without apparent cause). Pulse 82.

" 7 — Nov 7/93. Was today, visited by Mr. G. Anderson, a friend of his from St Paul, (this forenoon). —

" 22 — Nov 22/93. Patient hit the bird-cage, with the work alcove, with his right hand, knocking the cage almost to the ceiling and cutting the third finger of the right hand, almost to the bone, against the water-cup

" 30 — which he broke. The cut extends almost the whole length of the finger. Nov 30/93. Appetite is very poor; Bowels are free & regular. No cough noticed. He makes no complaints. Patient is quiet & usually well-behaved. Has to be forced to his meals & is always standing around at the hall. Tries the door, whenever any one goes out & says he wishes & get home to see his brother. He seems in fairly good health. Habits are cleanly. —

Dec 2/31 — Dec 2/93. Wt 111 pds (a further loss, without apparent cause). Pulse 80. Dec 31/93. Appetite continues very poor. Bowels are regular. Is apparently in good health. Well-behaved & quiet, but restless & won't sit down. Talks a great deal to himself; mental power failing. (Has 1 day dirty this month; but his clothes occasionally). —

1894

Jan 1/31 — Jan 1/94. Wt 111 pounds — Pulse 84 — Jan 31/1894. Appetite fair; bowels regular. No cough noticed. General health fairly good. Is quietly behaved; harmless. Cannot be got to sit down, but stands or walks about hall, all the day, trying the doors for the purpose of getting out. Is nervous & very restless — Has received no injuries, this month; makes no complaints. — Talks occasionally, principally against being placed in the alcove or upon a seat; Habits are cleanly, though he occasionally wets his drawers.

Feb 1/22 — Feb 1/94. Wt 114 pounds (a slight gain). Pulse 92. Feb 22/94. Appetite fairly good; bowels regular. Appears to be in good bodily health. Quietly behaved though restless & nervous; walking about, trying doors & watching for a chance to escape. Has to be forced to go to his meals; is then so restless that he won't sit down to eat. Still deluded — Talks about soon getting out of Asylum, so that he may see his brother" (now dead). Is apparently weak minded.

" 23 — Feb 23/94. Was taken out today & returned under "new Commitment Papers" from Olmsted County (patient had previously been committed here under Law of 1893 "recently declared illegal").

" 28/28 — Feb 28/94. Was vaccinated today. Feb 28/94. Patient's condition remains about the same. Talks in an incoherent manner, with occasional outbreaks of idiotic laughter. Is weak minded — is almost a monomaniac in regard to his brother's sickness; (he is not aware of his brother's death). Habits are cleanly, as a rule, though he occasionally wets his clothes. —

Mar 1/31 — Mar 1/94. Wt 115 pds. Pulse 79. Mar 13/94. Was visited by his sister today. Mar 15/94. Was struck in the

" 31 — eye by a fellow patient (J.R. Rhodes), inflaming the eyeball. March 31/94. No material change to note, except that he is more cleanly & does not now wet his clothes or bed. —

April 1/17 — April 1/94. Wt 123 pds (a gain of 8 pounds, in past month). Pulse 84. April 17/94. Was visited, today,

" 30 — by a lady, who brought him 2 boxes of honey. April 30/94. No change in his condition, to call for remark.

May 1/31 — May 1/94. Wt 132 pds. (continues to gain in flesh). Pulse 82. May 29/94. Patient's right cheek & eye were,

" 30 — today, observed to be swollen and inflamed, as if he had been struck by some one. May 30/94. Examination

(carried to page 32)

Personal and Medical History of Mason Hicks

ABBOTT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3485.
Residence, Kalmar, Olmsted Co. Minn
Date Admission, 23rd September 1893.
Admitted by, Dr Kilbourne Hour, 12 15 PM
How Sent, Thos. Fraser, Jof P, Olmsted County
Sex, Male
Age, 62
Civil Condition, married
Children, Seven
Age Youngest Child, —
Occupation, Farmer
Degree Education, Common School
Profession Religion, not a church member
Habits, not stated; probably somewhat intemperate
Nativity, Bristol, NY (Father, N. Y; mother, Vermont)
Physicians Committing, A.L. Baker & C. J. Granger
Correspondents, Mrs Hicks; Byron Minn
Family Physician A.L. Baker, Byron, Minn.

No. for Year, 55
Insane Relatives, None
Cause Exciting, unknown
Cause Predisposing, possibly intemperance
Form, Acute Melancholia
Accompanying Bodily Disorder, none given in history
Suicidal or Not, Yes; by cutting throat.
Date of this Attack, September 15th 1893
Duration, about a week
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 62 years
Time of Leaving, Dec. 21 93
Time in Hospital, 2 m 9 ds.
Result, Impd.

Crossed off from Private Insane Asylum, April 1st 1894 because the patient committed suicide.

EXAMINATION ON ADMISSION.

Evaly Dr Ely Oct 30 93

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Good
Recent Events, Some impairment
Special Subjects,

PERCEPTIVITY:
Alert or Dull, not over-alert
Correct or Illusive, Correct

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

GENERAL DESCRIPTIVE REMARKS:
Says "was awful sick"; "dont remember when he was brought here". Seems to have improved fairly well, especially of late.

EMOTIONAL STATE:
Normal, Calm, normal, at present.
Indifferent,
Exalted,
Depressed, Slightly, though.

DELUSIONS:
Systematized or Not, Had, as coming; none noticed now.
Special Subjects,
Transitory or Not,

HALLUCINATIONS: ✓

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Quite free.

Personal and Medical History of Mason Hicks

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ WEIGHT, usually 145 pds. NUTRITION, Thin; cheeks much sunken
WOUNDS OR ABNORMALITIES, Probably none.
TONGUE, Tremors, fairly steady Coatings, quite heavy Promptness Movement, Prompt
PUPILS, Equality, Equal Size, quite dilated
Response Light, Yes Accommodation, Yes
SIGHT, quite good, for his age
HEARING, seems normal
COORDINATION, Arms, Quite Good. Finger to nose, eyes shut, quite good.
Legs, Standing, eyes shut, fairly steady.
TREMORS, Hands, some slight Tongue, fairly steady.
Facial Muscles, General, more or less: possibly weakness.
REFLEXES, Patellar, Equal — about 3 or 4.
Other Reflexes,
ARTICULATION, ~~Hesitating,~~ Quite Good ~~Slurred,~~
FACIAL EXPRESSION, about normal now.
SENSIBILITY, normal
HEART, Sounds good
LUNGS, Sounds are good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Kept Clean, Careless,
BOWELS, Normal, Records Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short ONSET GRADUAL OR SUDDEN, Gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,
} No history of heredity

Personal and Medical History of Mason Hicks

1893 Was brought here by Deputy J.W. Hicks, attended by Dr A.L. Baker, with the following history of case. There is no history of consanguinity or heredity. This is the 1st attack, symptoms appearing in Sept 1893; acute delirium; desire to work at midnight. Disease seems increasing; no rational intervals. Derangement is now shown by hallucinations; imagines he is to be blown up by dynamite. Is not disposed to injure others; has attempted suicide by cutting throat; propensity now active. He is not filthy or destructive. Previously, showed an insane desire for work. Father was addicted to intemperance. No severe disease or injury to head noted. He has not been restrained or confined. Cause of disease is unknown. On personal examination, the following: he has been treated by nerve sedatives; is now quiet from effects of opiates. Conversation incoherent; Appearance & manner, stupid.

Sep 23 Sep 23/93. On admission, is found to be in very poor physical condition. Has just been C[o]. (the "Sick Ward"). — Pulse 104. R 26. T@ 99.6. Bodily condition, seen at bath, was quite dirty. Appetite is fairly good and bowels regular. Coughs a little, at times. Says "he has pains all over his body". Talks to himself; shows delusions. Thinks he is going to lose all his property. PM. Pulse 100 R 24 T@ 99.4. Slept

" 24 almost all the time, today. Sep 24/93. Slept well last night. AM " 90 " 20 " 99. Appetite good; bowels have moved; Complains of feeling sore all over; "can hardly move"; says he feels worse"

" 25 PM. Pulse 92 R 20 T@ 99.4. Again slept almost all day, today. Sep 25/93 Slept 6 hours, during last night. AM. Pulse 80 R 22 T@ 98.8. Appetite continues good; bowels normal. Still complains of pains all over his body", but thinks he is improving. Visited by brother, today.

" 26 Sep 26/93. Slept but 5 hours, last night. AM. Pulse 88 R 22 T@ 99.2. Does not seem rowell, today, as usual. PM. Pulse 86 R 24 T@ 99. Sep 27/93. Slept only 5 hours last night. Slept however

" 27 some during the day. AM. Bowels moved very freely this morning; patient seemed to be quite weak

" 28 afterward. PM. Pulse 86 R 22 T@ 99.2. Sep 28/93. Rested & slept better, 7 hours, last night. — AM. Pulse 100 R 24 T@ 99. Complains of feet being cold, at times. Bowels moved freely. Was,

" 29 today, visited by his daughter. Sep 29/93. Sleep & rest were poor, only 5 hours, last night. AM. P80. PM. Pulse 84. Thinks, at times, that his boy is in the ward, sick, & wants to know if he cannot

" 30 take care of him. Sep 30/93. Slept very poorly (but 3 hours) last night. AM. Pulse 82. Bowels moved almost too freely today. PM. Pulse 82. Was visited by Son.

Oct 1/93 Oct 1/93. AM. Pulse 100. Talks rationally, at times. Talks of home & family. Oct 2/93. AM. Pulse 82. Ate no breakfast. Is quite restless & getting out of bed. Was visited by lady & gentleman (friends).

" 3 Oct 3/93. AM. Pulse 80. PM. Pulse 84. Appetite not very good. Oct 4/93. AM. Pulse 80. Patient is

" 5 not very strong. Weight (in underclothes) 99 pounds. Oct 5/93. AM. Pulse 74 PM. Pulse 82. Complains,

" 6 today, of his feet being cold. Was visited by nephew. Oct 6/93. " " 76 " 92. Is up,

" 7 around, this morning. Says "he is very weak". Remained up 3 hours. Oct 7/93. Rest & sleep, at night, have not been very good - about 5 hours; occasionally 6 or 7. He has shown considerable of mental

confusion, loss of memory & is also quite depressed. This seems quite constant, since admission. Although promising well, he has not improved much. Has remained up in ward all day.

" 1/96 Thinks he is feeling stronger. Oct 11/93. Visited by daughter, today. Oct 16/93. No attached record of pulses.

" 17/96 Oct 17/93. Appetite good. Appears to be doing fairly well. Oct 19/93. Wants to be let out, so he can work.

" 20/96 Oct 22/93 Goes out walking, now. Is growing stronger. Oct 24/93. Today, was visited by nephew. —

" 30 Oct 30/93 Of late is growing very contrary. Continually asking to go out to work. When examined, is

Personal and Medical History of Mason Hicks

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DETAILED HISTORY OF SICKNESS
DIA

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM
Nov								
2								
3								
4								
5								
6	7	3	88	92			98	98
7								
8								
9	7	3	66	82				
10	7	5	80	82				
11	7	3	72	74				
12	7	5	70	76				
13								
27								
28								
29								
Dec 1								
2	12[30]	1						

A FARMER named Mason Hicks at Byron, near Rochester, Minn., jumped fifty feet from a wind mill, and when found was sitting upright. He was raised on his feet and walked into the house but soon died from the shock. He was insane and had escaped from his watchers.

free, coherent and rational. Reasoning power seemed good. He ...y sick when brought here, and to think himself now well enough

...ain of about 8 pounds). Was today visited by son & daughter. ... Complains some of pains in chest & back. Does not appear ...ted by his wife. Nov 5/93. Some delusions noticed. "Thinks ...at he has a cow". Nov 8/93. Appetite good; bowels normal. ...o him "Lame". Nov 9/93. In bed today. Complains of pains ...stomach. Nov 10/93 Says "he feels well enough now to get up". ... Still complains (as above); visited, today, by his wife. ...y. Nov 27/93. Complains, now, of pains "all over". — ... Asks to get out so he can do some work. — ...ly. Still holds to the idea that someone is going to harm him. ...ec 2/93. Was today visited by his brother & son and by ...ttached clinical record).

...A.L. Baker ... was illegally committed —

...he me delusion, at least: 22 Augusta ... 108. Aug 25/95. Appetite good: bowels ...ache & stops in bed: has delusions, tho' he talks in a very sensible ...95. Wt 138½ pds. Pst. Sep 30/95. Above notes still hold good. ...e not seem to improve, mentally: still shows delusions. Habits clean ...Wt 141 pds. Pst. Jan 2/96. Wt 140½ pds. Pulse 84. ...nt of a general change of wards). Jany 3/96 Patient ...week 8 months. Works some in kitchen. Behaves well: seems ..., unless addressed. Still holds some delusions as ... pds. Pst. Apl 1/96. Wt 141½ pds. P 76. Apl 30/96. During the period, ...is slightly noisy, at night. He does not improve, mentally: talks ...atuate, at times: works some, onward: habits neat & clean: physical

...t quiet: Condition rather chronic: Has worked some in ... No bodily illness noted: Wt. 142 to 147 lbs. ... not take any part in work, is run down & stupid. ... getting along quietly: Works some on ward. ... noisy at times: does some work on ward. May 5 - has badly scratched ... side of face ... somewhat disordered: cause unknown: Sometimes strikes self in face & pulls ears vigorously. ... Jan 31 1900. Wt. 135[lbs]: Health good: usually well behaved: Tidy: works some on ward: Deluded: Sometimes strikes his own face or strikes wall.

EBERLY, FICKLER & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought [illegible] Deputy J.W. Sticks, atte
There is no [illegible] community or friend
Sept 1893 [illegible]
Derangement [illegible]
disposed to injure [illegible]
filthy or destructive [illegible]
no fever disease or injur
is unknown. On person
from effects of opio

Sep 23 Sep 23/93. On adm
Pulse 104. R.
bowels r
Show
" 24 a

" 25

" 28 after
AM.

" 29 today, very
PM. Pulse 84.

" 30 take care of him. 30/93. Slept very poorly (but 3 hours) last night. AM. Pulse 82. Bowels move almost too freely today. PM. Pulse 82. Was visited by Son.

Oct 1/93. AM. Pulse 100. Talks rationally, at times. Talks of home & family. Oct 2/93. AM. Pulse 82. At no breakfast. Is quite restless & getting out of bed. Was visited by lady & gentleman (friends).
" 3 Oct 3/93. AM. Pulse 80. PM. Pulse 84. Appetite not very good.
" 5 Oct 4/93. AM. Pulse 80. Patient is not very strong. Weight (in underclothes) 99 pounds.
" 6 Oct 5/93. AM. Pulse 74. PM. Pulse 82. Complains, today, of his feet being cold. Was visited by nephew.
" 7 Oct 6/93. " " 76 " 92. Is up, around, this morning. Says "he is very weak". Remained up 3 hours. Oct 7/93. Rest & sleep, at night, have not been very good - about 4 hours; occasionally 6 or 7. He has shown considerable of nervous confusion, loss of memory & is also quite depressed. This seems quite constant, since admission. Although promising well, he has not improved much. Has remained up on ward all day. Think he is feeling stronger. Oct 11/93. Visited by daughter, today. Oct 16/93. See attached record of pulse.
" 16
" 17 Oct 17/93. Appetite good. Appears to be doing fairly well. Oct 19/93. Wants to be let out, to do some work.
" 20 Oct 20/93. Goes out walking, now. Is growing stronger. Oct 27/93. Today, was visited by nephew.
" 30 Oct 30/93. Plate is growing very contrary. Continually asking to go out to work. When examined, in

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DETAILED HISTO

1893

Oct	HOUR AM	HOUR PM	PULSE AM	PULSE PM
6	7	5	80	84
7	7			
8	7		84	
9	7	5	72	84
10	7	5	76	66
11	7	5	68	64
12	7	5	72	60
13	7	5	60	76
16	7	5		58

was quite free, coherent and rational. Reasoning power seemed good. He at the was very sick when brought here, and to think himself now well enough s to leave.

ds. (a gain of about 8 pounds). Was today visited by sister & daughter. bowels regular. Complains some of pain in Chest & back. Does not appear Nov 4/93. visited by his wife. Nov 5/93. Some delusions noticed. "Thinks nothing that he has done". Nov 8/93. Appetite good; bowels normal going to do him harm". Nov 9/93. In bed today. Complains of pains s at his stomach. Nov 10/93 Says "he feels well enough now to get up". Nov 11/93. Still Complaining (as above); visited, today, by his wife. him, today. Nov 12/93. Complains, now, of pains "all over". — stipated. Asks to get out to do some work. — Nov 14/93. Talking about his family. Still holds to the idea that someone is going to harm him. Dec 1/93 Dec 1/93. Visited by his son. Dec 2/93. Was today visited by his brother & son and by them taken home, on trial. (See attached clinical record).

— Crossed off the record — has illegally Committed —

Edward Froelich

1895 Carried From 340.

July 31 Aug 1/30 Talks rationally; works on ward; is neat & clean. Seems to have the no delusions, at least in Imagines himself sick quite often, when he is not. Aug 1/95. Wt 140 pds. P 108. Aug 31/95. Appetite good. Bowels regular. has days when he complains of headache & stops in bed. has delusions, tho' he talks in a very sensible way. Works on ward; goes walking. Sept 1/95. Wt 138½ pds. P 84. Sept 30/95. Above notes still hold good Sept 1/30 Oct 1/95. Wt 139½ pds. Pulse 116. Oct 31/95. Does not seem to improve, mentally; still shows delusions. Habits clean Oct 1/31 Nov 1/95. Wt 140 pds - 98. Dec 1/95. Wt 141 pds. P 72. Jan 1/96. Wt 140½ pds. Pulse 84. Nov 2 Jany 21/96. Transferred to B2 (on account of a general change of ward). Jany 31/95. Patient's Dec 1 Condition remains about same, from month to month. Works some in kitchen. Behaves well: seems contented. Seldom talks to anyone, unless addressed. Still holds some delusions re Jan 1896 Jan 1/31 Feby 1/96. Wt 140½ pds. P 70. March 2/96. Wt 140 pds. P 84. April/96. Wt 141½ pds. P 76. April 30/96. During the period, Feby 1 patient has been very quiet: has hallucinations & is slightly noisy, at night. He does not improve, mentally: talks March 2 but little, unless addressed: is somewhat obstinate, at times: works some, on ward: habits neat & clean: Physical April 1/30 Condition good: makes no complaints.

Summary Nurses Notes by Dr. Phelps. Patient quiet: Condition rather chronic: Has worked some in kitchen & on ward. Has delusions. No bodily illness noted: Wt. 142 to 147 lbs.

May 1/96 to Aug 1/96 Wt. 138# Oct 31/97 Quiet in behavior. Does not take any part in work, is run down & stupid.

Aug 31/96 to Sept 1/96 Intervening notes show patient to be getting along quietly: Works some on ward.

June 30/99 to July 1/1900 Wt. 136#. Noisy at times: does some work on ward May 15 has badly swollen side of face some what disfigured: cause unknown: Sometimes strikes self in face & yells very vigorously.

Aug 1/1900 to June 30/1900 Wt. 134#: Health good: usually well behaved: Tidy works some on ward: deluded: Sometimes strikes his own face or strikes wall.

to 128

EGBERT, FIELDS & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Deputy J.W. Hicks, attended by Dr. A.L. Baker, with the following history of case. There is no history of consanguinity or heredity. This is the 1st attack; symptoms appearing 12th Sept 1893; acute delirium; desire to rout at midnight. Disease seems increasing, no rational intervals. Derangement is now shown by hallucinations; imagines he is to be blown up by dynamite. Is not disposed to injure others; has attempted suicide by cutting throat; propensity now active. He is not filthy or destructive. Previously showed an insane desire for work. Father was addicted to intemperance. No severe disease or injury to head noted. He has not been restrained or confined. Cause of disease is unknown. On personal examination, the following: he has been treated by nerve sedatives; is now quiet from effects of opiates; Conversation incoherent; Appearance & manner, stupid.

Sep 23 Sep 23/93. On admission, is found to be in very poor physical condition. Has just been C. (the "Sick Ward"). — Pulse 104. R 26. T(o) 99.6. Bodily condition, seen at bath, was quite dirty. Appetite is fairly good and bowels regular. Coughs a little, at times. Says "he has pains all over his body." Talks to himself; shows delusions. "Thinks he is going to lose all his property." Pm. Pulse 100 R 24 T(o) 99.4. Slept

" 24 almost all the time, today. Sep 24/93. Slept well last night. Am " 90 - 20 " 99. Appetite good; bowels have moved; Complains of feeling sore all over; "can hardly move"; says "he feels numb"

" 25 Pm. Pulse 92 R 20 T(o) 99.4. Again slept almost all day, today. Sep 25/93. Slept 6 hours, during last night. Am. Pulse 80 R 22 T(o) 98.8. Appetite continues good; bowels normal. Still complains of pains "all over his body"; but thinks he is improving. Visited by brother, today.

" 26 Sep 26/93. Slept but 5 hours, last night. Am. Pulse 88 R 22 T(o) 99.2. Does not seem well, today,

" 27 as usual. Pm. Pulse 86 R 24 T(o) 99. Sep 27/93. Slept only 5 hours last night. Slept however some during the day. Am. Bowels moved very freely this morning; patient seemed to be quite weak

" 28 afterwards. Pm. Pulse 86 R 22 T(o) 99.2. Sep 28/93. Rested & slept better, 7 hours, last night. — Am. Pulse 100 R 22 T(o) 99. Complains of feet being cold, at times. Bowels moved freely. Was,

" 29 today, visited by his daughter. Sep 29/93. Sleep & rest were poor, only 5 hours, last night. Am. 980. Pm. Pulse 84. Thinks, at times, that his boy is in the ward, sick, & wants to know if he cannot

" 30 take care of him. Sep 30/93. Slept very poorly (but 3 hours) last night. Am. Pulse 82. Bowels moved almost too freely today. Pm. Pulse 82. Was visited by Son.

Oct 1/93. Am. Pulse 100. Talks rationally, at times. Talks of home & family. Oct 2/93. Am. Pulse 82.

Oct 1 At no breakfast. Is quite restless & getting out of bed. Was visited by lady & gentleman (friends).

" 3 Oct 3/93. Am. Pulse 80. Pm. Pulse 84. Appetite not very good. Oct 4/93. Am. Pulse 80. Patient is

" 5 not very strong. Weight (in underclothes) 99 pounds. Oct 5/93. Am. Pulse 74 Pm. Pulse 82. Complains,

" 6 today, of his feet being cold. Was visited by nephew. Oct 6/93. " " 76 " 92. Is up,

" 7 on ward, this morning. Says "he is very weak". Remained up 3 hours. Oct 7/93. Rest & sleep, at night, have not been very good - about 5 hours; occasionally 6 or 7. He has shown considerable of mental confusion, loss of memory & is also quite depressed. This seems quite constant, since admission. Although promising well, he has not improved much. Has remained up in ward all day

" 11/6 Thinks he is feeling stronger. Oct 11/93. Visited by daughter, today. Oct 16/93. See attached record of pulses.

" 17/6 Oct 17/93. Appetite good. Appears to be doing fairly well. Oct 19/93. Wants to be let out, so he can work.

" 20/6 Oct 20/93 Goes out walking, now. Is growing stronger. Oct 21/93. Today, was visited by nephew. —

" 30 Oct 30/93. Of late is growing very contrary, continually asking to go out to work. When examined, in

Oct 30 (cont'd) office, today, conversation was quite free, coherent and rational. Reasoning power seemed good. He appeared to realize the fact that he was very sick when brought here, and to think himself now well enough to go home. Is very anxious to leave.

Nov 1 Nov 1/93. Wt today, 116 pounds. (a gain of about 8 pounds). Was today visited by son & daughter.

" 3 Nov 3/93. Appetite Good; bowels regular. Complains some of pains in chest & back. Does not appear as well as usual. Nov 4/93. Visited by his wife. Nov 5/93. Some delusions noticed. "Thinks

" 4/5 that he has to suffer for something that he has done". Nov 8/93. Appetite Good; bowels normal.

" 8 Always "thinks someone is going to do him harm". Nov 9/93. Ordered today. Complains of pains

" 9 in chest and of feeling sick at his stomach. Nov 10/93 Says "he feels well enough now to get up".

" 10 Nov 11/93. Is upon ward. Nov 12/93. Still Complains (as above); visited, today, by his wife.

" 11/12 Nov 13/93. Daughter visited him, today. Nov 27/93. Complains, now, of pains "all over." —

" 13/27 Bowels somewhat constipated. Asks to get out to help and do some work. —

" 29 Nov 29/93. Talking about his family. Still holds to the idea that someone is going to harm him.

Dec 1/93 Dec 1/93. Visited by his son. Dec 2/93. Was today visited by his brother & son and by them taken home, on trial. (See attached clinical record).

— Crossed off the record — was illegally Committed —

Edward Froelich

1895 Dec From 240 —

July 31 Talks rationally; works on ward; is neat & clean. Seems to have the same delusion, at least; as imagines

Aug himself sick quite often, when he is not. Aug 1/95. Wt 140 pds. P 108. Aug 6/95. Appetite good. Bowels

Sept 1/30 regular; has days when he complains of headache & stops in bed. Has delusions, tho' he talks in a very sensible

Oct 1/31 way. Works on ward; Goes walking. Sept 1/95. Wt 138½ pds. P 84. Sept 30/95. Above notes still hold good.

Nov 2 Oct 31/95. Wt 139½ pds. Pulse 116. Oct 31/95. Does not seem to improve, mentally; still shows delusions. Habits clean

Dec 1 Nov 1/95. Wt 145 pds - 98. Dec 1/95. Wt 141 pds. P 72. Jan 1/96. Wt 140½ pds. Pulse 84.

1896 Jan 2/96. Transferred to B2 (on account of a general change of ward). Jan 3/96 Patient's

Jan 2/31 Condition remains about same, from month to month. Works some in Kitchen. Behaves well: Seems

" contented. Seldom talks to anyone, unless addressed. Still holds some delusions re-

Feb 1 Feb 1/96. Wt 140½ pds. P 90. March 2/96. Wt 140 pds. P 84. April 1/96. Wt 141½ pds. P 76. April 30/96. During the period,

Mar 2 patient has been very quiet: has hallucination & is slightly noisy, at night. He does not improve, mentally: talks

April 1/30 but little, unless addressed: is somewhat obstinate, at times: works some, on ward: habits neat & clean: Physical

Condition good: Makes no complaints.

May 1/96 Summary Nurses Notes by Dr. Phelps. Patient quiet: Condition rather chronic: Has worked some in

& Aug 1/97 Kitchen & on ward. Has delusions. No bodily illness noted: Wt. 142 to 147 lbs.

Aug 31/97 Wt. 139th Oct 31/97 Quiet in behavior. Does not take any part in work, is run down & stupid.

Jan 31/99 Intervening notes show patient to be getting along quietly: Works some on ward.

Feb 1 - July 31 - Wt. 136th: Noisy at times: does some work on ward. May 5th has badly scratched side of face

some what disfigured: cause unknown: sometimes strikes self in face & spells cares vigorously.

Aug 1 - Jan 31 1900. Wt. 139th: Health good: usually well behaved: Tidy works some on ward: deluded: sometimes strikes his own

face or strikes wall.

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Personal and Medical History of John Casey #2

HERBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3486.
Residence, #203. South Franklin St. St Paul
Date Admission, 23d September 1893.
Admitted by, Dr Phelps Hour, 7 Pm
How Sent, John B. Olivier J of P. Ramsey County
Sex, Male
Age, 26 years
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Policeman
Degree Education, Fair
Profession Religion, Catholic
Habits, Temperate
Nativity, US (parents born in Ireland).
Physicians Committing, E.A. Whitcomb & A.B. Ancker
Correspondents, Mother's address Mrs James Casey 203 S. Franklin St St Paul
Brothers address Michael Casey 203 S. Franklin St. St Paul
Capt Chas Nordeau Ducat Station St Paul

No. for Year, 56.
Insane Relatives, None
Cause Exciting, Cannot be stated decisively
Cause Predisposing, not given
Form, Acute Melancholia
Accompanying Bodily Disorder, None Stated
Suicidal or Not, not
Date of this Attack, about 6 weeks ago
Duration, about 6 weeks.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 26.
Time of Leaving, Oct 7, 93
Time in Hospital, 14 Days.
Result, Recd

Dropped from Transferred List, April 7th, 1894, because all the cases committed.

EXAMINATION ON ADMISSION.

Exd by Dr Phelps Eby, Oct 2/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Fairly accurate, at present
Quick or Sluggish, Quick.

MEMORY:
Past Events, } Good
Recent Events, }
Special Subjects,

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

REASONING POWER: } Slightly impaired
Ordinary Subjects,
Own Mental State,
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Admits, however, mental derangement. Thinks he is all right now. Nearest to a delusion noted being the idea of being drugged & that officers suspected him of forming Street Car Mens' union.

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

DELUSIONS: } at present not well defined; only that thinks he was drugged as a reason for his mental confusion.
Systematized or Not,
Special Subjects,
Transitory or Not,

HALLUCINATIONS:
ILLUSIONS:
CONVERSATION: Normal in form. Thinks as above
Coherent or Incoherent, he was drugged.
Voluble or Reticent,

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10 1/2 WEIGHT, 150 lbs. NUTRITION, quite good
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, somewhat tremulous Coatings, none Promptness Movement, quite prompt
PUPILS, Equality, unequal; right slightly larger Size, about normal
Response Light, yes Accommodation,
SIGHT, seems not quite up to normal; somewhat short-sighted
HEARING, normal
COORDINATION, Arms, } Quite Good. Finger to nose, Eyes shut, slight hesitation. Standing as
Legs, } foot, good. Stands, Eyes Shut, quite steadily.
TREMORS, Hands, some fine Tongue, somewhat tremulous
Facial Muscles, General,
REFLEXES, Patellar, Exaggerated; about q. Dr P's Scale.
Other Reflexes,
ARTICULATION, Hesitating, Good ~~Slurred.~~
FACIAL EXPRESSION, Good
SENSIBILITY,
HEART, Sounds good; palpitating quite strongly, at present
LUNGS, Sounds are good
EXAM. URINE.

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

Records kept

HISTORICAL.

LENGTH OF INVASION, about 6 weeks ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living; claims healthy
Father or Pat. Relations, Father living; claims healthy.
Brothers or Sisters,

Personal and Medical History of John Casey #2

DESBY, FISLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Deputy Sheriff K.C. Haas, + attended by his (Patients) brother, with the following history. There is none given of either consanguinity or heredity. This is the 1st attack: symptoms + having themselves about 6 weeks ago, by strange language + actions. It seems increasing; no rational periods. He now imagines he shall receive bodily harm from various sources + by various persons. Has shown a disposition to injure others. Is not suicidal nor filthy nor destructive; + shewed no previous peculiarities. Habits are temperate. He has not been subject to any severe disease or injury to head. Has not been restrained or confined, nor under medical treatment. Unable to state cause of disease, with any decision. On personal Examination is found, physically, in good condition. Stated, he was pursued by various persons, intent on doing him bodily harm. That the Church + Pope were behind him + would see him protected, and that the Odd-Fellows had tried to "scare" him. Here was a perceptible change in size of pupils, right the longer. — " —

Sep 23 Sep 23/93. On admission, is in fair physical condition: was put on B². Pulse 96. T(o) 99.4 Bodily Condition quite clean. No injuries or peculiarities noted. Sep 24/93. Slept quite well, last night. AM. Pulse 90. T(o) 99.8. Appetite good; bowels seem regular. No cough noticed. Behavior, today, quite cranky and indifferent. Talks freely. Says he knows why he was put here, but will not tell". PM. Pulse 92. T. 99.6.
" 25 Sep 25/93. Slept well, (8 hours), last night. AM. Pulse 88. T(o) 99.2. Is cranky; says "I know was
" 26 the cause of his being here". Talks freely. PM. " 92 " 99.4. Sep 26/93. Slept 7 hours, last night + was quiet. AM. Pulse 86. T(o) 98.8. Appetite is good. Plays games. Goes out walking. Talks freely - somewhat deluded. PM. Pulse 84. T(o) 98.6. Was visited by mother + brother today.
" 27 His conversation, during their visit, showed that he still held to his delusions. Sep 27/93. Rested and slept, quietly, 7 hours, last night. AM. Pulse 82. Appetite good. Makes no complaints. Talks freely. Still thinks "Lowry is the cause of his being here". Is rather unwilling to talk about his troubles. Rather ignores them. Sep 28/93. AM. Pulse 80. Appetite good: bowels normal. Talks freely; no complaints
" 29/30 Sep 29/93. AM. Pulse 80. Takes an interest in playing cards + billiards. Sept 30/93. No change to note.
Oct 3 Oct 3/93. Is troubled with tooth-ache; also an in-growing toe-nail. Wt. today, 157 pds (a gain of 7 pounds since admission). Oct 7/93 During this, the 2nd week of his stay, Patient has been resting + sleeping well, at night (uniformly 8 hours) each night. He has been quiet + well-behaved, by day; neat, clean, tidy + of good personal habits. Pulse has been normal. Appetite has continued good, and bowels regular. Has taken an interest in his surroundings; played games + billiards &c; has also read some. Free in Conversation. Patient still thinks that he was drugged &c, but not inclined to argue about it + thinks he may be mistaken.
" 7 Was today taken home by his father, who signed Bond for his safe-keeping.

— Crossed off the Record — was illegally Committed —

History of Herman Smith #2

1893			a.2		
MO:	DA:	H.	PULS:	TEMP:	RESP:
Nov.	25	5 PM	68	1022	30
	26	7 AM	70	99	20
		5 PM	70	99.2	20
	27	7 AM	60		
		6 PM	78		
	28	7 "	68		
		5 "	80		
	29	7 "	82		
		5 "	80		
	30	7 "	70		
Dec.	1	7 "	72		
		6 "	76		
	2	7 "	64		
	3	7 "	74		
Dec.	30th				

ated. Patient seems to get along better onward, than at first. Is quiet
mental power almost entirely gone. Habit cleanly. (See attached Records). —
some in flesh). Pulse 88. Jan 15/94. Appetite fairly good,
ning somewhat. Behavior fairly good, though habits are dirty —
ly good, although he at times, is inclined to quarrel with the other
answers questions promptly. Appetite is fairly good; bowels regular.
e has been transfered to this ward, appears to have improved.
He is more active on his feet, more aggressive with the other patients
cheerful. Habits still, however, extreme dirty. Eats rather slovenly.
ing the month).
68. Appetite is fairly good. Bowels are regular. —
emaciated. Under medicines has improved considerably.
+ inoffensive. Would stand, looking out of window, all day,
estions promptly. Was rather slovenly. Soiled his clothes
—
Has been under "new Law" + was sent home, today, with the
Sheriff of Anoka County —

— Crossed off the Records — was illegally Committed —

Now 94

1894

Dec 2 Dec 2/94. Patient died at 7.40. this Evening. Relatives had been advised by telegram of his critical condition, but no word was received from them. A second telegram was sent, advising them of his death. —

Died.

J. R. Spaulding

Personal and Medical History of John [illegible]

GEBERT, PICKAT & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Deputy Sheriff P.C. Haa
history. There is none given of either consanguini
themselves about 6 weeks ago, by stating he was
imagines he shall receive bodily harm from vari
injure others. Is not suicidal nor filthy nor de
temperate. He has not been subject to any severe disease
confined, nor under medical treatment. Unable to state
Examination is found, physically, in good condition. Stat
intent on doing him bodily harm. That the Church & Pope
and that the Odd Fellows had tried to scare him. There was a perce
the tongue. — " —— . ——

Sep 23 Sep 23/93. On admission, is in fair physical condition: was put on B^r. Pulse 96. T(o) 99.4. Bodily Condition
quite clean. No injuries or peculiarities noted. Sep 24/93. Slept quite well, last night. Am. Pulse 90.
" 24 T(o) 99.8. Appetite good; bowels seem regular. No coughs noticed. Behavior, today, quite cranky and
indifferent. Talks freely. Says he knows why he was put here, but will not tell. Pm. Pulse 92. T. 99.6.
" 25 Sep 25/93. Slept well, (8 hours), last night. Am. Pulse 88. T(o) 99.2. Is cranky; says I Lowry was
" 26 the cause of his being here. Talks freely. Pm. " 92 " 99.4. Sep 26/93. Slept 7 hours, last
night & was quiet. Am. Pulse 86. T(o) 98.8. Appetite is good. Plays games. Goes out walking.
Talks freely - somewhat deluded. Pm. Pulse 84. T(o) 98.6. Was visited by mother & brother today.
" 27 His conversation, during their visit, showed that he still held to his delusions. Sep 27/93. Rested and
slept, quietly, 7 hours, last night. Am. Pulse 82. Appetite good. Makes no complaints. Talks freely.
Still thinks I Lowry is the cause of his being here. Is rather unwilling to talk about his troubles.
" 28 Rather ignores them. Sep 28/93. Am. Pulse 80. Appetite good: bowels normal. Talks freely; no complaints
" 29 Sep 29/93. Am. Pulse 80. Takes an interest in playing cards & billiards. Sept 30/93. No change to note.
Do
Oct 3 Oct 3/93. Is troubled with tooth-ache; also an in-growing toe-nail. Wt. today, 154 pds (a gain of 7
" 7 pounds since admission). Oct 7/93 During this, the 2nd week of his stay, patient has been resting &
sleeping well, at night (uniformly 8 hours) each night. He has been quiet & well-behaved by day;
neat, clean, tidy & of good personal habits. Pulse has been normal. Appetite has continued good,
and bowels regular. Has taken an interest in his surroundings; played games & billiards &c; has
also read some. Free in conversation. Patient still thinks that he was drugged &c, but not inclined
to argue about it & thinks he may be mistaken.
Was today taken home by his father, who signed Bond for his safe-keeping.

— Crossed off the Records — was illegally Committed —

Personal and Medical History of Herman Smith #2

Ward 2 1/2.

Dec 31 (1893) No cough noticed. Body is emaciated. Patient seems to get along better on ward, than at first. Is quiet
and well-behaved. Talks but little. Mental power almost entirely gone. Habits cleanly. (See attached Records). —
1894 Jan 1/94. Wt 128 pds. (Has lost some in flesh). Pulse 88. Jan 1/94. Appetite fairly good,
Jan 1/15 bowels regular. Seems improving somewhat. Behavior fairly good, though habits are dirty —
" 31 Jan 31/94. Behavior is generally good, although he at times, is inclined to quarrel with the other
patients - Talks readily and answers questions promptly - Appetite is fairly good; bowels regular.
No cough noticed. Patient, since he has been transferred to this ward, appears to have improved,
both physically & mentally - He is more active on his feet, more aggressive with the other patients
and seems brighter and more cheerful. Habits still, however, continue dirty - Eats rather slovenly.
(Has been dirty 14 days, during the month).
Feb 1 Feb 1/94. Wt 126 pds. Pulse 68. Appetite is fairly good. Bowels are regular. —
" 20 Feb 20/94. Patient was much emaciated - Under medicines, has improved considerably -
His behavior has been quiet & inoffensive - Would stand, looking out of window, all day,
and every day - Answered questions promptly - Was rather slovenly - Soiled his clothes
twice, since 1st inst. — ——

He was committed under "new Law" & was sent home, today - with the
Sheriff of Anoka County —

— Crossed off the Records — was illegally Committed —

Ward 9

1894 J. R. Spaulding

Dec 2 Dec 2/94. Patient died at 7.40. this Evening. Relatives had been advised by
telegram of his critical condition, but no word was received from them. A second
telegram was sent, advising them of his death. ——

Died.

Personal and Medical History of George B. Hush

GIBERT, FULLAM & CHAMBERS, DAVENPORT, IOWA

Whole No. 3487

Residence, 4124 Sheridan Ave, Minneapolis

Date Admission, 27th September 1893.

Admitted by, Dr Gilbourne Hour, 7 Pm

How Sent, John H. Steele, Jail Hennepin County

Sex, Male

Age, 38

Civil Condition, married

Children, Three

Age Youngest Child,

Occupation, Real Estate & Insurance.

Degree Education, Common School & Business College

Profession Religion, Plymouth Congregational

Habits, somewhat intemperate; learned morphine

Nativity, Ohio (Father, Ohio; Mother, Virginia).

Physicians Committing, C. K. Bartlett & A. H. Avery

Correspondents, Mrs Alice R. Hush & George Shelf

Family Physician Dr O. M. Humphrey mpls. Minneapolis

No. for Year, 57.

Insane Relatives, none

Cause Exciting, Financial trouble

Cause Predisposing, previous attack

Form, Primary Dementia

Accompanying Bodily Disorder, none definitely stated

Suicidal or Not, Suicidal

Date of this Attack, June 1893.

Duration, about 3 months.

No. of Attack, not 1st (by report). one or June 1893.

No. of Admissions, 1st

Age First Attack, about 38.

Time of Leaving, Feb 13 94

Time in Hospital, 4 ms. & 2 ds.

Result, Imp.

Crossed from Minnesota Vol. Acts Ins. 1891 December 1st 1893 Committed

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Early Dr Phelps' Oct 2/93 =

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, Quite quick

MEMORY:

Past Events, Fairly good, though some slight

Recent Events, misstatement

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert now

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State, Seems good

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Denies using or ever having used morphine, drugs, or having drunk to excess. Explains the charge of his using morphine, by saying that he got a small bottle of it to possess a drunk that was about his barn; used the greater portion & said his wife saw him throw the balance of it in the stove. Admits having had these nervous attacks for some 5 or 7 years - also typhoid fever about 8 years ago.

EMOTIONAL STATE:

Normal, Calm, normal

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not None detected at present

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free.

Personal and Medical History of George B. Hush

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10 in. WEIGHT, 131 lbs (in winter about 145 lbs) NUTRITION, Seems quite good.

WOUNDS OR ABNORMALITIES, one of his fingers Sprained.

TONGUE, Tremors, normal Coatings, normal Promptness Movement, Quite prompt

PUPILS, Equality, Equal Size, ✓

Response Light, Yes; readily Accommodation, Yes, readily

SIGHT, of left eye considerably impaired.

HEARING, Good

COORDINATION, Arms, not much in Coordination of arms. Finger to nose, eyes shut, fairly well done

Legs, Standing on foot, somewhat unsteady; Standing, eyes shut, somewhat unsteady.

TREMORS, Hands, not much Tongue, normal

Facial Muscles, General,

REFLEXES, Patellar, Equal; about 7 or 8 Dr P's Scale

Other Reflexes,

ARTICULATION, ~~Hesitating~~, Good ~~Slurred~~,

FACIAL EXPRESSION, Good.

SENSIBILITY,

HEART, Sounds are good

LUNGS, Sounds good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Yes Records kept Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Quite Long ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

No history of heredity obtained —

Personal and Medical History of George B. Hush

HERBERT, FUCAN & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Sheriff's Deputy J. A. Kennedy, with the following history of the case. There is no history of consanguinity or heredity. This is probably 2nd attack (had one June 7/93). Has never been sent to Hospital. First symptoms of this attack manifested in June 1893, by relinquishing business and remaining at home. Disease is stationary, with symptoms of increase; variable, through causes of excitement not periodical. Derangement now manifested in no special subject. Reported that his wife & child are bothering him. Has threatened to injure others. Has talked about suicide, through Morphine and by tying handkerchief around his neck: propensity not active now, so far as known. Is not filthy or destructive. Previously, showed an irritable disposition, at times. Parents not addicted to any intemperate or narcotic habits. Patient is somewhat, has used morphine. Has had La Grippe, Winter cholera and Typhoid fever. Has not been restrained or confined, nor under medical treatment. Supposed cause of disease is a financial trouble. On personal examination. General health is found to be prostrated. Pulse 66. Said his hand was injured by the boys and could not tell when it happened; said also his left leg was injured. Was quiet, but satisfied, in manner, and action. Feeble, showing signs of incipient paresis, with evidence of dementia. Is a sick man & should have Hospital treatment. Vitality is low & nervous system prostrated.

Sept 27 Sep 27/93. Patient, on admission, is in poor physical condition. Was put on B^r. Pulse 78. Tem 99.4. Bodily condition clean. No peculiarities or injuries noticed, except being lame & stiff; probably from being held by force, as he claims. Sep 28/93. Slept quite well, last night. AM. Pulse 74. Tem 99. Appetite is good; bowels normal, seemingly: no cough noticed. Is quietly behaved - clean, tidy & of good personal habits. Walks about hall. Talks freely with his fellow patients - no delusions noted. No complaints or injuries to note. PM. Pulse 72. Tem 99.2. Sep 29/93. Slept 8 hours last night & was quiet. AM. Pulse 76 Tem 98.8. Is very quiet. Talks freely & sensibly. Walks about hall. In good spirits. " 30 PM. Pulse 74. Tem 98.6. Sep 30/93. Again rested & slept well, last night. AM. Pulse 74 Tem 99. PM " 72 " 98.8. Well - behaved. —

Oct 1 Oct 1/93. Seems contented. Talks freely. Quiet & intelligent in appearance. Appetite good. " 2/3 Oct 2/93. Makes no complaints. Seems all right. Oct 3/93. Appetite continues good; weight, today, 124½ pds (a slight gain since admission). Talks freely & quite sensibly. " 11 Oct 11/93. During this 2nd week, & for the four nights previous, patient has been uniformly quiet, and has rested & slept well, 8 hours each night. Pulse has also been quite normal. His appetite has continued good. Has done some reading, writing & has also played games, Cards &c. Has attended services in Chapel, quite regularly. Goes out walking regularly with the rest. Talks freely & sensibly. This patient describes "spells" of unconsciousness; while at home, lasting hours or days. Was violent, but did not know what he was about. Oct 31/93. Works in dining-room. Makes no complaints. Plays games. Reads some. Very good patient; pleasant & jovial. Talks freely & sensibly. Physical & mental condition good.

Nov 1/8 Nov 1/93. Pulse 136 pds. Pulse 70. Nov 8/93. Is at all times, a quiet, well-behaved patient; pleasant, and " 22 agreeable. Talks freely & rationally. Is fond of reading. Helps with work in the dining-room. Nov 21/93. He with some other patients, attended the Opera down town, this evening. Was much pleased with the entertainment. " 30 Nov 30/93. Seems to be making considerable improvement. Pleasant & sociable. Talks freely & rationally. Habits good.

Dec 1/24 Dec 1/93. Pulse 140½ pds (is gaining down in weight). Pulse 72. Dec 27/93. Has conducted himself in a very quiet " 31 and gentlemanly manner. Was to day, transferred to B^r - the "Open Ward". Dec 31/93. Has continued quiet

Personal and Medical History of George B. Hush

Oct to Dec 1893

Dec 31 and well-behaved. Pleasant & agreeable in manner; helps with ward work. Plays games; also reads a great deal & writes quite a few letters. Always neat, clean in his personal habits. Recently

Feb. 19th 94.

NOTE CONCERNING MR. G.B.HUSH.

Mr.Hush, patient, leaves here Feb. 19th 1894. Although during his stay here he has manifested no spells of any kind, yet his wife in a letter some months ago, tells of very distinct excitement during the whole of the past summer. Also during the past two weeks, ~~has br other~~ of his being liable to arrest for forgery committed, as she thinks, under the influence of these trance states. To day, (Feb.19th) his wife comes to take him out, he having been illegally committed under the new law. She describes his history somewhat as follows:- From one to two years ago, during this time, she thought he appeared at times somewh at strange, there are very many things quite queer which she looks back to, but did not at that time have a realizing sense that he was becoming insane. During the past year, however, things have been more evident. During the ~~summer~~ part of last summer he had a kind of fever, which the doctors at first said was Typhoid, but of which they seem quite uncertain. Following that he had very distinct spells almost every day, although there were intervening days when he did not have them. In these spells for hours at a time he would wander about doing things, and afterwords come to himself and not know anything about what he had been doing. She would usually search him out and find him, and he would willingly come home while under her influence, but was apt to elude and escape her again at any time. During these spells, as she said, there came a kind of drawn look upon his face, by which lately she had been able to tell quite acurately whether or not he was in one. In general, however, he moved about in a quite intelligent manner. During the summer, however, in a good many of them, he was more or less delirious, and used to complain part of the time of some one taking his money, and being unable to get it back, and part of the time of having hid it in the Piano, or somewhere. It was found during the summer that he had mortgaged all of the property mortgagable, and that the money therefrom had always mysteriously disappeared. There seems to have been nothing bought with it, that was perceptible, neither was there the slightest evidence that he had visited the saloon, and the only alternatives seemed to have been, that some one had gotten the money from him, or that he had hidden it. The idea of hypnotic influence was the earliest one taken up by his wife, although she has since been to some degree talked out of it, and does not know what to think. Considerable pains have been taken to try and find traces of the money, the property squandered having amounted to between 30 and 40,000 dollars.

Nothing however, can be found of his having been spent foolishly or in any other way. During the summer when at his worst and under watch, he seemed to have a semi delirious trance state, always the idea of skipping away. One time having gone to town loaded with a foolish lot of things, including a lot of old socks, and various personal property. He seems to be always willing to give away what he had at these times.

Sept 1/30 Sept 1/95. Wt 139 pds. P 76. Sept 30/95. Quiet & well-behaved. Still has delusions. Sore feet pain him a good deal.
Oct 1/31 Oct 1/95. Wt 143 pds. P 88. Oct 31/95. Always quiet & neat & clean in habits. Is a good & willing worker. Oct/95. Wt 143 pds. P 88. Oct 31/95. Always quiet & neat & clean in habits. Is a good & willing worker.
Nov 1 Nov 1/95. Wt 146 pds. Pulse 82. Dec/95 Wt 150½ pds. Pulse 86. Jany/96 Wt 149 pds. Pulse 88 —
Dec 1 1895 Jany 31/96. Transferred to B^r (on account of general change of wards). Jan 31/96. Quiet & agreeable. Talks but little. No special improvement noticed, mentally. Still has delusions. Good worker. Habits clean. Health good.
Jan 1/31 to Transfer Book "A" page 279

...nal and Medical History of George B. Hush.

1893

Has be...
There re...
never bee...
and remai...
excitem...
wife & chi...
and by type...
Previously,
habit. Pa...
Has not bee...
financial t...
...suppposed cause of disease is a
...own. General health is found to be prostrated. Pulse 66. Said
his hand was ...pured by the boys and could not tell when it happened; said also his left leg was injured.
Was quiet, bewildered, in manner, and action. Feeble, showing signs of incipient paresis, with evidence
of dementia. As a sick man should have hospital treatment. Vitality is low & nervous system prostrated.

Sept 27 Sept 27/93. Patient, on admission, is in poor physical condition. Was put on B². Pulse 78. T. 99.4.
Bodily Condition Clean. No peculiarities or injuries noticed, except being lame & stiff; probably from
" 28 being held by force, as he claims. Sept 28/93. Slept quite well, last night. AM. Pulse 74. T. 99. Appetite
is good; bowels normal, seemingly: no cough noticed. Is quietly behaved - clean, tidy & of good per-
" 29 sonal habits. Walks about hall. Talks freely with his fellow patients - no delusions noted. No
complaints or injuries to note. PM. Pulse 72. T. 99.2. Sept 29/93. Slept 8 hours last night, & was
" 30 quiet. AM. Pulse 76 T. 98.8. Is very quiet. Talks freely & sensibly. Walks about hall. Has good spirits.
PM. Pulse 74. T. 98.6. Sept 30/93. Again rested & slept well, last night. AM. Pulse 74 T. 99.
PM " 72 " 98.8. Well-behaved. —

Oct 1 Oct 1/93. Seems contented. Talks freely. Quiet & intelligent in appearance. Appetite good.
" 2/3 Oct 2/93. Makes no complaints. Seems all right. Oct 3/93. Appetite continues good;
weight, today, 132½ pds (a slight gain since admission). Talks freely & quite sensibly.
" 11 Oct 11/93. During this 2nd week, & for the four nights previous, patient has been uniformly quiet,
and has rested & slept well, 8 hours each night. Pulse has also been quite normal. His
appetite has continued good. Has done some reading & writing & has also played games, Cards &c.
Has attended services in Chapel, quite regularly. Goes out walking regularly with the rest. Talks
freely & sensibly. This patient describes "spells" of unconsciousness; while at home, lasting hours
" 31 or days. Was violent, but did not know what he was about. Oct 31/93. Works in dining-room.
Makes no complaints. Plays games. Reads some. Very good patient; pleasant & genial. Talks
freely & sensibly. Physical & mental condition good.

Nov 1/8 Nov 1/93. Wt 136 pds. Pulse 70. Nov 8/93. Is at all times, a quiet, well-behaved patient; pleasant, and
" 22 agreeable. Talks freely, rationally. Is fond of reading. Helps with work in the dining-room. Nov 22/93. He
with some other patients, attended the Opera down town, this evening. Was much pleased with the entertainment.
" 30 Nov 30/93. Seems to be making considerable improvement. Pleasant & sociable. Talks freely, rationally. Habits good.
Dec 7/14 Dec 14/93. Wt 140½ pds (is gaining some in weight). Pulse 72. Dec 27/93. Has conducted himself in a very quiet
" 31 and gentlemanly manner. Was to day transferred to Ward "E" - the "Open Ward". Dec 31/93. Has continued quiet

2

It is seemingly almost impossible that he should give away such sums as $3800 at one time, &c., without having attracted attention; unless he always gave it to one person, who kept quiet upon the matter.

During last summer it was thought best to send him to his mother in Ohio, was put upon the train, his brother was to meet him in Chicago, but could not find him, and he was not found for three days, when as he says he came too and found himself ~~drift~~ listening to some music in a park. His brother kept track of him for a few days longer, but he finally eluded him and went to Ohio, where he only stayed a few days and returned home to Minneapolis. Says he remembers stopping in Chicago, buying a valise and some things for the children, but came home without them and with only 80¢ in his pocket. In a very bewildered state of mind as to what he had done.

During Mr. Hush's stay here I have talked with him a great deal, about these things, and he always says that his wife has told him so and so about these things, in regard to these things, but can not realize it; can not for the life of him see where property has gone to, if it has gone as described. Is very anxious to go back to Minneapolis, and meet his accusers, but was finally prevailed upon to go to Ohio. During the last day here, however, from the worry and all, he showed himself in a very nervously unsettled condition, and his wife was fearful of another attack.—

The personal impressions made by living with this man are that he is quit clear mentally, but somewhat weakened, with a little of the childish about him. A very nervous man — He seemed perfectly honest and in spite of insinuations from the city can not believe but that he did all, when in the mental condition above described. Some of his acts even criminal such as forging his wife name to M[illegible] &c

...ved. Pleasant & agreeable in manner; helps with ward work. Plays games; also reads
...writes quite a few letters. Always neat, clean, tidy & of good personal habits. Recently
...contented here; his
...h month). Pulse 74.
...gentlemanly in manner
...which he work, daily.
...od physical condition.
...re with them.

Sept 1/5 Sept 1/95. Wt 139 pds. P 76. Sept 30/95. Quiet & well-behaved. Still has delusions. Sore feet pain him a good deal.
Oct 1/31 Neat & clean in habits. Is a good & willing worker. Oct 1/95. Wt 143 pds. P 88. Oct 31/95. Always about same.
Nov 1/95. Wt 146 pds. Pulse 84. Dec 1/95. Wt 150½ pds. Pulse 86. Jany 1/96. Wt 149 pds. Pulse 88 —
Dec 1 1895 Jany 21/96. Transferred to B² (on account of general change of ward). Jan 31/96. Quiet & agreeable; talks
Jany 4/1/31 but little; no special improvement noticed, mentally; still has delusions. Good worker. Habits clean. Health good
to Transfer Book "A" page 279

Personal and Medical History of George B. Hush.

...ate or narcotic
...ver and Typhoid fever.
...posed cause of disease is a
... found to be prostrated. Pulse 66. Said
...r koffened; said also his left leg was injured.
...riable, showing signs of incipient paresis, with evidence
...n Law Hospital treatment. Vitality is low & nervous system prostrated.
Sep27 Sep27/93. ...ain, is in poor physical condition. Was put on B^s. Pulse 78. T. 99.4.
Bodily Con... ...rear. No peculiarities or injuries noticed, except being lame & stiff; probably from
" 28 being held by force, as he claims. Sep28/93. Slept quite well, last night. AM. Pulse 74. T. 99. Appetite
is good; bowels normal, seemingly: no cough noticed. Is quietly behaved - clean, tidy & of good per-
-sonal habits. Walks about hall. Talks freely with his fellow patients - no delusions noted. No
" 29 complaints or injuries to note. PM. Pulse 72. T. 99.2. Sep29/93. Slept 8 hours last night & was
quiet. AM. Pulse 76 T. 98.8. Is very quiet. Talks freely & sensibly. Walks about hall. In good spirits.
" 30 PM. Pulse 74. T. 98.6. Sep30/93. Again rested & slept well, last night. AM. Pulse 74 T. 99.
PM " 72 " 98.8. Well-behaved. ——
Oct1 Oct1/93. Seems contented. Talks freely. Quiet & intelligent in appearance. Appetite good.
" 2/3 Oct2/93. Makes no complaints. Seems all right. Oct3/93. Appetite continues good;
weight today, 124½ pds (a slight gain since admission). Talks freely & quite sensibly.
" 11 Oct11/93. During this 2nd week, & for the four nights previous, patient has been uniformly quiet,
and has rested & slept well, 8 hours each night. Pulse has also been quite normal. His
appetite has continued good. Has done some reading, writing & has also played games, Cards &c.
Has attended Services in Chapel, quite regularly. Goes out walking regularly with the rest. Talks
freely & sensibly. This patient describes "spells" of unconsciousness, while at home, lasting hours
" 31 or days. Was violent, but did not know what he was about. Oct31/93. Works in dining-room.
Makes no complaints. Plays games. Reads some. Very good patient; pleasant & jovial. Talks
freely & sensibly. Physical & mental condition good. ——
Nov1 Nov1/93. Wt 136 pds. Pulse 70. Nov8/93. Is at all times, a quiet, well-behaved patient; pleasant, and
" 15 agreeable. Talks freely, rationally. Is fond of reading. Helps with work in the dining-room. Nov24/93. He
with some other patients, attended the Opera down town, this evening. Was much pleased with the entertainment.
" 30 Nov30/93. Seems to be making considerable improvement. Pleasant & sociable. Talks freely, rationally. Habits good.
Dec^r 1 Dec1/93. Wt 140½ pds (is gaining down in weight). Pulse 72. Dec7/93. Has conducted himself in a very quiet
" 31 and gentlemanly manner. Was to day transferred to B^s - the "Open Ward". Dec31/93. Has continued quiet

Jan 1 Jan1/94. Wt 139½ pds. (Has been steadily gaining some, in flesh, each month). Pulse 74.
" 15 Jan15/94. Appetite good; bowels regular. Always quiet, well behaved & gentlemanly in manner.
" 31 Jan31/94. Quiet & well-behaved. Takes quite an interest in photography at which he work, daily.
Feb 1 Feb1/94. Wt 139½ pds. Pulse 74. Appetite good. Bowels regular. Is in good physical condition.
" 19 Feb19/94. Was this evening visited by his wife & child. Went home with them.
(See attached notes).

25/33

CLINICAL REPORT.

Patient's Name J. O Boyle Case Number 3492 Record Commences Jan 1st

DATE.				
Jan 21	72		80	
" 22	72		72	
" 23	76		78	Complains of bowels not being regular
" 24	68		76	Sleeps 6 to 8 hours every night
" 25	72		72	up in chair every day as usual
" 26	72		72	
" 27	76		72	
" 28	72		76	Complains of being sick to stomach
" 29	76		76	frequently.
" 30	72		76	Appetite fair
" 31	72		76	

July 1/95 July1/95. Wt 143 " " 70. July31/95. Still shows delusions: is clean & neat in his habits.
Aug/31 Works on ward & is in good Physical condition. Aug/95. Wt 133 pds. P96. Aug31/95. Has many
delusions. Imagines some one is after him. Is a good worker. Troubled with sore feet. Bowels regular.
Sept 1/30 Sept1/95. Wt 139 pds. P76. Sep30/95. Quiet & well-behaved. Still has delusions. Sore feet pain him a good deal.
Oct 1/31 Neat & clean in habits. Is a good & willing worker. Oct1/95. Wt 143 pds. P88. Oct31/95. Always about same.
Nov 1 Nov1/95. Wt 146 pds. Pulse 84. Dec1/95. Wt 150½ pds. Pulse 86. Jany1/96. Wt 149 pds. Pulse 88 —
Dec 1 1895 Jany31/96. Transferred to B7 (on account of general change of wards). Jan31/96. Quiet & agreeable. Talks
Jany 4/4/31 but little: no special improvement noticed, mentally. Still shows delusions. Good worker. Habits clean. Health good.

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was well-behaved. Pleasant & agreeable in manner; helps with ward work. Plays games; also reads a great deal & writes quite a few letters. Always neat, clean, tidy & of good personal habits. Recently has been assisting (with Dr. Phelps) in taking Photographs of the patients. Seems fairly Contented here; his Physical health is good. Patient now has limited Parole.

Jan 1/94. Wt 139½ lbs. (Has been steadily gaining some in flesh, each month). Pulse 74.

Jan 15/94. Appetite good; bowels regular. Always quiet, well behaved & gentlemanly in manner.

Jan 31/94. Quiet & well-behaved. Takes quite an interest in photography at which he works daily.

Feb 1/94. Wt 139½ lbs. Pulse 74. Appetite good. Bowels regular. Seem good physical condition.

Feb 19/94. Has this evening visited by his wife & child. Went home with them. (See attached notes).

Crossed at the Record: was illegally Committed –

5/1923

CLINICAL REPORT.

Patient's Name J. A. Boyle Case Number 3492 Record Commences Jan 1st 1895

DATE. A.M. P.M.

	P	R	S	P	R	S	
Jan 1	80			64			Appetite fair Bowels regular. Night. Slept 5 hours.
2	70			62			On medicine 3 times a day.
3	70			62			Complains of feeling sick to stomach
4	72			70			Night. Sleeps from 5 to 8 hours every night.
5	84			72			
6	68			72			
7	76			68			Complains of bowels being costive. gave Hunyadi water IIII z. 10 A.M. Bowels moved freely
8	76			72			Says he is tired of living. Complains of severe pains in head and back
9	84			72			Complains of bowels being costive
10	78			72			6 45 A.M. gave hunyadi water 4 z. up in chair 4 hours.
11	70			64			6 45 A.M. gave hunyadi water IIII z. up in roller chair 8 hours this A.M.
12	80			80			up in chair 4 hours
13	80			68			up in chair 4 hours.
14	76			72			up in chair 4 hours
15	76			80			up in chair 4 hours
16	72			76			up in chair 7 hours
17	72			84			Night slept 6 hours
18	72			76			Complains of bowels being costive gave hunyadi water IIII z. bowels moved
19	72			76			
20	72			84			up in chair every day from 4 to 8 hours appetite fair. Bowels costive

...wright & was ...ns about hall. Sui good spirits. ...ast night. AM. Pulse 74 Temp 99.

...ry. Quiet & intelligent in appearance. Appetite good. ...mplaints. Seems all right. Oct 3/93. Appetite continues good; ...ent ½ pds (a slight fall since admission). Talks freely & quite sensibly.

" 11 ...93. During this 2nd week, & for the four nights previous, patient has been uniformly quiet, and has rested & slept well, 8 hours each night. Pulse has also been quite normal. His appetite has continued good. Has done some reading, writing & has also played games, Cards &c. Has attended Services in Chapel, quite regularly. Goes out walking regularly with the rest. Talks freely & sensibly. This patient describes "spells" of unconsciousness; while at home, lasting hours or days. Was violent, but did not know what he was about. Oct 31/93. Works in dining-room. Makes no complaints. Plays games. Reads some. Very good patient; pleasant & jovial. Talks freely & sensibly. Physical & mental condition good.

Nov 1/93. Wt 136 pds. Pulse 70. Nov 8/93. Is at all times, a quiet well-behaved patient; pleasant, and agreeable. Talks freely, rationally. Is fond of reading. Helps with work in the dining-room. Nov 24/93. Has with some other patients, attended the Opera down town, this evening. Was much pleased with the entertainment.

" 30 Nov 30/93. Seems to be making considerable improvement. Pleasant & sociable. Talks freely, rationally. Habits good.

Dec 1/93 Dec 1/93. Wt 140½ pds (is gaining some in weight). Pulse 74. Dec 27/93. Has conducted himself in a very quiet

" 31 and gentlemanly manner. Was to day transferred to Ward's – the "Open Ward". Dec 31/93. Has continued quiet

...two nights. ...rally in bed. Dr. ...his stomach & ...tired of living" – ...Sleeps quite ...(See attached Note) ...every quiet ...ward. Patient ...e – but has ...me at ward. ...ard. Pulse 62. ...t little. Still ...ch but little ...mentally. ...ap: No change. ...has retired, must ...condition Good ...walking the hall. ...in his habits. ...31/95. Has many ...rals regular. ...him a good deal. ...always about same. Pulse 88 – ...bee: Talks ...Wall & Food ...ok "A" page 279

was well-behaved. Pleasant & agreeable in manner; helps with ward work. Plays games; also reads a great deal & writes quite a few letters. Always neat, clean, tidy & of good personal habits. Recently has been assisting (with Dr. Phelps) in taking Photographs of the patients. Seems fairly contented here; his physical health is good. Patient now has limited Parole.

Jan 1 — Jan 1/94. Wt 139½ lbs (Has been steadily gaining some in flesh, each month). Pulse 74.

" 15 — Jan 15/94. Appetite good; bowels regular. Always quiet, well behaved & gentlemanly in manner.

" 31 — Jan 31/94. Quiet & well-behaved. Takes quite an interest in photography at which he works daily.

Feb 1 — Feb 1/94. Wt 139½ lbs. Pulse 74. Appetite good. Bowels regular. Seem good physical condition.

" 19 — Feb 19/94. Was this evening visited by his wife & child. Went home with them. (See attached notes).

Crossed off the Record; was illegally committed —

Joseph O. Boyle.

1894 Dec 31 — From 356. Seems better, 6 to 7 hours each night, though he has been somewhat restless the past two nights. He still is confined to bed — (Always insists that he is not well; content & lies quietly & wakly in bed. Wt)

1895 Jany 7 — Jany 7/95. Patient sleeps from 5 to 8 hours every night. At times, complains of feeling sick at his stomach & of Constipation. Jan 8/95. Complains of his bowels, of severe pains in head & back. Says he is tired of living —

" 8 — Jan 9/95. Has been up & in chair, a portion of each day for the past week or so. Jany 31/95. Sleeps quite well — Is up in chair, every day. Still complains of Constipation & being sick at stomach (See attached Note)

" 17/31 — Feb 3/95. Dressed, & up as usual. Complains of bowels being Costive. Eats poorly. Is very quiet.

Feb 3 — Feb 11/95. Transferred to B[illegible]. Feb 28/95. On 2 or 3 occasions, since coming in this Ward, Patient has Complained of his stomach troubling him & has refused an occasional meal — but has quickly recovered from these attack of ill feeling — Appetite improved & he works from ward. Mentally, his condition does not seem to change any. March 2/95. Wt 136 lbs. Pulse 62.

" 11 — March 5/95. Goes out walking daily. Appetite much improved — He is very quiet. Talks but little. Still shows delusions. March 15/95. Works some on ward. March 31/95. Still very quiet; talks but little & then only when addressed. Habits clean. He does not seem to improve any, mentally.

" 15/31 — Apl 1/95. Wt 149½ lbs (a gain in flesh of 13½ lbs during past month). Pulse 72. Apl 30/95. No change.

Apl 1/30 — May 1/95. Wt 141 " Pulse 71 — May 31/95. A very quiet & well-behaved patient, on ward: when started, must be watched very closely, or he will wander away. Still holds delusion. Physical condition Good.

May 1/31 — June 1/95. Wt 140 lbs. Pulse 75. June 30/95 — No visible Change: very restless, at times, walking the hall.

June 1/30 — July 1/95. Wt 143 " " 70. July 31/95. Still shows delusions: is clean & neat in his habits.

July 1/31 — Aug 1/95. Works on ward & is in good Physical condition. Aug 1/95. Wt 133 lbs. Pulse 96. Aug 31/95. Has many

Aug 1/31 — delusions: "Imagines some one is after him". Is a good worker. Troubled with sore feet. Bowels regular.

Sept 1 — Sept 1/95. Wt 139 lbs. Pulse 96. Sept 30/95. Quiet & well-behaved. Still has delusions. Sore feet pain him a good deal.

Sept 1/30 — Oct 1/95. Wt 143 lbs. Pulse 88. Oct 31/95. Always about same.

Oct 1/31 — Nov 1/95. Wt 146 lbs. Pulse 82. Dec 1/95. Wt 150½ lbs. Pulse 86. Jany 1/96. Wt 149 lbs. Pulse 88 —

Nov 1 — Jany 31/96. Transferred to B[illegible] (as part of general change of Wards). Jan 31/96. Quiet & agreeable. Talks

Dec 1 1895 — but little: no special improvement noticed, mentally: still shows delusions. Good worker. Habits clean. Health good

Jany 1/31 — to Transfer Book "A" page 279

Sept 27 — Sept 27/93. Bodily Co[illegible] being held [illegible] is good; bowe[illegible] -sonal habits. [illegible]ut hall. Talks fre[illegible]

" 29 — Complaints or injuries to note. PM. Pulse 7[illegible] quiet. AM. Pulse 76 T(e) 98.8. Is very quiet. [illegible] walks about hall. Has good spirits.

" 30 — PM. Pulse 74. T(e) 98.6. Sep 30/93. Again rested [illegible] last night. AM. Pulse 74 T(e) 99. PM " 72 " 98.8. Well-behaved. —

Oct 1 — Oct 1/93. Seems contented. Talks freely. Quiet & intelligent in appearance. Appetite good.

" 2/3 — Oct 2/93. Makes no complaints. Seems all right. Oct 3/93. Appetite continues good; weight, today, 124½ lbs (a slight gain since admission). Talks freely & quite sensibly.

" 11 — Oct 11/93. During this 2nd week, & for the four nights previous, patient has been uniformly quiet, and has rested & slept well, 8 hours each night. Pulse has also been quite normal. His appetite has continued good. Has done some reading & writing & has also played games, Cards &c. Has attended Services in Chapel, quite regularly. Goes out walking regularly with the rest. Talks freely & sensibly. This patient describes "spells" of unconsciousness; while at home, lasting hours or days. Was violent, but did not know what he was about. Oct 31/93. Works in dining-room.

" 31 — Makes no complaints. Plays games. Reads some. Very good patient; pleasant & jovial. Talks freely & sensibly. Physical & mental condition good.

Nov 1/8 — Nov 1/93. Wt 136 lbs. Pulse 70. Nov 8/93. Is at all times, a quiet, well-behaved patient; pleasant, and

" 22 — agreeable. Talks freely rationally. Is fond of reading. Helps with work in the dining-room. Nov 24/93. He

" 30 — with some other patients, attended the Opera down town, this evening. Was much pleased with the entertainment. Nov 30/93. Seems to be making considerable improvement. Pleasant & sociable. Talks freely & rationally. Habits good.

Dec 1/7 — Dec 1/93. Wt 140½ lbs (is gaining some in weight). Pulse 72. Dec 7/93. Has conducted himself in a very quiet

" 31 — and gentlemanly manner. Was to day transferred to W[illegible] — the "Open Ward". Dec 31/93. Has continued quiet

Personal and Medical History of Henry J. Hutchins

HERBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3489.

Residence, 3225 Blaisdell Ave. Minneapolis

Date Admission, 28th September 1893.

Admitted by, Dr Phelps Hour, 7 PM

How Sent, Jno A Steele, Jof P, Hennepin Co

Sex, Male

Age, 70 years

Civil Condition, married

Children, none

Age Youngest Child,

Occupation, Locomotive Engineer

Degree Education, Common School

Profession Religion, not a church member

Habits, not intemperate

Nativity, New Hampshire (Father + mother, England).

Physicians Committing, Chas E. Rogers and E S Hart

Correspondents, (Friends) Mr D. Bushnell Cor Lucollet Ave + Blaisdell Ave
Family Physician Dr Carpenter } on 32nd St.



No. for Year, 59

Insane Relatives, Had brother in Asylum for 20 years

Cause Exciting, Heredity

Cause Predisposing, Heredity

Form, Senile Dementia

Accompanying Bodily Disorder, None queer in history.

Suicidal or Not, not.

Date of this Attack, 7 or 8 months ago

Duration, 7 or 8 months

No. of Attack, Several; frequent since 1883.

No. of Admissions, 1st

Age First Attack, about 60 years.

Time of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

Exd by Dr Eby Oct 9/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quite quick

MEMORY:

Past Events, Quite good

Recent Events, Some impairment

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive, Somewhat Illusive

REASONING POWER:

Ordinary Subjects, good

Own Mental State, not good

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Slightly.

DELUSIONS:

Systematized or Not, Systematized, of having some small insects all over his body.

Special Subjects,

Transitory or Not,

HALLUCINATIONS: "Sight" – "Can see insects" –

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite Voluble

Personal and Medical History of Henry J. Hutchins

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10½ WEIGHT, 205½ pds. NUTRITION, Very Good

WOUNDS OR ABNORMALITIES, Carbuncle on back of neck.

TONGUE, Tremors, some, quite marked Coatings, fairly heavy Promptness Movement, very prompt

PUPILS, Equality, Equal Size, somewhat dilated

Response Light, Accommodation,

SIGHT, Impaired

HEARING, Impaired

COORDINATION. Arms. Fingers to nose. Eyes shut Some nice articulation

Case No. 3489. Henry J. Hutchins. 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,~~ Good ~~Slurred,~~

FACIAL EXPRESSION, somewhat depressed.

SENSIBILITY,

HEART, Sounds quite good

LUNGS, Sounds good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Records Kept

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 Henry J. Hutchins

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA





Whole No. 3489.

Residence, 3225 Blaisdell Ave. Minneapolis

Date Admission, 28th Septembers 1893.

Admitted by, Dr Phelps Hour, 7 PM.

How Sent, Jno A. Steele, Jail, Hennepin Co.

Sex, Male

Age, 70 years

Civil Condition, married

Children, none

Age Youngest Child

Occupation, Locomotive Engineer

Degree Education, Common School

Profession Religion, not a church membe

Habits, not intemperate

Nativity, New Hampshire (Father + mother, England).

Physicians Committing, Chas E. Rogers and E. L. Starr

Correspondents, (friend) Mr. D. Bushnell bet Nicollet Ave + Blaisdell Ave on 32nd St.

Family Physician Dr Carpenter

No. for Year, 59

Insane Relatives, had brother in Asylum for 20 years

Cause Exciting, Heredity

Cause Predisposing, Heredity

Form, Senile Dementia

Accompanying Bodily Disorder, none given in History

Suicidal or Not, not.

Date of this Attack, 7 or 8 months ago

Duration, 7 or 8 months

Result,

EXAMINATION ON ADMISSION.

Exd by Dr Ely Oct 9/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, Quite quick

MEMORY:

Past Events, Quite good

Recent Events, Some impairment

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive, somewhat Illusive

REASONING POWER:

Ordinary Subjects, good

Own Mental State, not good

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, slightly.

DELUSIONS:

Systematized or Not, Systematized; of having some small insects all over his body.

Special Subjects,

Transitory or Not,

HALLUCINATIONS: "Sight" – "Can see insects" –

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite voluble

Personal and Medical History of Henry J. Hutchins

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10½ WEIGHT, 205½ lbs. NUTRITION, Very Good

WOUNDS OR ABNORMALITIES, Carbuncle on back of neck.

TONGUE, Tremors, some, quite marked Coatings, fairly heavy Promptness Movement, very prompt

PUPILS, Equality, Equal Size, somewhat dilated

Response Light, Accommodation,

SIGHT, Impaired

HEARING, Impaired

COORDINATION, Arms, Finger to nose, Eyes shut, some incoordination

Legs, Standing, Eyes shut, some swaying.

TREMORS, Hands, Yes Tongue, Yes

Facial Muscles, General, Yes

REFLEXES, Patellar, Equal; about 3 or 4.

Other Reflexes,

ARTICULATION, ~~Hesitating,~~ Good ~~Slurred,~~

FACIAL EXPRESSION, somewhat depressed.

SENSIBILITY,

HEART, Sounds quite good

LUNGS, Sounds good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Records Kept 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,

BARRETT, PICKAS & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Deputy Sheriff Uhlen, with the following history. There is no history of consanguinity, but some of heredity. He had a brother in an Asylum for 20 years. Three attacks have been frequent since 1883; of short duration; mostly, nights: would smash things about the house. Has never been confined in Hospital. First symptoms of this attack were manifested about 7 or 8 months ago. Disease seems increasing; no variation. He now declares that his hair, whiskers and the entire body are covered with lice; says "there are millions of them". Has threatened to injure his wife, but is not suicidal, nor filthy nor destructive. Has been a man of violent temper. There is no history of intemperance, nor of any severe disease or head injury, though he had a severe attack of La Grippe 2 years ago. He has not been restrained or confined. Supposed cause of disease is heredity. On personal examination, is healthy appearing. Said that his body is covered with lice. Constantly cracking them with his thumb-nails & constantly combing his hair & whiskers. Appearance & manner of an insane man. (Facts, as related above, are confirmed by his wife & neighbor, Catherine Bernstein). —

Sep 28 Sep 28/93. On admission, is in apparently good physical condition. Quiet. Waspiration 13. Pulse 120. T(e) 99.6. Bodily Condition clean. Carbuncle noticed on back of neck. Sep 29/93. Slept 8 hours last night, & was quiet. AM. Pulse 110. T(e) 99.4. Appetite is good; no cough noticed. Is quietly behaved. Walks about the hall. Wants to get away. Talks freely. Thinks he has fleas on entire body. PM. P 112 T(e) 98.8. No complaints or injuries to note. Sep 30/93. Slept only 5 hours last night but he was quiet when awake. AM. Pulse 112. T(e) 99.4. Appetite is poor today. Suffers pain from the boil. Talks quite freely. "Wants to go back to Minneapolis". PM. Pulse 110 T(e) 99.6.

Oct 1 Oct 1/93. Was uneasy & crying last night. Slept but 5 hours. AM. Pulse 110. T(e) 99.8. Appetite is only medium. Is crying this morning. Wants to go home. PM. " 106 " 99.8. — " —

" 2 Oct 2/93. Was quiet & slept 7 hours, last night. AM. Pulse 104. Appetite very good today. Talks freely. Says "that he can fix up his business by a letter & dont need to go home". Seems contented.

" 3 Oct 3/93. AM. Pulse 100. Went out walking today. Appetite good. Weight 202 pds. (has lost slightly).

" 4/5 Oct 4/93. AM " 94. Talks freely. Boil still very painful. Oct 5/93. "Fleas are worse than they were". Appetite Continues good. Pulse, this AM, 90. Oct 6/93. Carbuncle was dressed today. Says it now feels easier. Oct 12/93. Since 2nd inst, he has been resting & sleeping well, 8 hours, each night. During this 2nd week, appetite has continued good. Pulse has also become normal. Has been quiet & well-behaved & of good personal habits. Patient came in with a carbuncle on back of neck, which has progressed very slowly but steadily; is now quite open and is doing well. He is quite feeble, mentally; improved some in talk. Talks in a ready but feeble-minded way. Cannot get rid of "fleas", but says "they are fewer". Oct 16/93. Carbuncle

" 16 in back of neck much improved. Oct 28/93. Sore is now healed up, nearly. Oct 31/93. Appetite is

" 28/31 good. Talks freely. Works some on ward. "Bugs nearly all gone" — says "can't feel them, except a few about the head". — Seems in quite fair physical health —

Nov 1/6 Nov 1/93. Wt 201 pds. Pulse 76. Nov 6/93. Is a quiet & well-behaved patient. Talks quite freely, somewhat given to worrying about things at home. Reads; works some. Goes out walking occasionally. Physical

" 30 health good, for man of his age. Nov 30/93. Continues quiet & well conducted. Talks freely but delusions are still shown. Says "those insects bother him considerably, of late". Helps with ward-work. —

1893

Dec 2

" 31

Jan 1893

" 3

Feb

" 1

" 21

" 28

Mar 7

" 21

" 31

Apr 7

" 21

" 24

" 28

Rochester

Minn

Monday

Aug 20th 94

County Attorney Hamilton of Co in 1872 My Wife Left Me & Was Away & Way to Work & did not Know her Whereabouts — For about 20 years.

& then Waiting about 11 years & Married My Present Wife that I now Live With in Minneapolis 15 years Without Any trouble With Hatred & now I am in the Hospital at Rochester & I have Business that Must be Attended to

& I Would Like to Have you take Account With the Greatest Respect H. J. Hutchins

ut does not change any, from day to day.
ially disturbed. Then, when he hears any one
going to try to kill him. Appetite good. Bowels regular
hinks some one is following him to get money and
complains of people talking about him, nights,
ward. Habits are clean.
ys that some woman is after him and he
is letters. "Is bothered with a woman and her
him". Is very much deluded. "Helps with work-
is insects are nearly gone". Inclined to get excited-
under the "Law of 1893" recently declared
and Returned under "new Warrant" from
. Has hallucinations; "Sees some one who is ca-
& appetite good. Physical Condition seems good.
t feeling well today; he ate no dinner.
bout 4 hours, last night. Was "hearing voices".
bothering him nights", and that the Sheriff is going
rounds to keep them from killing him". Says "persons
night"; "can also hear them talking in daytime".
ward. Physical Condition is good.
94. Restless, the past two nights & sleeping poorly.
ing ugly; "imagines different patients are sent
April 3/94. Restless & noisy 10 hours, sleeping but
ward; he is noisy at times. Is extremely deluded.
Also has hallucinations; Works willingly on the ward; habits are clean. —

May 1/7 May 1/94. Wt 191 pds. Pulse 80. May 2/94. Restless & noisy 5 hours, Sleeping but 3 hours, last night.

" 2-3 May 23/94. Was extremely noisy for a part of that time, today; gesticulating & became quite excited. Says "imagines

" 31 some one is in hall & in the purpose of killing him". May 31/94. Has been somewhat quieter of late, though inclined to be easily excited. Reads some; goes walking. Works some on the ward. Still deluded. —

June 7/8 June 2/94. Wt 190½ pds. Pulse 86. June 6/94. Is noisy today. June 13/94. Extremely noisy, today —

" 30 Was transferred to B3. June 30/94. Appetite good; bowels regular. Has been well behaved on this hall. Talks quite rationally; habits clean; helps with the work on the ward. Still shows delusions. —

July 7/13 July 7/94. Wt 188 lbs. Pulse 92. July 13/94. Complaining of distress in stomach, remained in bed this AM.

" 31 July 31/94. "No special change to note. Occasionally noisy at night, but is well-behaved by day. He works willingly on the ward. Still manifests delusions. Habits are clean and neat. —

Aug 1/31 Aug 1/94. Wt 191 pds. P 64. Aug 31/94. Patient had a very "bad spell" this morning: (Attendant remarks apparently heart failure); pulse ceased stop beating for a few moments & he became unconscious. He perspired very freely, became exceedingly weak. Says "he felt a pain in left side". Was put to bed —

Sep 1 Sep 1/94. Is some better today, but still remains in bed. Appetite fair; bowels regular. Behaves well, occasionally a little noisy. Talk is sensible. Has delusions & hallucinations. Habits clean.

(carried to page 272)

EBERT, FIDLAR & GHAMBERS, DAVENPORT, IOWA.

1893 Was brought here [illegible]
of consanguinity, but some
been frequent since 1883;
Has never been confined in [illegible]
months ago. Disease seems [illegible] ...ers and the
Entire body are covered with le... ...atened to injure his
wife, but is not suicidal, nor fe... ...of violent temper. There is
no history of intemperance, nor ... ...injury, though he had a severe
attack of La Grippe 2 years ago. He ... ...confined. Supposed cause of disease is
hereditary. On personal examination ... ...appearing. Said that his body is covered with lice.
Constantly cracking them with his thum... ...nails & constantly combing his hair & whiskers. Appear-
-ance & manner of an insane man. (Facts, as related above, are confirmed by his wife & neighbor, Catherine Bernstein). —

Sep 28 Sep 28/93. On admission, is in apparently good physical condition. Quiet. Wasp temp 13?-
" 29 Pulse 120. T(o) 99.6. Bodily Condition clean. Carbuncle noticed on back of neck. Sep 29/93. 16 pt 8 hours last night, & was quiet. AM. Pulse 110. T(o) 99.4. Appetite is good; no coughs noticed. Is quietly behaved. Walks about the hall. Wants to get away. Talks freely. Thinks he has fleas on entire body. PM. P 112
" 30 T(o) 98.8. No complaints or injuries to note. Sep 30/93. Slept only 5 hours last night but he was quiet when awake. AM. Pulse 112. T(o) 99.4. Appetite is poor today. Suffers pain from the boil. Talks quite freely. "Wants to go back to Minneapolis". PM. Pulse 110 T(o) 99.6.
Oct 1 Oct 1/93. Was uneasy & crying last night. Slept but 5 hours. AM. Pulse 110. T(o) 99.8. Appetite is only medium. Is crying this morning. Wants to go home. PM. " 106 " 99.6. — " —
" 2 Oct 2/93. Was quiet & slept 7 hours, last night. AM. Pulse 104. Appetite very good today. Talks freely. Says "that he can fix up his business by a letter & dont need to go home". Seems contented.
" 3 Oct 3/93. AM. Pulse 100. Went out walking today. Appetite good. Weight 202½ pds. (has lost slightly).
" 4/5 Oct 4/93. AM " 94. Talks freely. Boil still very painful. Oct 5/93. "Fleas are worse than
" 6 they were". Appetite Continues good. Pulse, this AM, 90. Oct 6/93. Carbuncle was dressed
" 12 today. Says it now feels easier. Oct 12/93. Since 2nd inst, he has been resting & sleeping well, 8 hours, each night. During this 2nd week, appetite has continued good. Pulse has also become normal. Has been quiet & well-behaved & of good personal habits. Patient came in with a carbun-cle on back of neck, which has progressed very slowly but steadily; is now quite open and is doing well. He is quite feeble, mentally; improved some in talk. Talks in a ready but
" 16 feeble-minded way. Cannot get rid of "fleas", but says "they are fewer". Oct 16/93. Carbuncle
" 28/31 in back of neck much improved. Oct 28/93. Sore is now healed up, nearly. Oct 31/93. Appetite is good. Talks freely. Works some on ward. "Bugs nearly all gone" - says "can't feel them, except a few about the head". — Seems in quite fair physical health -
Nov 1/8 Nov 1/93. Wt 201 pds. Pulse 76. Nov 8/93. Is a quiet & well-behaved patient. Talks quite freely, somewhat given to worrying about things at home. Reads; works some. Goes out walking occasionally. Physical
" 30 health good, for a man of his age. Nov 30/93. Continues quiet & well conducted. Talks freely but delusions are still shown. Says "those insects bother him considerably, of late". Helps with ward-work. -

Dec 1 Dec 4/93. Wt 202½ pds. Pulse 78. Dec 15/93. Patient does not change any, from day to day.
" 31 Dec 31/93. Behavior good. Rest at night is occassionally disturbed. Then, when he hears any one talking, he thinks they are talking of him & are going to try to kill him. Appetite good. Bowels regular.
Jan 1/94 Jan 1/94. Wt 202½ pds. Pulse 88. Jan 12/94. Thinks some one is following him to get money and
" 31 want to kill him. Jan 31/94. Appetite good. Complains "of people talking about him, nights, and want to kill him". Works some on the ward. Habits are clean.
Feb 1/9 Feb 11/94. Wt 195 pds. Pulse 88. Feb 10/94. Says that some woman is after him and he
" 15 paid her $150.00 Feb 15/94. Thinks we keep his letters. "Is bothered with a woman and her girl"; thinks "they are trying to get money from him". Is very much deluded. Helps with work. Also has hallucinations. Of late, says "his insects are nearly gone". Inclined to get excited.
" 24 Feb 24/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. He was, today, Taken out and Returned under "new Warrant" from
" 28 Olmsted County. Feb 28/94. Works on ward; has hallucinations; "sees some one who is con-tinually persecuting & talking to him. Behavior & appetite good. Physical condition seems good.
Mar 7/14 March 7/94. Wt 197 pds. Pulse 81. Mar 15/94. Not feeling well today; he ate no dinner.
" 21 March 21/94. Was noisy for 4 hours, sleeping only about 4 hours, last night. Was "hearing voices".
" 31 March 31/94. Complains, continually "of someone bothering him nights", and "that the Sheriff is going to take him out". "Wants some one put under bond to keep them from killing him". Says "persons stand by his door & use very obscene language, every night"; "Can also hear them talking in daytime". Appetite Continues good: he works willingly on the ward. Physical condition is good.
Apl 7/14 April 7/94. Wt 195 pds. Pulse 84. April 14/94. Restless, the past two nights & sleeping poorly.
" 23 April 23/94. Cranky & deluded: gradually growing ugly; "imagines different patients are sent here for work against him and Kill him". April 29/94. Restless & noisy 4 hours, sleeping but
" 30 4 hours, last night. April 30/94. Appetite good; he is noisy at times. Is extremely deluded. Also has hallucinations; Works willingly on the ward; habits are clean. —
May 1/14 May 1/94. Wt 191 pds. Pulse 80. May 2/94. Restless & noisy 5 hours, sleeping but 3 hours, last night.
" 23 May 23/94. Was extremely noisy for a short time, today; gesticulating & became quite excited. He "imagines
" 31 some one is in hall & for the purpose of killing him". May 31/94. Has been somewhat quieter of late, though inclined to be easily excited. He reads some; goes walking. Works some on the ward. Still deluded. —
June 7/8 June 7/94. Wt 190½ pds. Pulse 86. June 8/94. Is noisy today. June 12/94. Extremely noisy, to-day
" 30 was transferred to B3. June 30/94. Appetite good; bowels regular. Has been well behaved on this hall. Talks quite rationally: habits clean; helps with the work on the ward. Still shows delusions. —
July 7/13 July 7/94. Wt 188 pds. Pulse 92. July 13/94. Complaining of distress in stomach, remained in bed this AM.
" 31 July 31/94. No special change to note. Occasionally noisy at night, but is well-behaved by day. He works willingly on the ward. Still manifests delusions. Habits are clean and neat. —
Aug 1/31 Aug 1/94. Wt 191 pds. P. 64. Aug 31/94. Patient had a very "bad spell", this morning: (attendant remarks apparently heart failure); pulse ceased stop beating for a few moments & he became unconscious. He perspired very freely, became exceedingly weak. Says "he felt a pain in left side". Was put to bed -
Sep 1 Sep 1/94. Is some better today, but still remains in bed. Appetite fair; bowels regular. Behaves well; occasionally, a little noisy. Talk is sensible. Has delusions & hallucinations. Habits clean.

(carried to page 273)

Personal and Medical History of Peter Berg

SIBLEY, PIGLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3490

Residence, 728 Quincy St. N.E. Minneapolis

Date Admission, Oct 2d 1893.

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

How Sent, John H. Steel J. of P. Hennepin Co.,

Sex, Male.

Age, 31,

Civil Condition, Single

Children,

Age Youngest Child,

Occupation, Shoemaker,

Degree Education, Common School.

Profession Religion, Not a church member

Habits, Not intemperate.

Nativity, Norway.

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

Correspondents, Christian Pedersen Berg (or Bor) brother
Geo. Paulson 728 Quincy St. N.E. Minneapolis
Ludvang Marshall Co. Minn

No. for Year, 68

Insane Relatives, Know of none

Cause Exciting, Illness & financial trouble.

Cause Predisposing,

Form, Acute Melancholia

Accompanying Bodily Disorder, None stated

Suicidal or Not, Not.

Date of this Attack, About a month ago

Duration, About a month.

No. of Attack, 1st,

No. of Admissions, 1st,

Age First Attack, 31.

Time of Leaving, Mch. 6 '94

Time in Hospital, 5 mos. 4 ds.

Result, Imp.

Crossed off from [illegible] 1st, 1894 because [illegible] committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Ord by Dr. Ely, Oct 4/93.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish,

MEMORY:

Past Events, Fair

Recent Events, not so good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, Good

Special Subjects, Good

GENERAL DESCRIPTIVE REMARKS:

Jay is troubled with headache. Has to lay off quite frequently. Is so dull in his head that he cannot do work. Says also, "Be best to go home, tomorrow".

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not, not systematized; are various.

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Fairly Coherent

Voluble or Reticent, voluble

Personal and Medical History of Peter Berg

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, not very good

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Some fine Coatings, white Promptness Movement, quite prompt

PUPILS, Equality, Equal Size, dilated

Response Light, Respond Accommodation, respond

SIGHT, Fair

HEARING, Good

COORDINATION, Arms, finger to nose, Eyes shut, all right

Legs, Standing, Eyes shut, Right Swaying.

TREMORS, Hands, Tongue, Some fine

Facial Muscles, General, Yes.

REFLEXES, Patellar, Equal, about 7 or 8.

Other Reflexes,

ARTICULATION, ~~Hesitating,~~ Good ~~Slurred,~~

FACIAL EXPRESSION, Depressed

SENSIBILITY, Normal

HEART, Sounds, Good

LUNGS, Sounds, good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Records kept

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother living—

Father or Pat. Relations, Father dead

Brothers or Sisters, Brother & sister not known to be out of their mind.

Personal and Medical History of Peter Berg.

EBBERT, FICLAN & CRANDERS, DAVENPORT, IOWA.

1893. Has brought here by Sheriff's Officer A. E. Wilken with following history As far as known this is 1st attack commencing about one month ago in depression "wanted a revolver for his stomach" disease is increasing but there are rational periods and then periods when he is ugly and incoherent. Derangement now shown by depression talks of people around him who in reality are far away Wanders about and is exposed to want & cold, unable to keep at his work. Is not disposed to injure others nor suicidal except asked for a revolver and thinks he has not long to live No history of consanguinuity or of any relatives being insane Not intemperate No previous peculiarities shown. One year ago suffered from some stomach trouble & nose bled occasionally Has not been restrained No results from treatment Cause assigned Illness & worry over financial matters. On personal examination enlarged pupils, furred tongue sluggish reflexes, general air of depression. Answers questions shortly is composed & says he cannot think as well as formly — is forgetful. Sat quiet but appears stupid answers slowly with effort Sleeps in his chair Complains of frontal pain Appeared depressed & stupid Facts gotten from others unable to work or concentrate his attention wander at night, out all Saturday night in wet & rain. Also friends confirm above History. ——

Oct 26 On admission is in apparently good physical condition was put on B 2 —

" 3 Pulse 80. T 99.4. Bodily condition clean. No injuries or peculiarities noted. Oct 3/93. Slept 5 hours, last night; was quiet when awake. AM. Pulse 86. T 99.4. Appetite only medium. Bowels constipated at times. No cough noticed. Walks about hall. Memory seems poor. Is cranky. Talks but little. —

" 4 PM. Pulse 88. T 99.6. Weight 153 pounds. Oct 4/93. Slept 7 hours, last night. AM. Pulse 80. T 99. Is quiet. Appetite good. Talks but little. PM. Pulse 82. T 99.2. Oct 5/93. Slept but 6 hours last night: Was quiet when awake. AM. Pulse 84. T 99. Walks some about hall. Talks but very little.

" 6 Memory seems poor. PM. Pulse 88 T 99.2. Oct 6/93. Slept, quietly, 8 hours, last night. —

" 7 AM. Pulse 82. Bowels regular. Makes no complaints. Oct 7/93. Slept 7 hours last night. AM Pulse.

" 8 Is quiet. Talks some. Goes walking. Oct 8/93. Slept 7 hours last night. Was quiet when awake.

" 9 AM. Pulse 82. Oct 9/93. Slept 8 hours last night. Quiet by day. Does not talk any. —

" 16 Oct 16/93. During this, the 2d week, patient has rested or slept quietly, 7 hours, each night. Pulse has been about 80, each morning. Appetite has been good. Has been quietly behaved. Walks about ward. Talks but seldom, except when addressed. Complains some of headache. Says, however, he feels better than when he came here. Oct 31/93. Continues about as last noted. Does not read or play games.

Nov 1/10 Nov 1/93. Wt 160 pds; (a gain of 7 pounds in last 4 weeks). Pulse 72. Nov 10/93. Appetite is good. Patient is quiet and well-behaved. Talks fairly freely with his fellow patients. Goes walking.

" 13/30 Is clean, tidy & of good personal habits. Nov 13/93. Was today transferred to B 1. Nov 30/93. Apparently rests & sleeps well, at night. Appetite fair; bowels regular. Has a dry cough. very quiet; acts "dumbish". When spoken to, is not inclined to answer. Plays games some. Does not walk any.

Dec 1/30 Dec 3/93. Wt 169½ pds (a gain of 9½ pds. in last month). Pulse 100. Dec 10/93. Appetite continues quite fair; bowels normal. Is a quiet & well-behaved patient. Plays chess. Seldom says anything

Personal and Medical History of Peter Berg

1893

Continued Dec 15/31 Does not care to help any with ward-work. Habits are clean. Dec 31/93. Quiet & well-behaved. Slow in movement. Has little to say. Not inclined to work any. Habits are good.

1894 Jan 2/15 Jan 2/94. Wt 171½ pds. Is still gaining some in flesh. Pulse 76. Jan 15/94. Patient appears to be improving. Has more to say than usual & helps to do the work on ward in the mornings. Plays cards some & reads, once in a while. Has a slight cough. Appetite is poor. Bowels regular. Jan 31/94. Continues quiet and well-behaved, and is improved quite a good deal. Is very quiet. Sleeps on B 2 Ward; takes his meals in A 3 ("Open Ward"). Helps quite willingly with the work in hall. —

Feb 2/15 Feb 2/94. Wt 175 pds. Pulse 81. Feb 28/94. Appetite poor; bowels regular. Is a very quiet and well-behaved patient. Has no "spells". Is somewhat restless at times; is demented. Plays cards, once in a while. Habits are cleanly. —

Mar 3/6 March 3/94. Wt 175 pds. Pulse 78. March 6/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was today, with some others from Hennepin County, sent home. ——

Crossed off the records = Was illegally committed.

Edward Froelich

1900 From 11 W.

Feb 1 Wt 136#. P 76. July 17. Vaccinated: result good: July 31. Condition unchanged. Health good. He

July 17/31 seems somewhat demented: irritable in manner: has but little to do with others: inclined to be

Aug 1 lazy. Works some on ward. Answers ordinary questions rationally. Aug 1. Wt 136 lbs. —

Nov 30 1901 No noticeable change — Jany 31/1901. But little change: genual health good. Works both off

Jan 31 and on ward; about building: is very well-behaved: answers questions but does not converse—

Feby Feby at times, strikes himself ahead & expresses delusions. Feby. Wt 138# May 2. Wt 139# Augt 1. Wt 137#

Nov 1 1902 Jan 31 Wt 140#. Jany 31/02. Has been in good health, during year, and well-behaved: Habits neat and tidy. Does some work on ward, and about "Centre": very seldom speaks unless addressed. Talks a good deal to himself, and is seen, at times, to strike himself, with his fists. Shows very little interest in surroundings. Nov 31/02. Works well on ward & about "Centre." very quiet & peaceable. Sometimes talks to himself & makes threatening motions, as if at imaginary

July 31 1903 Jany 31 persons: Habits tidy: Health good. Jany 31/03. Works about "Centre": very quiet & peaceable: very rational: health good. ——

Personal and Medical History of Bern. J. Pluto Von Pradzynski
(Pluto Von Pradzynski Bernhardus)

HERBERT, PIGLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3491.
Residence,
Date Admission, Oct 26 1893.
Admitted by, D. Phelps Hour, 7. P.M.
How Sent, Jno H Steel Jof P Hennepin Co.
Sex, Male
Age, 24
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Laborer.
Degree Education, Common School
Profession Religion, Brought up Catholic
Habits, Probably not good.
Nativity, Germany.
Physicians Committing, J.M. Hall & Dr. M Crafts
Correspondents,



No. for Year, 61.
Insane Relatives, Not known.
Cause Exciting, Probably an exposed & irregular life
Cause Predisposing,
Form, Chronic Mania
Accompanying Bodily Disorder,
Suicidal or Not, Not.
Date of this Attack, Not known.
Duration, Not known
No. of Attack, Not known.
No. of Admissions, 1st.
Age First Attack,
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.
MENTAL CHARACTERISTICS.

Exd by D. Ely. Oct 31/93.

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

MEMORY:
Past Events,
Recent Events,
Special Subjects, } admits true impairment

PERCEPTIVITY:
Alert or Dull, Fairly alert
Correct or Illusive, Correct (fairly)

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects, } Quite good

GENERAL DESCRIPTIVE REMARKS:
Appears to be somewhat foolish & simple in manner. ——

EMOTIONAL STATE:
Normal, Calm, Normal & Calm, at present
Indifferent, Slightly —
Exalted,
Depressed,

DELUSIONS:
Systematized or Not, None noted, at present.
Special Subjects,
Transitory or Not,

HALLUCINATIONS: of "Hearing" —

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent.
Voluble or Reticent, Quite free in reply to questions. Answers readily promptly.

Personal and Medical History of B. J. Pluto Von Pradzynski

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

WEIGHT, about 150 ps (usual) NUTRITION, quite good now. probably more —
…s Coatings, white — Promptness Movement, slow
Size, slightly dilated
Accommodation, Yes.
…EARING, Yes fairly good Tenus normal.
COORDINATION, Arms, Slight incoordination, especially of left hand.
Legs, Standing, Eyes shut, good. Is steady
TREMORS, Hands, Tongue, quite tremulous
Facial Muscles, General,
REFLEXES, Patellar, Equal; very much diminished; about one —
Other Reflexes,
ARTICULATION, Hesitating, Foreign accent ~~Slurred,~~

Case No. 3491. B.J.P. Von Pradzynski. 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.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Records kept Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 3 mos. or so ONSET GRADUAL OR SUDDEN, —
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Thinks if other people have father & mother, he must have some too. (This is the only reply we can get to this points) —

Personal and Medical History of Bern. J. Pluto Von Pradzynski

(Pluto Von Pradzynski Bern Johns)

SUBJECT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3491.

Residence,

Date Admission, Oct 25 1893.

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

How Sent, Jno H Steel Jos P Kennefick Co.

Sex, Male

Age, 24

Civil Condition, Single

Children,

Age Youngest Child,

Occupation, Laborer.

Degree Education, Common School

Profession Religion, Brought a Catholi

Habits, Probably not good.

Nativity, Germany.

Physicians Committing, T M Hall & Lee M C

Correspondents,

No. fo

Insanc

Cause

Cause

Form,

companying D

icidal or Not,

te of this Attack,

uration,

. of Attack,

. of Admissions,

ge First Attack,

me of Leaving,

me in Hospital,



Bern. J. Pluto Von Pradzynski.

EXAMINATI

Exd by Dr. Eby, Oct 31/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Somewhat Confused

Quick or Sluggish, Fairly quick

MEMORY:

Past Events,

Recent Events, } admits some impairment

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Fairly alert

Correct or Illusive, Correct (fairly)

REASONING POWER:

Ordinary Subjects,

Own Mental State, } Quite good

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Appears to be somewhat foolish & simple in manner. —

EMOTIONAL STATE:

Normal, Calm, Normal & Calm, at present

Indifferent, Slightly —

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None noted, at present.

Special Subjects,

Transitory or Not,

HALLUCINATIONS: of "Hearing" —

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent.

Voluble or Reticent, Quite free in reply to questions. Answers are promptly.

Personal and Medical History of B. J. Pluto Von Pradzynski

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ WEIGHT, about 150 lbs (usual) NUTRITION, quite good now.

WOUNDS OR ABNORMALITIES, probably none —

TONGUE, Tremors, quite tremulous Coatings, white — Promptness Movement, slow

PUPILS, Equality, Equal Size, slightly dilated

Response Light, Yes Accommodation, Yes.

SIGHT, only fairly good

HEARING, seems normal

COORDINATION, Arms, slight incoordination, especially of left hand.

Legs, Standing, Eyes shut, good. Is steady.

TREMORS, Hands, ✓ Tongue, quite tremulous

Facial Muscles, ✓ General,

REFLEXES, Patellar, Equal; very much diminished; about one —

Other Reflexes,

ARTICULATION, Hesitating, foreign accent ~~Slurred,~~

FACIAL EXPRESSION, ✓

SENSIBILITY, normal

HEART, Sounds good

LUNGS, Sounds good.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 3 mos. or so ONSET GRADUAL OR SUDDEN, —

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Thinks if other people have father & mother, he must have some too. (This is the only reply we can get to these points) —

Personal and Medical History of B. J. P. Von Pradzynski

ROBERT, PICKAS & CHAMBERS, DAVENPORT, IOWA.

1893. Was brought here by Deputy sheriff A. E. Whelen with following history. Not known as if there is any consanguinity or as to the duration or no. of this attack Unknown if it is increasing decreasing stationary or if there are rational intervals. as patient has no friends "& can give no coherent account. derangement no shown in refusing food for some days Cannot remember anything about himself. Has not shown a disposition to injure others or to suicide or destruction of articles Habits not filthy Nothing is known as to insane relatives or to any peculiarities of temperment etc before Patients father a moderate drinker and patient drinks whenever can get it. He fell off a freight train about 5 yrs ago injured left hip, was laid up for some time. Restrained for one week in Mpls. Cause given "probably an irregular exposed life" Has not been under treatment. On personal examination Makes very few intelligent statements Ideas are very much confused. Appears stupid Patient said he had a good memory "& could remember almost everything" but at the same time could not give no account of himself Appearance "& manner were stupid "& listless. Has no physician and no friends are known of.

Oct 2d On admission is in appearently good physical health Was put on B^r. —
" 3 Pulse 126 T(R) 99.2. Oct 3/93. Probably slept well, last night. AM. Pulse 126 T(R) 99.2. Ate very little today. Bowels have not moved. Is quiet; says "he does not feel well". No complaints or injuries to note. —
" 4 Oct 4/93. Slept well, 8 hours, last night. AM. Pulse 90. T(R) 98.2. Appetite poor. Bowels still constipated. Is rather stubborn. Oct 5/93. Did not want to go to bed last evening; did not want to take his clothes off. Had to be undressed forcibly. Was very stubborn. AM Pulse 62 T(R) 100.2. Appetite poor. Dont want to eat and wont go into the dining-room, unless brought in. Says "he wants to go out to work and Earn his living". Oct 6/93. Slept 6 hours last night. AM. Pulse 70. T(R) 99.2. Appetite, today, " 7 fairly good. Bowels have moved. Oct 7/93. Apparently rested & slept well, last night. AM Pulse " 8/9 T(R) 99. Appetite fairly good. Oct 8/93. Last night, slept 7 hours. Oct 9/93. Slept 8 hours, last night. AM. Pulse 106. T(R) 99.8. Appetite good. Bowels have become more regular now.
" 10 Oct 10/93. AM " 108 " 98.8. Seems to be improving some. Is very quiet. Seldom speaks,
" 16 but will answer anything asked of him. Oct 16/93. During the past week, patient has apparently rested and slept well, at night. Pulse is still ranging quite high, but Temperature has become about normal. Appetite has been good & bowels regular. Seems more quiet. Is well-behaved. Hardly ever speaks to anyone. Sits by himself in one place most of the day. —
" 20 Oct 20/93. Has been somewhat restless for 3 hours or so, each night of the past w, but has slept 6 hours
" 31 or each. Oct 31/93. Continues quiet & well-behaved. Talks rather foolishly. Asked Yesterday for a knife to cut his throat as he was tired of staying here. Is always asking about going away from here. Inclined to be stubborn. Is a sickly talker & seems partly demented. Habits are clean.
Nov 1/7 Nov 1/93. Wt 162½ lbs. Pulse 88. Nov 7/93. Started to run away today, while out walking; ran about
" 30 ½ a mile, before he was overtaken and brought back. Nov 30/93. Appetite good. Bowels regular. Is fairly well-behaved. Talks quite freely, but appears to be somewhat foolish in his conversation. No work. Habits are clean.
Dec 4/18 Dec 4/93. Wt 168½ lbs (is still gaining in flesh). Pulse 104. Dec 18/93. Patient is frequently bothered with the

Personal and Medical History of B. J. P. Von Pradzynski

1893 (cont'd)
Dec 18/31 nose-bleed. Is quite quick, yet silly in manner. Otherwise no change. Dec 31/93. Apparently rests and sleeps well, at night. Appetite good. Bowels regular. Is rather quietly behaved. Is still frequently troubled with nose-bleed. Talks in a silly & foolish manner. Habits are clean. " "

1894
Jan 1/15 Jan 2/94. Wt 165 pounds. Pulse 77. Jan 15/94. Appetite good; bowels regular. Is well-behaved.
" 31 Does not work any. Does not seem to change much, if any. Jan 31/94. No material change. Talks foolishly; no delusions noted. Physical condition good. Does no work. Habits clean.
Feb 1/28 Feb 1/94. Wt 165 lbs; pulse 82. Feb 28/94. Is well behaved. Talks incoherently. His trouble seems to be of a religious nature; will pray a good deal. Habits clean. Does not work any. Health is good.
" 24 Feb 24/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. He was today, Taken Out and Returned under "new Warrant" from Olmsted County. — Feb 28/94. About as described in note of 23^d Feb. inst.
Mar 1/31 March 1/94. Wt 159½ pds. Pulse 74. March 31/94. Appetite good; bowels regular. Behavior is fairly good, though he will, at times, get quite noisy; talks incoherently & appears as imbecile-Habits are clean. Is inclined to be violent — Does no work at the hall. —
Apl 2/30 Apl 2/94. Wt 166 lbs. Pulse 72. April 30/94. No noticeable Change in his condition. —
May 2/31 May 1/94. Wt 167 " " 96. May 31/94. Appetite good; bowels regular. Behavior quiet, most of the time. Talks incoherently. Habits clean. Does no work. Physical health seems good. —
June 2/30 June 2/94. Wt 166 lbs. Pulse 85 — June 30/94. No noticeable change in Patients condition. —
July 2/31 July 2/94. Wt 162 " " 84 — July 31/94. Patient continues about the same from month to month —
Aug 1/31 Aug 1/94. Wt 155 " " 60 — Aug 31/94 — Apparently quiet & restful, at night — appetite is good & bowels regular. Behavior, by day, is quiet, most of the time; occasionally a little noisy — Talks incoherently — somewhat foolish in appearance & talk — Habits clean. He does not work any —
Sep 3/30 Sep 3/94. Wt 158 lbs. Pulse 80 — Sep 30/94. Continues about the same, for some months past —
Oct 1/31 Oct 1/94. Wt 156 " " 69 — Oct 31/94. No special change & note in this case —
Nov 1 Nov 1/94. Wt 161 " " 98 — Dec 1/94. Wt 156 lbs. P 80. Jan 2/95. Wt 159 lbs. Pulse 80.
Dec Jan 31/95. Appetite good; bowels regular; behaves well; talks incoherently; Habits clean. Does not work
1894/5 any — At times, gets very angry & noisy for awhile. On the whole, no improvement noticeable. —
Jan 31 Feb 1/95. Wt 160 lbs. Pulse 80. Feb 28/95. No noticeable change. Violent; does no work.
Feb 1/28 March 1/95. Transferred to Annex. March 30/95. Patient is quiet: prefers lying on floor,
March 1/30 sitting or seat: rather demented in behavior. Does no work. Otherwise, about same.
Apl 30 April 30/95. Patients condition is unchanged. Is quiet: habits clean. Does not work any.
May
June During this period, nothing noticeable has taken place. Patient is quiet; stupid and melan-
July 31 -choly. Does no work. Habits clean: dress neat: health is good. Talks incoherently;
Aug 31 Aug. Sept & to Oct 31/95. During this quarter, patient has been quietly behaved, but very
Sept stubborn: is quite determined to stand in dark corner: no work: does not speak: habits clean.
Oct 31 Physical health good. No change noted, mentally. Nov 4/95. Wt 167 lbs. Pulse 68. —
Nov Nov. Dec & to Jany 31/96. No change noticeable. Quiet & stupid. Does no work: stands in
Dec corners — Seldom speaks. Habits clean. Health apparently good. Quite stubborn at times.
Jan 31/96 Feb 4/96. Wt 170 lbs. P 88 — Feb March & to April 30/96. No change noticeable during the period. Quiet:
Feby does no work: usually stands in corner & nods & bows continually: seldom speaks. Habits clean: Health apparently good.
March
to Apl 30

See Transfer Book "F" Folio 296.

Personal and Medical History of Joseph O. Boyle.

HERBERT, FULLER & CHAMBERS, DAVENPORT, IOWA





Whole No. 3492.
Residence, Minneapolis
Date Admission, Oct 2d 1893.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John H Stull J.of P. Hennepin Co
Sex, Male
Age, 24
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Brakeman.
Degree Education, Common School
Profession Religion, Catholic
Habits, Not intemperate
Nativity, Canada
Physicians Committing, Dr. A Hall "& H. B Sweetzer
Correspondents, Patrick Flynn (friend) employe of Omaha road in St Paul.

No. for Year, 62.
Insane Relatives, None
Cause Exciting, unknown
Cause Predisposing, probably previous attack
Form, Chronic Mania
[illegible]panying Bodily Disorder,
[illegible]l or Not, Not
[illegible]f this Attack, Sometime in March 93.
[illegible]on,
[illegible] Attack, 2d probably
[illegible] Admissions, 1st.
Age First Attack,
Time of Leaving, June 29. 1897
Time in Hospital, 3 yrs. 8 mo. 26 d.
Result, Transferred & Persons Dales.

Dc

OK JPW

EXAMINATION ON ADMISSION.

Exd by Dr Eby, Nov 11/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear now
Quick or Sluggish, quick at present

MEMORY:
Past Events, was poor, on coming; seems
Recent Events, improved now. —
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:
Admits having some imaginations when he came, but thinks he is over them all right now.

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

DELUSIONS:
Systematized ~~or Not~~, had on coming. Says he has none now
Special Subjects,
Transitory or Not,

HALLUCINATIONS: ✓

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, quite free

Personal and Medical History of Joseph O. Boyle

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7in WEIGHT, about 145 pds. NUTRITION, Good
WOUNDS OR ABNORMALITIES, fingers of right hand cut off.
TONGUE, Tremors, Tremulous Coatings, very slight Promptness Movement, quite prompt
PUPILS, Equality, equal Size, about normal
Response Light, Yes Accommodation, Yes
SIGHT, Quite Good —
HEARING, normal
COORDINATION, Arms, Good. finger to nose, eyes shut. sits good

Case No.3492. Joseph O. Boyle. Vol. 25.

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~~, Good — ~~Slurred~~,
FACIAL EXPRESSION, Normal
SENSIBILITY, normal —
HEART, Sounds are good —
LUNGS, Sounds good. —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Some 7 months ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died; thinks of Dropsy — } no history of heredity brought out. —
Father or Pat. Relations, Father living; health good. —
Brothers or Sisters,

Personal and Medical History of Joseph O. Boyle.

SIBLEY, PUCKAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3492.
Residence, Minneapolis
Date Admission, Oct 3d 1893.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John H Stutt Jr of P. Hennepin Co
Sex, Male
Age, 24
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Brakeman.
Degree Education, Common School
Profession Religion, Catholic
Habits, Not intemperate
Nativity, Canada
Physicians Committing, Dr. A. Hall & W. B. Sweetzer
Correspondents, Patrick Flynn (friend) employe of Omaha road in St Paul.

No. for Year, 62.
Insane Relatives, None
Cause Exciting, unknown
Cause Predisposing, probably previous attack
Form, Chronic Mania
panying Bodily Disorder,
l or Not, Not
f this Attack, Sometime in March 93.
on,
Attack, 2d probably



EXAMINATION ON ADMISSION.

Exd by Dr Eby, Nov 11/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear now
Quick or Sluggish, quick at present

MEMORY:
Past Events, was poor, as coming; seems
Recent Events, improved now. —
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:
Admits having some "imaginations" when he came, but thinks he is over them all right now.

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

DELUSIONS:
Systematized ~~or Not~~, had on coming. Says he has none now
Special Subjects,
Transitory or Not,

HALLUCINATIONS: ✓

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, quite free

Personal and Medical History of Joseph O. Boyle

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7in WEIGHT, about 145 lbs. NUTRITION, Good
WOUNDS OR ABNORMALITIES, fingers of right hand cut off.
TONGUE, Tremors, Tremulous Coatings, very slight Promptness Movement, quite prompt
PUPILS, Equality, equal Size, about normal
Response Light, Yes Accommodation, Yes
SIGHT, Quite good —
HEARING, normal
COORDINATION, Arms, Good. Finger to nose, eyes shut, quite good
Legs, Standing, Eyes shut. Quite steady.
TREMORS, Hands, none Tongue, tremulous
Facial Muscles, none noted General, none.
REFLEXES, Patellar, Equal; about 3 or 4. —
Other Reflexes,
ARTICULATION, ~~Hesitating~~, Good — ~~Slurred~~,
FACIAL EXPRESSION, normal
SENSIBILITY, normal —
HEART, Sounds are good —
LUNGS, Sounds good. —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Records kept Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Some 7 months ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died; thinks of Dropsy —
Father or Pat. Relations, Father living; health good. —
Brothers or Sisters,
} no history of heredity brought out. —

Personal and Medical History of Joseph O. Boyle

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Deputy sheriff Geo. H. Johnson with following history No consanguinity in family Attack commenced last summer and seems to be continuous Dr Mar 1893 symptoms manifested were those of persecution Has not been in a hospital or under treatment Unknown if it is increasing or if there are rational intervals Derangement now manifested in way of being persecuted by unknown persons. Has shown no disposition to injure others, to suicide or to filthy or destructive habits. No insane relatives No previous peculiarities of temperment known. Not intemperate, not subject of any severe disease Not been under restraint No cause is known. On personal examination found patient has delusion of persecution & hallucination of hearing voices. patient said his food was tampered with & that he was spurned and kept from employment by ... While in presence of examiners he kept a continuously incoherent talk on different instances of persecution Appearance and manner were calm & collected. Has no family physician.

Oct 13 Appearance on admission quite good physically Was put on B[r] Pulse 78. T. 98.8.

" 4 Bodily condition clean: no injuries or peculiarities noted. Oct 4/93. Rested & slept apparently well, last night. AM. Pulse 74. T. 98.8. Appetite good. Bowels, as a rule, free, no cough noticed. Is very quiet. Well-behaved. Sits quietly on a bench, most of time, while in hall. Plays billiards. Reads some.

" 5 Talks freely. PM. Pulse 74. T. 99. No complaints or injuries to note. Oct 5/93. Slept & slumbers last night & was quiet. AM. Pulse 76. T. 98.6. PM. Pulse 78. T. 98.8. Is very quiet during the day. Appetite good. Seems good physical condition. Oct 6/93. AM. Pulse 72 T. 98.6.

" 7 PM. Pulse 76. T. 98.6. Appetite good. Complains of sound headache today. Oct 7/93. Pulse 74. Appetite continues good. Has headache (probably from constipation); given medicine for bowels.

" 11 Reads some. Goes walking. Oct 11/93. Has been resting & sleeping well, the past 6 nights.

" 12 Pulse has been normal. Appetite continues good. Oct 12/93. Became violent today; -

" 14 fighting the other patients & also the Attendants. Was transferred to B[3]. Oct 14/93. Has been quietly behaved since down on this ward. Today, found him in a room praying. Says there are some detectives after him & that he also has some trouble with some members of the A. P. A.

" 17 Association, as he said something about them, the other evening". Oct 17/93 Patient continues to rest and sleep well, at night. Appetite good; bowels normal. Works some at the ward. Reads a good deal. Has been quiet & well behaved; causes no trouble. Pulse continues normal.

" 19 Oct 19/93. Engaged in a fight today, while in dining room (with P. Franckenkrom); the latter being the

" 30 cause of the trouble. Oct 30/93. Appetite continues Good; bowels normal. Has delusions; thinking that Detectives are after him. Seems to be more restless of late, than ever before. Always seeking to be alone. Is quietly behaved. Complains a good deal of being sick, of late. Habits clean and neat.

Nov 1/93 Nov 1/93. Wt 149 pds. Pulse 72. Nov 2/93. Struck at Fuller the night-nurse, this morning saying that he threw chloroform on him during the night. Patient was taken to C[3] and left there during the day.

" 30 Nov 30/93. Appetite good. Bowels apparently regular. Is very quiet & reticent; hardly ever speaks to anyone unless first spoken to. Has hallucinations & will sometimes strike a man without any provocation whatever, patient thinking this man has done something to him. Walks the floor, restlessly, most of the time. Works

Personal and Medical History of Joseph O. Boyle

1893

Nov 30 cont'd a little on the ward. Is of good personal habits.

Dec 4/93 Dec 14/93. Wt today, 155 pounds; (is gaining in flesh); pulse 78. Dec 15/93. Kicked a fellow-patient

" 18 in the face today, bruising and blacking his face (eye quite badly. Dec 18/93 No change. Is quite bright in face,

" 31 and seemingly quiet, but very uncertain in behavior. Dec 31/93. Appetite good; bowels regular; Behavior is quiet, most of the time, but occasionally, will get ugly & pugnacious. Manifests delusions. Physical

1894 Condition good; habit clean, and tidy.

Jan 1/94 Jan 1/94. Wt 158 pounds; (still gaining); Pulse 72. Jan 16/94. Appetite good. Bowels seem normal.

" 31 Is restless, walking the floor most of the time. Still shows delusions. Health is Good. Jan 31/94. Apparently rests & sleeps well, at night. Appetite fairly good. Restless by day; Has to be closely watched, as he would elope if opportunity offered. Is in good physical condition.

Feb 1/94 Feb 1/94. Wt 159 pds. Pulse 82. Feb 22/94. Continues restless, by day, walking the floor, a good deal

" 24 of the time. Watches for a chance to get out. Shows some delusions. Does no work. Feb 24/94. This patient was committed here under the "Law of 1892" recently declared uncon-

" 28 stitutional. He was today, Taken Out and Returned under "New Warrant" from Olmsted County. Feb 28/94. Is out as above described.

Mar 1/94 March 1/94. Wt 161 pds. Pulse 84. March 12/94. Made his escape today, while out walking, but was captured later in the day (by attendants Olson & Kimball), about 5 miles beyond Chester; returned to ward.

" 31 March 31/94. Appetite good; bowels regular. Is very restless & uneasy; walking the floor & hardly ever sitting down & every day asking the Doctors "to let him go home". Will occasionally fight. Still holds delusions. Habits are neat & clean. He does no work.

Apr 2/30 April 2/94. Wt 155 pds (a loss of 5 pounds in past month). Pulse 74. April 30/94. Still continues restless & uneasy, pacing the floor a good deal of the time. Lies about in his bed & the benches; occasionally gets under the bed. Very anxious to get away. Still shows delusions. Habits clean.

May 1/31 May 1/94. Wt 156 pds. Pulse 92. May 31/94. Appetite good; bowels regular. Is very restless; hardly ever sitting down; walks about the hall, most of the time, yet does not want to go out walking: talks quite rationally, & appears to be fairly well. Habits are clean. He works some, now, on the ward.

June 1/30 June 1/94. Wt 152½ pds. Pulse 92. June 30/94. No change noticed at this date.

July 1/31 July 2/94. Wt 145 pds. " 112. July 9/94. Complaining of not feeling well, remained, today, in bed.

" 12 Has not partaken of any food for four meals, now. Complains of his bowels being constipated.

" 17/31 July 17/94. Is up & gain about the hall. July 31/94. No special change. Still shows delusions.

Aug 1/31 Aug 1/94. Wt 143½ pds. Pulse 90. Aug 31/94. Appetite good; bowels regular. Behavior good. Talks quite sensibly. Does not like to go out walking & generally amuses himself when the others are getting ready for a walk. Lies under the bed a good deal of the time. Works some on ward. Habits clean.

Sep 3/30 Sep 3/94. Wt 148 pds. Pulse 76. Sep 30/94. Keeps about as last described. Habits are clean.

Oct 1/31 Oct 1/94. Wt 151½ pds. " 80. Oct 31/94. No change noticeable at this date.

Nov 1/30 Nov 1/94. Wt 153 " " 90. Nov 2/94. Has kept about as usual, but today was complaining of not feeling well in the morning; throat is sore. Temperature (1 P.M.) 102. Transferred to C[3], at 5[30] P.M. Put to bed there. Nov 27/94. Restless 4 hours, sleeping but 2 hours, last night. Has been given powders, every 4 hours; also gargle for throat. Ate very light supper. Ear discharging

(carried to page 350)

Personal and Medical History of Nils Larson.

HERBERT, PUGLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3496.
Residence, Minneapolis
Date Admission, Oct 4th 1893.
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, John H Steel J of P Hennepin Co.
Sex, Male
Age, 29.
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Laborer.
Degree Education, Very limited
Profession Religion, Lutheran
Habits, Probably good
Nativity, Norway
Physicians Committing, F C Swetzer & W A Hall.
Correspondents, Peter Larson 258 Plymouth Ave Mpls

No. for Year, 66.
Insane Relatives, None
Cause Exciting, Unknown.
Cause Predisposing,
Form, Chronic Mania
Accompanying Bodily Disorder,
Suicidal or Not, Not.
Date of this Attack,
Duration,
No. of Attack, 2d or 3d
No. of Admissions, 2d
Age First Attack, about 17.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exd by Dr. Eby, Nov 11/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Rather Sluggish
MEMORY:
Past Events, Probably good
Recent Events, Seems fair -
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Rather dull
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects,
Own Mental State, Poor
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Somewhat dull of Comprehension.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Yes
Exalted,
Depressed, Probably slightly so.
DELUSIONS:
Systematized or ~~Not~~, As money matters &c
Special Subjects,
Transitory or Not,
HALLUCINATIONS: ✓
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
~~Voluble or~~ Reticent, Inclined to be - Answers questions after some hesitation.

Personal and Medical History of Nils Larson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ WEIGHT, ✓ NUTRITION, Quite good.
WOUNDS OR ABNORMALITIES, Probably none
TONGUE, Tremors, Coarse Coatings, Some Promptness Movement, Quite prompt
PUPILS, Equality, Equal Size, very dilated
Response Light, Yes Accommodation, Yes
SIGHT, Probably slight impairment
HEARING, Somewhat impaired
COORDINATION, Arms, Inclined to reel, eyes shut, some inaccuracy Especially with right hand.
Legs, Reeling Eyes Shut, Slight Swaying. -
TREMORS, Hands, Some Tongue, Coarse
Facial Muscles, None

Case No. 3496. Nils Larson. 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 Good
LUNGS, Sounds good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Records kept Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Previous attack ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") Cannot give much family history —
Mother or Mat. Relations, Mother dead —
Father or Pat. Relations, Father living
Brothers or Sisters, 2 brothers living — healthy.

Personal and Medical History of Nils Larson.

HERBERT, PUTLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3496.
Residence, Minneapolis
Date Admission, Oct 4th 1893.
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, John H Steel J of P Hennipin Co.
Sex, Male
Age, 29.
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Laborer.
Degree Education, Very limited
Profession Religion, Lutheran
Habits, Probably good
Nativity, Norway
Physicians Committing, H O Sweetser & W A
Correspondents, Peter Larson 255 Plymouth

No. for Year, 66.
Insane Relatives, None
Cause Exciting, Unknown.
Cause Predisposing,
Form, Chronic Mania
Accompanying Bodily Disorder,
Suicidal or Not, Not.
Date of this Attack,
Duration,
No. of Attack, 2d or 3d
No. of Admissions, 2d
Age First Attack, about 17.
Time of Leaving,

EXAMINATION ON ADMISSION.

Exd by Dr. Eby, Nov 11/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Rather Sluggish
MEMORY:
Past Events, Probably good
Recent Events, Seems fair -
Special Subjects,
PERCEPTIVITY:
Alert or Dull, rather dull
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects,
Own Mental State, Poor
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Somewhat dull of Comprehension.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Yes
Exalted,
Depressed, Probably slightly So.
DELUSIONS:
Systematized or ~~Not~~, as money matters &c
Special Subjects,
Transitory or Not,
HALLUCINATIONS: ✓
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
~~Voluble or~~ Reticent, Inclined to be - answers questions after some hesitation.

Personal and Medical History of Nils Larson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ WEIGHT, ✓ NUTRITION, Quite good.
WOUNDS OR ABNORMALITIES, Probably none
TONGUE, Tremors, Coarse Coatings, Some Promptness Movement, Quite prompt
PUPILS, Equality, Equal Size, Very dilated
Response Light, Yes Accommodation, Yes
SIGHT, Probably slight impairment
HEARING, Somewhat impaired
COORDINATION, Arms, Unique to nose, eyes shut, some inaccuracy especially with right hand.
Legs, Standing Eyes Shut, slight Swaying. -
TREMORS, Hands, Some Tongue, Coarse
Facial Muscles, None General, None noted.
REFLEXES, Patellar, Equal — about 5 or 6. —
Other Reflexes,
ARTICULATION, ~~Hesitating~~, Foreign accent ~~Slurred~~,
FACIAL EXPRESSION, Somewhat dulled
SENSIBILITY, Normal
HEART, Sounds Good
LUNGS, Sounds good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Records kept Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Nervous attack ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") Cannot give much family history —
Mother or Mat. Relations, Mother dead —
Father or Pat. Relations, Father living
Brothers or Sisters, 2 brothers living — healthy.

Personal and Medical History of Nils Larson.

EDSELL, FICKAR & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy sheriff Geo. H. Johnson with the following history. There is no history of consanguinity or heredity. This is not the first attack. was a patient here from Oct 5th 1885 to July 4th 92 (See Vol 6 Poles 89) Disease seems to be increasing. there apparently are rational intervals. He is not disposed to injure others or to filthy or destructive habits. Is not suicidal manifested no peculiarities of temperment previously. It is unknown wether was addicted to intemperance or subject to any severe disease or injury. He was confined as above stated. On personal examination showed incoherence and imbecility. What patient said indicated simply lack of coherence & appreciation of surrounding events. Other facts indicating insanity that he was recommended for a re-commitment by Supt at Rochester. —

Oct 4 On admission was in good physical condition. He was put on B: Pulse 80.
" 5 R 18. Bodily condition, not clean. Oct 5/93. Slept well, last night. Att. Pulse 82. R 17. Works, Daily, in the main kitchen. While on ward, is quiet & well-behaved; has little or nothing to do with or say to his fellow patients. Takes no part in games. He has papers in his pockets & thinks that they are checks of value.
" 6 Oct 6/93. A good & willing worker, in the kitchen. Keeps by himself while on hall. Very quiet and
" 7 well-behaved. Talks but little. Oct 7/93. no change, from day to day. Pulse has been normal. Habits clean.
" 8/9 Oct 8/93. Seems quite contented here. Still works well. Oct 9/93. Was today transferred to Annex.
" 18 Oct 18/93. Apparently continues to eat & sleep well, at night. Clean, tidy & well-behaved. of good personal habits. Is always very quiet. Rarely speaks; Health good. Works willingly & quietly.
" 31 Oct 31/93. Apparently, no change in his condition. Is still working, daily, in the kitchen, which, he seems to think a kind of "home" for him. —

Nov 10 Nov 10/93. A quiet, inoffensive patient. Seldom comes on the ward, as he works, daily, in the main kitchen & goes to bed almost as soon as he is brought over from work. Health appears good.
" 30 Nov 30/93. No material change to note in patients' condition. —
Dec 15 Dec 17/93. Does not change in any respect. Sleeps well at night. Appetite is good. Always quiet & well-behaved. Works daily in the kitchen & lives along quietly & contentedly here. —
" 31 Dec 31/93. No change from last report. Seems quite contented & is an industrious worker in kitchen.
1894 Jany 15 Jan 15/94. No apparent change. Physical health is very good.
Feb 10 Feb 10/94. Lives along quietly & contentedly here. Works daily in the kitchen. Physical condition good.
" 24 Feb 24/94. This patient was committed here under the "Law of 1892" recently declared unconstitutional. He was to day, Taken Out and Returned under a new Warrant from Chouteau County. Feb 25/94. Works daily in kitchen. Seems quite happy & contented. —
Mar 30 March 30/94. No change to note. Habits are clean. Works in kitchen daily. Is quite contented.
Apr 30 April 30/94. No noticeable change in either his physical or mental condition. Does not in fact change any.
May 31 May 31/94. Works daily in main kitchen. At times, seems much depressed. Seldom speaks. —
June 30 June 30/94. No change to note. Quiet & well-behaved; very reticient. Works most faithfully.
July 31 July 31/94. About the same, from month to month. Works faithfully & seems quite contented here.
Aug 31 Sept 30 Oct 31 During this period, there is no change observable. He is perfectly contented here. Works daily and intelligently in the kitchen. Evidently has delusions though he does not express them. Habits clean, Health good.

Personal and Medical History of Nils Larson

1894
Nov 1/30 Dec 31 1894 Jany 31 to Apl 30 During these 3 months, there has been no change noticeable, in either his mental or physical condition. He is uniformly quiet & well-behaved. Seldom speaks, unless spoken to. Works, Daily, in the main kitchen, which he seems to consider a "home" for him. Seems perfectly satisfied & contented here. — During these 3 months, nothing special has occurred. He complained of head-ache & ill-feeling & was in bed Apl 25 - 27 Inst: on 27th was up, on ward, in afternoon — appetite improved. Returned to work on 28th. He has been very quiet & well-behaved; works daily in main kitchen. Is perfectly satisfied & lives along quietly here. Seldom speaks. Habits clean. Health apparently good.
May 1 to July 31 During this quarter, there has been no change, in any way. He lives along quietly & contentedly here; works Daily, in the main kitchen: seldom speaks. Habits clean. Health apparently good. —
Aug 1 Sept Oct 31 During these 3 months, there has been nothing especially to report. He has been quiet: clean & tidy: works daily in main kitchen: seldom speaks: is interested in his work & quite contented.
Nov 4 Dec Jany 31/96 Nov 4/95. Wt 145 pds. Pulse 88. Nov. Dec & to Jany 31/96. Patient keeps in his usual good health. Mentally, here remains about the same, from month to month. Works steadily in kitchen. Is contented.
Feb 1 to April 30 Feb 1/96. Wt 145 pds. Pulse 72. Feb, March & to Apl 30/96. No change, in any way noticeable, during the period. Quiet: well-behaved: working daily, in main kitchen: Eats, sleeps well: habits clean: health apparently good.
May 1/96 to Aug 1/97 Summary Nurses Notes by Dr. Phelps. Patient quiet & well-behaved: works in kitchen: seldom speaks: appears to have a quite intelligent comprehension of things. During Aug 96 was said to have pulse of 40 to 50 but it increased to 68 in November & still later to 92. Aug 31/97 Wt. 145# Oct 31/97 Health good. Is quiet & melancholy in manner; talks but little: Works in Kitchen - Jan 31/99 Still working in Kitchen. No change or happening of importance during period. Cont. by Dr. Wanwood Feb 1 July 31/99 Wt 142 confined to bed: has boil on hand for which he received treatment: condition improved
May 20 June 10 To Jany 31 1900 Works in kitchen. Is demented: (Aug 1-99 - Jan. 31-1900 (Cont. by Dr. Chapple) Wt. 144#. Has been in good physical cond: works in kitchen: habits cleanly: well behaved: my quiet. Feby 1900. Wt 145# BP. 120. Feby no. Vaccinated: result negative. July 31. Health good: habits cleanly: Works in kitchen: very well behaved: Is very demented. Quiet. Augt. Wt 143# Sept 12. Transferred to D3 - - —
July 1900 Aug 1901 Jan 31 No change during period. Is very well behaved: Cleanly: works on ward & in kitchen. Demented & quiet. Health is good. Feby 1901 Wt 143#: May Wt 143#: Augt 1. Wt 143# Nov. Wt 145#
July 1902 Jan 31 Has worked constantly in kitchen. In good health: very quiet & cleanly: no special notes.
July 31 1903 Jany 31 Works regularly in Kitchen: no change noted. Jany 31/03. Works in kitchen: No change, in any way. —

Personal and Medical History of Oscar C. Cole.

BERGET, FISCHER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3499.
Residence, 2915-26 St S. Minneapolis
Date Admission, Oct 6th 1893.
Admitted by, Dr Chilfos Hour, 7 P.M.
How Sent, John H. Steel Jof P Hennepin Co.
Sex, Male
Age, 21.
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Laborer.
Degree Education, Common School
Profession Religion, Lutheran
Habits,
Nativity, U.S.
Physicians Committing, W. C Rochford & R. E. Lowers.
Correspondents, Otto Cole 2915-26th St So Mpls.



No. for Year, 69.
Insane Relatives, None
Cause Exciting, Masturbation
Cause Predisposing,
Form, Pubescent Insanity.
Accompanying Bodily Disorder,
Suicidal or Not, 3 yrs ago attempted to jump from bridge Not now
Date of this Attack, Since about 2 yrs ago
Duration,
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 18 probably.
Time of Leaving, July 12th 94
Time in Hospital, 9m 6d
Result, Imp.

EXAMINATION ON ADMISSION.

Exd by Dr. Ely, Oct 9/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, some sluggish
MEMORY:
Past Events,
Recent Events, } says is good"
Special Subjects,
PERCEPTIVITY:
Alert or Dull, somewhat dull
Correct or Illusive, but Correct
REASONING POWER:
Ordinary Subjects, quite good
Own Mental State, not so good
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
says "he cant relieve himself. When any one is looking at him". and "he wants a separate closet".

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent, Quiet
Exalted,
Depressed, somewhat
DELUSIONS:
Systematized or Not,
Special Subjects, } none noted
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, rather reticent

Personal and Medical History of Oscar Cole

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10 in WEIGHT, 159 lb NUTRITION, Quite good.
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, fine Coatings, quite Heavy Promptness Movement, prompt
PUPILS, Equality, Equal Size, slightly dilated
Response Light, Respond Accommodation, Respond
SIGHT, Good
HEARING, Good
COORDINATION. Arms. Fingers Nose. Eyes Shut, Correct

Case No. 3499. Oscar Cole. Vol. 25.

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, ~~Good~~ ~~Slurred;~~
FACIAL EXPRESSION, Depressed; almost expressionless; color Jaundiced.
SENSIBILITY, normal
HEART, Sounds, Good
LUNGS, Sounds, Good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Kept 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, Mother, well
Father or Pat. Relations, father, well
Brothers or Sisters, sisters, well

Personal and Medical History of Oscar L. Cole.

SEBERT, PUGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3499.
Residence, 2915-26 St So Minneapolis
Date Admission, Oct 6th 1893.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John H. Steel Jof P Hennepin Co.
Sex, Male
Age, 21.
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Laborer.
Degree Education, Common School
Profession Religion, Lutheran
Habits,
Nativity, US.
Physicians Committing, W. C Rockford & S. D. Lo
Correspondents, Otto Cole 2915-26th St So Mpls



No. for Year, 69.
Insane Relatives, None
Cause Exciting, Masturbation
Cause Predisposing,
Form, Pubescent Insanity.
Accompanying Bodily Disorder,
Suicidal or Not, 3 yrs ago attempted to jump from bridge but was
Date of this Attack, Since about 2 yrs ago
Duration,
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack,

EXAMINATION ON ADMISSION.

Exid by Dr. Eby, Oct 9/93. MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events,
Recent Events,
Special Subjects,
"says is good"

PERCEPTIVITY:
Alert or Dull, somewhat dull
Correct or Illusive, but correct

REASONING POWER:
Ordinary Subjects, Quite Good
Own Mental State, not so good
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
says "he cant relieve himself. when any one is looking at him". and "he wants a separate closet".

EMOTIONAL STATE:
Normal, Calm, Calm
Indifferent, and
Exalted,
Depressed, somewhat

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

HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, rather reticent

Personal and Medical History of Oscar Cole

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10 in WEIGHT, 159 lb NUTRITION, Quite good.
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, fine Coatings, quite heavy Promptness Movement, prompt
PUPILS, Equality, Equal Size, slightly dilated
Response Light, Respond Accommodation, Respond
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Finger to nose, Eyes shut, Correct
Legs, Standing, Eyes shut, Stands quite steady
TREMORS, Hands, slight Tongue, some fine.
Facial Muscles, none General, none
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, good ~~Slurred;~~
FACIAL EXPRESSION, Depressed; almost expressionless; color jaundiced.
SENSIBILITY, normal
HEART, sounds, good
LUNGS, sounds, good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, kept 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, mother, well
Father or Pat. Relations, father, well
Brothers or Sisters, sisters, well

Personal and Medical History of Oscar Cole.

LEBERT, VOLAS & CHAMBERS, DAVENPORT, IOWA.

1893

It as brought here by Deputy sheriff Maisch with the following history No consanguinity in family This attack commenced about two years ago and is probably 2d attack as about 3 years ago he attempted to committ suicide by trying to jump from a bridge over the Mississippi Propensity is said not to be now active This is 1st admission to a hospital First symptoms were those melancholic derrangement now manifested by masturbation melancholy and wants to be alone. Has shown no disposition to injure others or to destructive habits. Patient did not previously show any peculiarities of temperment nor was patient a parents addicted to intemperance or has patient had any severe disease or injury Never been restrained or confined has been under treatment by "quacks" with no effect. Patient states to examiners that his mind is seriously affected. Appearance & manner are those of a masturbator.

Oct 6 Ad admission is in appearantly good health. Ht as put on B[w]. Pulse 66. T(r) 99.4. Bodily condition draw; no injuries or peculiarities noted. Oct 7/93. Slept 7 hours last night, and was quiet. AM. Pulse 84 T(r) 99.2. Appetite only medium; no cough noticed; Is stubborn, trying to get out of the door. Talks but little. PM. Pulse 80. T(r) 99.4. No complaints or injuries to note. —

" 8 Oct 8/93. Slept 6 hours, last night; quiet when awake. AM. Pulse 76. T(r) 98.8. Talks but little; wants

" 9 to get away. Oct 9/93. Slept but 4 hours, last night. Was restless out of bed. AM. Pulse 74 T(r) 99.

" 10 PM. Pulse 92. T(r) 98.8. Oct 10/93. Slept 7 hours last night, and was quiet. AM. P74. Oct 11/93. Was very

" 11 restless last night, sleeping but 5 hours. AM. Pulse 76. Appetite good. Bowels regular. Oct 12/93. Slept only

" 12 5 hours last night; was quite restless. AM Pulse 92. Restless by day; walking the hall; talks some; says he is

" 13 afraid of other patients. Oct 13/93. Was quiet, though sleeping only 6 hours, last night. Still walks on

" 21 the hall. Talks some. Appetite good. Pulse about normal. Oct 21/93. During this, the 2nd week of his stay, patient has continued to sleep poorly, at night, 4 to 6 hours only; is quite often also restless. Pulse has been normal; appetite good; bowels regular. He also, now & less restless by day, walking the hall, talks some little with his fellow-patients; answers when addressed; reads some; goes out walking;

" 31 Lately has assisted some with the hall-work. Is in good physical condition. Oct 31/93. Appetite fairly good. Reads & writes some. Talks with his fellow-patients some. Is rather depressed. Physical condition seems good. Goes out walking. Habits are clean.

Nov 1/10 Nov 1/93. Ht 155 pds. Pulse 76. Nov 10/93. Appetite fairly good. Behaves fairly well. Reads some.

" 13 Walks out with the rest, sometimes. Would run away if he could get the chance. Nov 13/93. Was,

" 30 today, transferred to B[1]. Nov 30/93. Is restless, at all times. Goes wandering about the ward, talking to himself & laughing. Has silly ways. Keeps his pockets full of old papers and rubbish. When spoken to, does not care to answer. —

Dec 1/15 Dec 1/93. Wt 158½ pds. Pulse 88. Dec 15/93. Apparently restful, at night. Still has silly ways about him, laughing to himself &c; is more quiet now & will talk when spoken to, and work when asked. Appetite is good; bowels regular. On the whole, has improved some since last report.

" 31 Dec 31/93. Of late, has not seemed to improve any. Still has his "spells" of silly acting & talking to himself. Keeps his pockets full of all sorts of rubbish that he can find. Appetite good. Bowels regular.

Personal and Medical History of Oscar Cole

1894

Jan 2 Jan 2/94. Wt 150 pds. Pulse 80. Patient has lost considerably in flesh during the past month;

" 15 cause is not apparent. Jan 15/94. Patient keeps about the same. Is easily excited; has little to say. Keeps nearly all the time, by himself. Does not take any part in games &c. Does no work. —

" 31 Jan 31/94. Has "spells" of laughing to himself. Easily excited; does not care to talk. Inclined to

Febr be by himself in a room, writing at newspapers &c. Complains, at times, of headache; probably from constipation

" 20 Feb 2/94. Wt 140½ pds. Has been losing steadily & considerably in flesh the past 3 months; has not complained of any serious ill-feeling. Pulse 71. Feb 20/94. Is inclined to be quite contrary, at times, and stubborn. Seldom has anything to say. Has "spells" when he will go about the ward, laughing to himself; will scribble all over the wall with a lead pencil. Picks up rubbish and puts it in his pocket. Sleeps on B[2]; takes his meals on A[2]. Bowels irregular. —

" 24 Feb 24/94. This patient was committed here under the "Act of 1893" recently declared unconstitutional. He was today Taken Out and Returned under "new warrant" from Chatterton.

Mar 3/24 March 3/94. Wt 140½ pds. Pulse 75. March 31/94. Is of a mean disposition; contrary & ugly, at times. Has "spells" of laughing to himself; has silly ways; keeps things of no account in his pockets. Is inclined to write a great deal, but what he does write has no sense or meaning in it. Sleeps on B[2].

Apl 2/30 April 2/94. Wt 143½. Pulse 66. April 30/94. Keeps about the same. Inclined to be troublesome at times, not wanting to go out walking. Has many wrong ideas. Thinks he is John L. Sullivan and says he owns Minneapolis & St Paul. Appetite is good. Physical Condition good.

May 3/18 May 3/94. Wt 148 pds. (Is gaining in flesh, each month). Pulse 92. May 15/94. Has "spells" when

" 18 he acts in a silly manner & laughs to himself. May 18/94. Transferred to A1. today. —

" 31 May 31/94. No material change. Is foolish acting; also keeps his pockets filled with rubbish &c.

June 1/30 June 1/94. Wt 149 pds. Pulse 80. June 30/94. Keeps about the same. Easily excited: does no work.

July 9/11 July 9/94. Wt 149 " " 99 - July 11/94. Patient was visited by his father, today. —

" 12 July 12/94. Has behaved quite well during the month but still has some silly ways & does foolish actions. Has helped some with work, of late; but on the whole, has not changed much for several months. Was taken home by his father, today, on trial.

— Discharged —

Personal and Medical History of Ole Olson Gravdahl.

LIBERTY, FULLAM & CHAMBERS, DAVENPORT, IOWA

Whole No. 3500

Residence, Minneapolis

Date Admission, Oct 7th 1893

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

How Sent, John H Steel J of P Hennepin Co

Sex, Male

Age, 42

Civil Condition, Single

Children,

Age Youngest Child,

Occupation, Laborer

Degree Education, Common School.

Profession Religion, Lutheran

Habits, Probably good.

Nativity, Norway.

Physicians Committing, P.P. O'Brien & W.A. Jones.

Correspondents, Ole Olson (father) Hagen Chippaway Co. or John Olson (bro)

No. for Year, 70

Insane Relatives, Not known

Cause Exciting, Unknown

Cause Predisposing, Previous attack

Form, Acute Mania

Accompanying Bodily Disorder,

Suicidal or Not, threatened

Date of this Attack, about 2 weeks ago

Duration, about 2 weeks

No. of Attack, 2d

No. of Admissions, 1st here

Age First Attack, about 40.

Time of Leaving, Mch. 6" 94

Time in Hospital, 4 ma 29 ds.

Result, Imp.

Crossed from ... 12d-1894 because an exact ... committed

EXAMINATION ON ADMISSION.

Ex by Dr. Phelps, Oct 7/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, rather quick

MEMORY:

Past Events,

Recent Events, } seems fairly Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, } slightly dulled, especially

Own Mental State, } with regard to particular

Special Subjects, } subjects.

GENERAL DESCRIPTIVE REMARKS:

He denies, at present, the delusions attributed to him, but evidently held them at the time he was arrested. In good health. Mental state that of slight exaltation; of considerable mental weakness, with probably, some deluded ideas.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, slightly

Depressed,

DELUSIONS:

Systematized ~~or Not~~, probably

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Shows him to be apparently a

Coherent or Incoherent, } Chronic case; his mental

Voluble or Reticent, } state being probably variable; at

times, better; at times, worse;

Personal and Medical History of Ole Olson Gravdahl

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9½ WEIGHT, 150 lbs (usual 165 lbs) NUTRITION, Seems quite good.

WOUNDS OR ABNORMALITIES, right wrist dislocated

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

PUPILS, Equality, Equal Size, normal

Response Light, Yes. Accommodation,

SIGHT, probably good

HEARING, Good

COORDINATION, Arms, } fairly good, by usual tests. Finger to nose, Eyes shut, fairly well done.

Legs, } Standing, Eyes shut, fairly good.

TREMORS, Hands, very slight Tongue, slight

Facial Muscles, General, none

REFLEXES, Patellar, equal; abnt 1 in 4 Dr. P. Scale.

Other Reflexes,

ARTICULATION, ~~Hesitating~~, Good ~~Slurred~~,

FACIAL EXPRESSION, About normal.

SENSIBILITY,

HEART, Sounds are good

LUNGS, Sounds are good.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Seems to be kept

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, previous attack ni 16½ 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 Ole Olson Gravdahl.

EBERT, FICKLE & CHAMBERS, DAVENPORT, IOWA

1893

Has brought here by a deputy Sheriff, in due form, with the following history No history of heredity or consanguinity This is 2d attack was in St Peter State hospital from April 92 to Nov 92, supposed to have recovered. Symptoms of this attack were first shown about 2 weeks ago when he wrote to a nun for $5000 or her life Disease appears to be increasing Unknown if subject to rational intervals Probably attack has gradually grown worse Derangment now manifested in that he imagines he has lots of money & no money matters Thinks some one has deposited $5000 at Deaconesses Home for him Threatened to kill if he did not get money Has also threatened to committ sucid if he did not obtain money. Has not been filthy or destructive in habits Is a moderate drinker Had an injury of head while working on railroad Has been in confinement at St Peter as stated above Has not been under treatment since discharge from St. Peter. What patient said was incoherant excitable delusions about money matters otherwise is quiet Appearance and manner Excitable nervous & muttering Friends confirm above & give his constant annoyance of hospital nurse and his supposed money

Oct 7 Apparently in good physical condition on admission Has Lues on B.x Bodily Condition Clean. No injuries or peculiarities noted, beyond right wrist dislocated. Oct 8/93. Was restless for 4 hours and
" 8 slightly noisy; slept but 2 hours, last night. Appetite good; no cough noticed. Is quietly behaved. Walk the hall
" 9 some; talks freely & seemingly rationally though he says he was put here for no cause". Oct 9/93. Slept 5 hours, last night; restless 3 hours out of bed for a while. Appetite Continues Good. Reads some. Fairly sociable with his
" 10 fellow patients. Makes no complaints. Oct 10/93. Slept 8 hours, last night, was quiet. Goes out walking Physical
" 11 Condition seems good. Oct 11/93. Was restless for 2 hours or so, but slept 8 hours last night. Quiet & well behaved;
" 12/13 ly day. Habits clean. Oct 12/93. Restless 3 hours; slept 5 hours; last night. Oct 13/93. Passed last night
" 14 similarly to the preceding one. Oct 14/93. Was quiet & restful; sleeping 8 hours last night. Is quiet and
" 17 well behaved in ward & causes no trouble. Oct 17/93. Rest & sleep, during past 3 nights, have been some-
what disturbed, yet he has slept 8 hours, each. Was examined today, in office. Stated he had a previous attack in 1892. His conversation showed him to be a Chronic case, apparently. Mental state variable. Denies the delusions attributed to him but evidently held them at time he was arrested. Mental state that of slight exaltation; there is also considerable mental weakness. Has good health.
" 19 Oct 19/93. Has been slightly noisy & restless for from 2 to 3 hours each of past 2 nights, but has
" 20 slept about 8 hours, each; has been occasionally out of bed, also. Oct 20/93. Quite noisy & restless for
" 21 3 hours but slept 5 hours, last night. Oct 21/93. Rested & slept better last night. Has continued quiet and well behaved by day. Clean in habits & of good personal habits. Was today transferred to B1 ——
" 30 Oct 30/93. Is a good, quiet & well-behaved patient. Is about the same, all the time. Keeps by himself having nothing to do with, or say to his fellow patients. Walks the hall a good deal of the time. Helpful some with ward-work. Goes out walking with the rest.
Nov 1/10 Nov 1/93. Wt 154 lbs. Pulse 71. Nov 10/93. Is quite restless, at times, walking the hall. Quite
" 30 often asks the officials for leave to go home. Nov 30/93. Apparently rests & sleeps well, at night. Is quiet & well-behaved by day. Inclined to be alone. Appetite fair. Bowels regular. Habits clean.

Personal and Medical History of Ole Olson Gravdahl.

1893

Dec Dec 7/93. Wt 151½ lbs. (Has been losing in flesh gradually, since admission). Pulse 80. —
" 15 Dec 15/93. Apparently restful, at night. Appetite fair; bowels regular. Is very restless, at times, walking the floor, and talking loudly, saying "that the people of Minneapolis will have to pay big money for keeping him here"; says "it was a job that was put up on him". Somewhat irritable & inclined to be ugly, at times. Has a great desire to keep his coat off while in the ward, and to lie about on the benches. Is a good swelling waiter, in the hall.
" 27 Dec 27/93. Has been very restless all day; walking the hall; talking to himself and acting ugly.
" 31 Is evidently worried at his being kept here; is constantly teasing to go home. Dec 31/93. Is very discontented; never pleasant; quite ugly, at times, and contrary. Appetite poor.

1894

Jany 7 Jan 7/94. Wt 150 lbs. Pulse 80. Jan 15/94. Restless, at all times; never in good humor; is always complaining about being kept here so long. Walks the floor a great deal. Uses profane language quite often. Inclined to lie about some on the benches, & sleeps in the day time. Works some in the ward. Appetite good. Bowels regular. Continually teasing to go home.
" 31 Jan 31/94. Apparently sleeps well, at night. Conduct & behavior, by day, does not change any-
the is easily excited; very suspicious; discontented; even ugly at times. Lounges about on the benches; careless about his dress. Very anxious to go home. Physical health good. —

Feb 7/28 Feb 8/94. Wt 148 lbs. Pulse 95. Feb 28/94. Is still very restless, by day; walking the floor,
most of the time. Has a spell when he will take off his coat and throw it on the floor, and talking quite rough, at the same time. Inclined to be by himself. —

Mar 3 Mar 3/94. Wt 147 lbs. Pulse 80. March 6/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. He was to day sent home, along with some others from Hennepin County. —

Crossed off the record; was illegally committed.

Personal and Medical History of Terrence Gallegher

LESLEY, FULLER & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3501
Residence, St Paul.
Date Admission, Oct 7th 1893.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John B Oliver J of P. Ramsey Co
Sex, Male
Age, 81
Civil Condition, Widowed
Children, Two
Age Youngest Child,
Occupation, Farmer.
Degree Education, Can read & write.
Profession Religion, Catholic
Habits, Probably fairly good.
Nativity, Ireland
Physicians Committing, Jas C Markoe & C J Wolaway
Correspondents, Jas Devitt, Mound st cor of Clermount St. St Paul.

No. for Year, 71.
Insane Relatives, Not known
Cause Exciting, Senility
Cause Predisposing,
Form, Senile Dementia
Accompanying Bodily Disorder,
Suicidal or Not, Not
Date of this Attack, Some two years ago
Duration, 2 years
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, About 79.
Time of Leaving, 15th January 1894
Time in Hospital, 3 mos - 8 days
Result, Died; Chr in Senile Dementia.

EXAMINATION ON ADMISSION.

Exd by Dr Ely, (about) Oct 13/93.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Recent Events, Special Subjects, } Bad

PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,

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

GENERAL DESCRIPTIVE REMARKS:
While under examination, would fall asleep. Repeat some responses which should judge were from some Church Ritual. Was continually talking on some religious subject. Said "he saw a corpse move"

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

DELUSIONS:
Systematized or Not, Mreligion & persecution.
Special Subjects,
Transitory or Not,

HALLUCINATIONS: Sight &c.

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, More or less incoherent
Voluble or Reticent, Voluble

Personal and Medical History of Terrence Gallegher

MEMORANDUM.

Mr. James Gallagher
Assumption
Carver Co.
Minn.
In care of John Colbert.

Oct 27/93 (Mrs friend)

ISSION.—(Continued.)

FICS.

NUTRITION, Fair

Promptness Movement, prompt
dilated

on,

icoordination.
s markedly.
yes - fine -
General, yes - quite marked.

REFLEXES, Patellar, unequal - At 5. Lt 7 or 8.
Other Reflexes,
ARTICULATION, Hesitating, Slurred, and some accent
FACIAL EXPRESSION, Fair
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Record kept
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 Te

SEIBERT, FICKAS & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3501
Residence, St Paul.
Date Admission, Oct 7th 1893.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John D Oliver Jof P. Ramsey
Sex, Male
Age, 81
Civil Condition, Widowed
Children, Two
Age Youngest Child,
Occupation, Farmer.
Degree Education, Can read and write.
Profession Religion, Catholic
Habits, Probably fairly good.
Nativity, Ireland
Physicians Committing, Jas C Markoe and C J Woolworth
Correspondents, Jas Devitt, Mound st cor of Clermont St. St Paul.

MEMORANDUM.

No. of
No. of Admissions,
Age First Attack, About 79.
Time of Leaving, 15th January 1894
Time in Hospital, 3 Mos - 8 Days.
Result, Died; Chr in Senile Dementia.

EXAMINATION ON ADMISSION.

Exd by Dr Ely, about Oct 13/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, somewhat confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Recent Events, Special Subjects, } Bad
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,
REASONING POWER:
Ordinary Subjects, Own Mental State, Special Subjects, } Poor
GENERAL DESCRIPTIVE REMARKS:
While under examination, would fall asleep. Repeat some responses which should judge were from some Church Ritual. Was continually talking on some religious subject. Said "he saw a corpse move"

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, Mreligious & persecution.
Special Subjects,
Transitory or Not,
HALLUCINATIONS: Sight &c
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, more or less incoherent
Voluble or Reticent, Voluble

Personal and Medical History of Terrence Gallegher

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 3½ WEIGHT, 129 lbs. NUTRITION, Fair
WOUNDS OR ABNORMALITIES, none noted
TONGUE, Tremors, fine Coatings, slight Promptness Movement, prompt
PUPILS, Equality, Equal Size, dilated
Response Light, Accommodation,
SIGHT, Impaired
HEARING, Impaired
COORDINATION, Arms, Finger to nose, Eyes shut, some incoordination
Legs, Standing, Eyes shut, sways markedly.
TREMORS, Hands, yes Tongue, yes - fine -
Facial Muscles, yes General, yes - quite marked.
REFLEXES, Patellar, unequal - Rt 5. Lt 7 or 8.
Other Reflexes,
ARTICULATION, Hesitating, Slurred, and some accent
FACIAL EXPRESSION, Fair
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Record kept 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 Terrence Gallegher

BARRETT, PICKLAN & GUMBERG, DAVENPORT, IOWA.

Has brought here by Deputy sheriff He was with the following history Not known if there is any consanguinity or heredity in history This is first attack has been childish for last two years and is becoming more so. Has no rational intervals Derangment now shown in that patient is wakeful at night, wanders about, is quarrelsome & imagines that he is accused of certain crimes, and patient has various delusions. Has shown a disposition to injure others No filthy or destructive habits. Not known is he previously showed any peculiarities of temperament. Not subject to any severe disease or head injury Supposed cause Senility Only treatment thus occasional use of hypnotics no marked effect. On personal examination find nothing but his apparent age Patient said that a crowd came to see him and pulled him out of bed, is very talkative upon imaginary matters Manner excited One of the sisters says that on several occasions has wandered away from home & when returned by police said had just returned from California & had been walking all night.

Oct 7 Is in quite good physical health for a man of his age. W as put on Ct. Pulse 74. R 20. Bodily Condition (seen at bath) is quite good. Right ear is darkly discolored and there is a cut
" 8 behind the left ear. He has no rupture or other peculiarity. Limbs are weak & shaky. Oct 8/93. Slept fairly
well (7 hours) last night. AM Pulse 78, irregular; R. 26. Appetite good; but bowels are constipated.
two coughs noticed. Is well behaved today, but restless & nervous. Has delusions. Imagines he is in a R.R
" 9 car, or at home, feeding horses &c. No other injuries or marks but those above noted. Oct 9/93. Apparently,
rested & slept well, last night. AM Pulse 72. R 20. Is well-behaved, but quite easily excited & exceedingly
restless at night. Must stay in bed. Leaves the impression that he is at home, working. Appetite fairly
" 10 good. Bowels slightly constipated. No cough noted. Oct 10/93. Slept 7 hours last night. AM. Pulse 90. R 26.
Patient is getting very troublesome; interrupting attendants at work; is difficult to keep quiet. Excited and
" 11 anxious to "away home". Appetite fairly good; bowels still costive. Oct 11/93. Slept but 6 hours; was
very restless the remainder of night. AM. Pulse 72. irregular; R 22. Is still in an excited state. -
" 12 Appetite fairly good; bowels becoming regular (had passage yesterday). Oct 12/93. Slept 6 hours last
night, but was again restless & disturbed. AM. Pulse 78. R 22. Is today, a little more quiet, but still
" 13 restless. Mind wanders on all sorts of subjects. Oct 13/93. Patient slept 7 hours last night; noisy
the remainder of the time. Is a little quieter by day. Appetite good; bowels regular no cough noticed.
" 14 Pulse (this Am), 64. R. 22. Oct 14/93. Slept 7 hours, last night; quiet when awake. Exceedingly restless
" 15 today. Is cleanly & well-behaved. Oct 15/93. Last night, slept but 6 hours. Today, is very uneasy &
restless, wandering about the ward & talking absurdly. Has difficulty in making water & when he
" 16 does so, it pains him. Bowels now regular than they was. Oct 16/93. Slept poorly, only 5 hours,
last night. Cot also was much disturbed. Still continues in the same restless condition. Bowels
" 17 again inclined to be constipated. Habits cleanly. Oct 17/93. Slept better (8 hours) last night. Still
" 18 has pain, when making his water. Very restless & excited, by day. Oct 18/93 Slept well, last night.
" 21 Oct 21/93. Patient continues now to rest & sleep well, at night. By day, is nervous, restless & uneasy;
Constantly walking through & about ward. Appetite fair. Bowels are becoming more nearly normal.
" 24 Habits clean. He is demented to a quite extreme degree. Oct 24/93. no change to note. Talks about

Personal and Medical History of Terrence Gallagher

1893
Oct 24 all conceivable subjects, which begets all jumbled up. Is cleanly in his habits, though he occasionally
Contd wets his bed. Oct 26/93. Patient had friends to see him today. Appetite is poor. He seems to be failing.
" 26
" 31 Wants to keep, inward, most of the time. Oct 31/93. Appetite still poor. Bowels normal. No cough noticed.
Habits are becoming somewhat dirty. Seems to continue to fail. Talks most of the time, but very foolishly
and is childish. Is demented as one of the senile cases which fail similarly to Paretics.

Nov 2/93. Wt 128½ lbs. (Harlot very much in flesh since coming). Pulse 84. Nov 30/93. His
Nov 2/30 appetite is poor; but bowels are regular. Is well-behaved, though he is continually moving about
the ward; it seems impossible to keep him still. Talks freely but is very foolish & childish.
Habits are dirty. Seems growing quite weak.

Dec 2/93. Wt 120½ lbs (is still losing in weight). Pulse 90. Albert Kroger (a fellow patient)
Dec 2 struck him this morning, in the eye with his fist, cutting & bruising it quite badly. -
" 10 Dec 10/93. Patient is becoming, of late, very troublesome inward. Seems to be failing.
" 15 Dec 15/93. Appetite good; bowels regular. Is badly behaved. Habits dirty. Patient
" 22 seems, daily, to be growing weaker. Dec 22/93. Patient fell of a seat today, and cut
" 30 his ear quite badly. Dec 30/93. Was pushed or knocked down against the gate, today, by another
patient, (Scott of 1st), and bruised about the face; there was also caused a lameness in one
of his legs, so that he was unable to walk alone.

1894
Jan 1 Jan 1/94. Wt 111 pounds (in underclothes) - This shows considerable loss in weight, in past month.
" 5 Pulse 100. Jan 5/94. Patient is failing fast. Is now unable to walk alone. Eats but little.
" 6 Jan 6/94. Had to be fed, by spoon, at supper time. Jan 7/94. Seems much worse; refused
" 9 food, this noon. Was put to bed in afternoon. Jan 9/94. Eats but little; has to be fed.
" 12 Is failing quite rapidly. Jan 12/94. Keeps his bed. Eats nothing. Failing rapidly. -
" 13 Jan 13/94. Takes nothing but urine, now. Continues to fail. Visited this Am, by the Priest.
" 14 Jan 14/94. Refused his medicine. Eats nothing. Failing fast. Seems unconscious, now.
" 15 Jan 15/94. Patient continued to fail rapidly and died at 3:30 this morning.

Friends were notified by telegram of his death; they had remains removed.

- Died -

Personal and Medical History of Jas. B. Smith.

ROBERT, POLLAK & CHAMBERS, DAVENPORT, IOWA

Whole No. 3504.

Residence, St Charles

Date Admission, Oct 10th 1893.

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

How Sent, H.L Buck J of P. Winona Co.

Sex, Male

Age, 63

Civil Condition, Married

Children, 6

Age Youngest Child,

Occupation, Farmer

Degree Education, Common School.

Profession Religion, Not a church member.

Habits, Not intemperate

Nativity, Massachusetts

Physicians Committing, Thos. A. Price & C.L. Gales

Correspondents, H. C. Smith St Charles, Minn
(See visitors' register Nov 18/93)

No. for Year, 74.

Insane Relatives, Fathers cousin

Cause Exciting, Sunstroke (supposed)

Cause Predisposing, Previous attack

Form, Acute Melancholia

Accompanying Bodily Disorder,

Suicidal or Not,

Date of this Attack, Sometime in Aug '93

Duration,

No. of Attack, 2d

No. of Admissions, 2d

Age First Attack, 56 (about)

Time of Leaving, 28th February 1894.

Time in Hospital, 4 months and 18 days

Result, Died; exhaustion of melancholia

EXAMINATION ON ADMISSION.

Exd by Dr Ely Oct 30/93 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Active

MEMORY:

Past Events, Quite Good

Recent Events, says "it is quite poor"

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects,

Own Mental State, Seems good

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

says "he feels badly"; "not so well as when he came in" "Constantly fears he will do something wicked"

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes; quite so.

DELUSIONS:

Systematized or Not, "fear of doing wrong"

Special Subjects,

Transitory or Not,

HALLUCINATIONS: /

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, fairly free in answering questions

Personal and Medical History of James B. Smith

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, / WEIGHT, (usual) 135 #140 pds NUTRITION, Thin; anaemic

WOUNDS OR ABNORMALITIES, /

TONGUE, Tremors, fine Coatings, slight Promptness Movement, quite prompt

PUPILS, Equality, Equal Size, slightly dilated

Response Light, Yes Accommodation, Yes

SIGHT, Some slight impairment

HEARING, Quite good

COORDINATION, Arms, Quite good, on usual tests. Finger to nose, Eyes shut, Quite accurate

Legs, & prompt. Standing, Eyes shut. Quite steady.

TREMORS, Hands, Slight Tongue, fine

Facial Muscles, none General, none

REFLEXES, Patellar, equal — about 6 —

Other Reflexes,

ARTICULATION, ~~Hesitating;~~ quite good ~~Slurred;~~

FACIAL EXPRESSION, Pinched & drawn

SENSIBILITY, Normal

HEART, Rapid, & sounds not clear.

LUNGS, Sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Probably long ONSET GRADUAL OR SUDDEN, Here about 7 years ago

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

Mother or Mat. Relations, Mother died when patient was 9 months old.

Father or Pat. Relations, Father's Cousin was insane; no nearer relatives.

Brothers or Sisters, /

HERSEY, PUGAN & CHAMBERS, DAVENPORT, IOWA.

1893

Has brought here by sheriff Co. A. Leach attended by Brother with the following history. No history of consanguinity but fathers cousin is states to have been insane. This is 2d attack. Patient having been in this Hospital in 1886 for 6 mos (see Vol 6 Folio 175) & was discharged. This attack was first manifested in August of this year by mental depression over financial matters. disease seems to be increasing but has rational periods at irregular intervals. Delusions now shown on financial affairs & a dread of committing rash act. burning buildings injury to self and to others. not suicidal but fears he may do it requested that morphine fairs given etc be kept out of his way. no filthy or destructive habits. Previously to attack patient was subject to fits of passion. Patients father was intemperate but patient is not. Has had no severe disease or injury. not been confined. Disease is supposed to result from a partial sunstroke. Has not been under medical treatment. On personal examination shows mental depression appearance and manner quiet and depressed. Wife states that his mental condition now is the same as eight years ago which was soon followed by a severe form of insanity.

Oct 10 An admission apparently a good physical condition. Was put on Rx. Pulse 78. Tr 99.

" 11 Oct 11/93. Slept poorly, last night. AM. Pulse 76. Tr 98. Appetite good. Bowels screw free. Has some cough.

" 12 Is quiet & well behaved. Walks about hall. Does not talk much, no delusions noted. Oct 12/93. Slept but 4 hours last night. AM. Pulse 76. Tr 98.6. Appetite medium; talks but little. PM. Pulse 74. Tr 98.8.

" 13 Oct 13/93. Slept some better (6 hours) last night. AM. Pulse 78. Tr 99. Walks about hall. Talks some. PM. P88 T 99.

" 14 Oct 14/93. Last night, rested quietly & slept 7 hours. AM. Pulse 80. Talks only when addressed. Appetite fair. Is on medicine. Has a slightly depressed manner. Says "has depression & fear that is going off again". Oct 15/93. Slept 6 hours, last night; was quiet. AM. Pulse 96. Oct 16/93. Slept quite well,

" 15/16 8 hours, last night. AM. Pulse 94. Talks some. Visited by friends today. Oct 17/93. Again rested and

" 17 slept well, last night. AM. Pulse 100. Is started on medicine. Appetite now good. Is quiet & well-behaved.

" 18 Oct 18/93. Slept 6 hours last night; was quiet when awake. AM. Pulse 104. Bowels constipated. given salts. Appetite is good. Is restless & nervous today. Says "he is going to be worse & wants Attendants to take good care of him". Oct 19/93. Very restless, sleeping but 2 hours, last night. AM. Pulse 108. Is quiet today.

" 19 Has some cough. Appetite fairly good. Oct 20/93. Quiet last night; slept 6 hours. Is still taking medicine.

" 20 Appetite good. Pulse 100. Well-behaved. Goes walking. Talks freely. Oct 21/93. AM. Pulse 96. Oct 22/93 AM

" 21/22 Pulse 98. Oct 23/93. Has rested & slept 8 hours, as each of past 2 nights. Continues quiet & well-behaved;

" 23 walks about ward. Talks quite freely. Still troubled with some cough. Oct 24/93. Restless for 2 hours, sleeping

" 24 but 6 hours, last night. AM. Pulse 88. Very quiet. Talks quite freely & sensibly. Appetite keeps good.

" 25 Oct 25/93. Slept better (8 hours) last night. Patient has the idea that seminal emissions are the cause of his trouble & broods over it. Is rather more despondent than at time of his coming.

" 25/26 Oct 26/93. Slept 7 hours last night. Was quiet, when awake. Oct 31/93. Appetite good. Talks freely & sensibly.

" 27/31 Makes no complaints. Is cheerful. Is on medicine. Is hypochondriac & quite melancholy. Still thinks that seminal emissions are the cause of all the trouble.

Nov 1/2 Nov 1/93. AM 132 P 95. Pulse 78. Nov 4/93. Visited by a friend, today. Nov 7/93. Was, today, visited by his

1893

Dec 15 18 Restless — Appetite poor — Sleep — AM 118 — 104

" 19 Appetite poor — Expelled [illegible] spreading — AM 102 — 101 — PM 108 — 102 — No but little.

" to other side of face Talks Seclusion Sleep — AM 118 — 101 — PM 106 — 101 — eking, ofate.

" 20 — AM 116 — 101 — 93. Has

" 21 Eats now — Seclusion — AM 112 — 102 — PM 108 — 101 — given medicine.

" 22 Eats fair very little — " 15 " " — 106 — 101 — PM 102 — 102 — tless. Left

" 23 " " " " " 15 " AM 104 — 102 — PM 106 — 101 — te is poor.

" 24 " " " " " 15 " AM 108 — 102 — PM 104 — 101 — Has been

" 26 Very restless — Drinks — Walks — AM 102 — 101 — " 104 — 100 — seclusion.

" 27 Restless — Visited by friend — AM — e face-

" 28 Does not take much nourishment except milk & Stimulants AM 98 — 100 — " 96 — 100 — rects by on.

" " " " " " " " " " 96 — 99 — " 98 — 100 — and

" 29 " " " " " " " " " 100 — 99 — 104 — 100 — daily.

" 30 Drinks Water milk — ising

— unplaining

— Says he

— very poor —

— ery restless —

— otipated —

— bowels active.

— ge, he fainted

— 94. Complain

— ited by fear,

— ling rapidly.

— tached Kidneys).

— ains were

1893

medical treatment. On personal examination shows mental depression appearance and manner quiet and depressed. Wife states that his mental condition now is the same as eight years ago which was soon followed by a severe form of insanity.

Oct 10th An admission apparently a good physical condition Was put on Br. Pulse 78. Tr 99.

" 11 Oct 11/93. Slept poorly, last night. AM. Pulse 76. Tr 98. Appetite good. Bowels seem free. Has some cough.

" 12 Is quiet well behaved. Walks about hall. Does not talk much, no delusions noted. Oct 12/93. Slept last 4 hours last night. AM. Pulse 76. Tr 98.6. Appetite medium; talks but little. PM. Pulse 78. Tr 98.8.

" 13 Oct 13/93. Slept some better (6 hours) last night. AM. Pulse 78. Tr 99. Walks about hall. Talks some. PM. P88 T 99

" 14 Oct 14/93. Last night rested quietly & slept 7 hours. AM. Pulse 80. Talks only when addressed. Appetite fair. Is on medicine. Has a slightly depressed manner. Says "has depression & fear that is going off again". Oct 15/93. Slept 6 hours, last night; was quiet. AM. Pulse 96. Oct 16/93. Slept quite well,

" 15/16 8 hours, last night. AM. Pulse 94. Talks some. Visited by friends today. Oct 17/93. Again rested and

" 17 slept well, last night. AM. Pulse 100. Is tried on medicine. Appetite now good. Is quiet & well-behaved.

" 18 Oct 18/93. Slept 6 hours last night; was quiet when awake. AM. Pulse 104. Bowels constipated. given salts. Appetite is good. Is restless & nervous today. Says "he is going to be worse & wants Attendants to take good care of him". Oct 19/93. Very restless, sleeping but 4 hours, last night. AM. Pulse 104. Is quiet today

" 20 Has some cough. Appetite fairly good. Oct 20/93. Quiet last night; slept 6 hours. Is still taking medicine.

" 21/22 Appetite good. Pulse 100. Well-behaved. Goes walking. Talks freely. Oct 23/93. AM. Pulse 96. Oct 24/93 AM

" 23 Pulse 98. Oct 25/93. Has rested & slept 8 hours, as each of last 2 nights. Continues quiet & well-behaved;

" 24 walks about ward. Talks quite freely. Still troubled with some cough. Oct 26/93. Restless for 2 hours, sleeping but 6 hours, last night. AM. Pulse 88. Very quiet. Talks quite freely & sensibly. Appetite keeps good.

" 25 Oct 25/93. Slept better (8 hours) last night. Patient has the idea that seminal emissions are the cause of his trouble & broods over it. Is rather more despondent than at time of his coming.

" 26/27 Oct 26/93. Slept 8 hours last night. Was quiet, when awake. Oct 31/93. Appetite good. Talks freely & sensibly

Makes no complaints. Coughs some. Is on medicine. Is hypochondriac & quite melancholy. Still thinks that seminal emissions are the cause of all the trouble.

Nov 1/2 Nov 1/93. T 98 132 p 95. Pulse 78. Nov 4/93. Visited by a friend, today. Nov 7/93. Was, today, visited by his

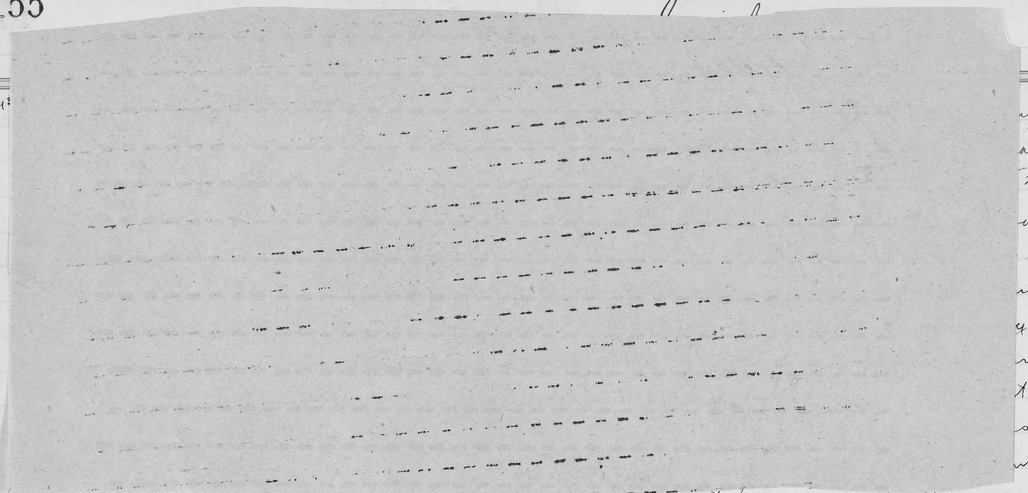
1893

25/153/3502

DETAILED HISTORY OF SICKNESS OF MR. Jas. B. Smith.
DIAGNOSIS.

1894 C. 2

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
Feby 27		5		120		40		101.6	Visited by Wife
28	7		126				5 a.m.		Rapidly failing. Hands and feet cold. Breathing hard and labored.
									Visited by daughter.
							11.45 a.m.		Died



is not. Has had no severe disease or injury. not been confined. Disease is supposed to result from a partial sunstroke. Has not been under medical treatment. On personal examination shows mental depression appearance and manner quiet and depressed. Wife states that his mental condition now is the same as eight years ago which was soon followed by a severe form of insanity.
Oct 10th An admission apparently in good physical condition. Was put on Br. Pulse 78. Te 99.
" 11 Oct 11/93. Slept poorly, last night. AM. Pulse 76. Te 98. Appetite good. Bowels seem free. Has some cough.
" 12 Is quiet & well-behaved. Walks about hall. Does not talk much; no delusions noted. Oct 12/93. Slept but
" 13 4 hours last night. AM. Pulse 76. Te 98.6. Appetite medium; talks but little. PM. Pulse 78. Te 98.8.
" 13 Oct 13/93. Slept some better (6 hours) last night. AM. Pulse 78. Te 99. Walks about hall. Talks some. PM. P 88 T 99.
" 14 Oct 14/93. Last night, rested quietly & slept 7 hours. AM. Pulse 80. Talks only when addressed. Appetite fair.
Is on medicine. Has a slightly depressed manner. Says "has depression & fear that is going off again". Oct 15/93. Slept 6 hours, last night; was quiet. AM. Pulse 96. Oct 16/93. Slept quite well,
" 15/16 8 hours, last night. AM. Pulse 96. Talks some. Visited by friends today. Oct 17/93. Again rested and
" 17 slept well, last night. AM. Pulse 100. Is still on medicine. Appetite now good. Is quiet & well-behaved.
" 18 Oct 18/93. Slept 6 hours last night; was quiet when awake. AM. Pulse 104. Bowels constipated: given salts. Appetite is good. Is restless & nervous today. Says "he is going to be worse & wants Attendants
" 19 to take good care of him". Oct 19/93. Very restless, sleeping but 4 hours, last night. AM. Pulse 108. Is quiet today.
" 20 Has some cough. Appetite fairly good. Oct 20/93. Quiet last night; slept 6 hours. Is still taking medicine.
" 21/22 Appetite good. Pulse 100. Well-behaved. Goes walking. Talks freely. Oct 21/93. AM. Pulse 96. Oct 22/93 AM
" 23 Pulse 98. Oct 23/93. Has rested & slept 8 hours, a each of past 2 nights. Continues quiet & well-behaved;
" 24 walks about ward. Talks quite freely. Still troubled with some cough. Oct 24/93. Restless for 2 hours, sleeping
but 6 hours, last night. AM. Pulse 88. Very quiet. Talks quite freely & sensibly. Appetite keeps good.
" 25 Oct 25/93. Slept better (8 hours) last night. Patient has the idea that seminal emissions are the
" 26 cause of his trouble & broods over it. Is rather more despondent than at time of his coming.
" 27/31 Oct 26/93. Slept 2 hours last night. Was quiet, when awake. Oct 31/93. Appetite good. Talks freely & sensibly
Makes no complaints. Coughs some. Is on medicine. Is hypochondriac & quite melancholy. Still thinks that seminal emissions are the cause of all the trouble.
Nov 1/7 Nov 1/93. T 99 2/5 P 95. Pulse 78. Nov 4/93. Visited by a friend, today. Nov 7/93. Was, today, visited by his

1893 Nov 25 1893 Dec 30

DETAILED HISTORY OF SICKNESS OF MR. Jas. B. Smith.
DIAGNOSIS.

1894

DATE	HOUR	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Jany 31	5		72					Came on ward from B.L. Sick.
Feb 1	7	5	72	18				
2	7	5	84	24				Appetite very poor. Pus discharging from left. Coughs some and raises pt of sputum. Weight 90 lbs.
3	7	5	86	26				
4								
5	7	5	80	24				Eats but little - very restless & complains of stomach trouble
6	7	5	80	26				Gave enema of soap suds
7	7	5	24	90				Bowels costive
8		5		106				Gave enema of soapsuds
9	7	5	84	58				
10	7	5	24	86				Bowels costive
11	7	5	76	76				Says at times he has chills. Appetite very poor. Bowels costive each rule.
12	7	5	80	62				
13	7		80	88				Gave an enema of soap suds. Bowels moved but little. Is getting to have a passing appetite
14	7	5	96	70				
15	7	5	92	70				
16	7	5	84	106				Gave enema of soap suds. Bowels moved but little appetite. quite. Passes urine in bed.
17	7	5	88	86				
18	7	5	86	54				
19	7	5	66	82				3.30 P.M. Gave enema. Bowels moved a little.
20	7	5	78	120	27		100.6	Complains of being dazed at times. Pain of stomach and bowels bothering him.
21	7	5	72	108				
22	7	5	88	104	30		101.4	Gave enema. Bowels moved a little
23	7	5	74	112	36		101	
24	7	5	104	120	36		101.6	
25		5		120	36		101.4	Visited by son.
26	7	5	104	120				" " "

Personal and Medical History of James. B. Smith

Personal and Medical History of James. B. Smith

1893

Nov 17/20 wife + daughter. Nov 18/93. Visited by a friend, today. Nov 30/93. Appetite medium. Talks but little. Is much depressed. Thinks he is getting worse all the time. Is deluded. Does not go out walking, of late.
Dec 4/93. Ht 131 pds. Pulse 98. Dec 5/93. "Thinks there is poison in his medicine". Dec 15/93. Was restless for 8 hours last night; slept none at all. AM. Complains of pains in stomach; given medicine;
" 16 bowels move freely. Dec 16/93. Bowels move at short intervals. Patient is extremely restless. Left
" 17 side of face is red + inflamed. AM. Pulse 120. PM. Pulse 116. T 103. Dec 17/93. AM. Appetite is poor.
Pulse 108. T 101.8. Erysipelas has set in. Inscission 15 hours. PM. Pulse 112. T 103.4. Has been
" 18 restless + out of bed nearly all the time. Dec 18/93. AM. Pulse 116. T 104. Restless. Still in delusion.
" 19 Dec 19/93. AM. Pulse 102. T 101.6. Eats but very little. Erysipelas spreading to the side of the face.
" 30 Dec 30/93. See attached Nurse's record of pulse + temperature during this attack. Today visited by son.

1894
Jan 2 Jan 2/94. Has visited by another son, today. Sup + about, today, but is quite weak and
" 3 Emaciated. Ht 112 pounds. (in underclothing). Jan 3/94. Visited by relatives, today. Sup daily.
" 15 Jan 15/94. Patient is still quite weak, but has remained up daily. Was wet, in passing
this morning. Eats but little. Is on extra diet. Also takes medicine. Is always complaining
" 20 in his usual way. Jan 20/94. Probably losing in weight. Eats very poorly. Is deluded. Says he
" 27/31 is "full". Jan 27/94. Visited by son, today. Jan 31/94. Transferred to C2 ("the Sick Ward").
Feb 2 Feb 2/94. Ht 90 pds (in underclothing). Has lost very markedly in flesh. Appetite is very poor.
" 5 Passes his urine in bed. Coughs some + raises phlegm. Feb 5/94. Eats but little. Is very restless.
" 8 Confined to his bed, daily. Complains of stomach troubling him. Feb 8/94. Bowels badly constipated.
" 11 Enemata frequently given. Feb 11/94. Says, "at times, he has chills"; appetite very poor; bowels costive.
" 13 Feb 13/94. Enema of soapsuds given; Bowels moved but little. Retaining + have passage, he fainted.
" 10/20 Feb 16/94. Appetite quite good now. Still passes urine in bed. Bowels constipated. Feb 20/94. Complains
" 26 of being cold, at times. Also of stomach and bowels bothering him. Feb 26/94. Visited by son,
" 27/28 yesterday + again today. Feb 27/94. Visited, today, by wife. Feb 28/94. Patient is failing rapidly.
Hands + feet are cold; breathing hard + labored. Visited by daughter, today. (See attached Records).

Continued to sink rapidly + died at 11.45. A.M. Deceased was removed by relatives.

— Died —

Nov 1/7 Nov 1/93. Ht 132 pds. Pulse 78. Nov 4/93. Visited by a friend, today. Nov 7/93. Was, today, visited by his

Seminal emissions are the cause of all the trouble.

Personal and Medical History of Chas. H. Galligan

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA


3508



Whole No. 3508.
Residence, 159 Congress St. W
Date Admission, 10th October 1893
Admitted by, Dr. Rheese — Hour, 7 PM.
How Sent, Jno. B. Olivier, Jof P. Ramsey County
Sex, Male
Age, 33
Civil Condition, Married
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, Common School
Profession Religion, R. Catholic
Habits, not intemperate
Nativity, Mass. (Father, Ireland; mother, Mass.)
Physicians Committing, Geo. J. Hawley & D.C. Jones
Correspondents, address of friend 159 Congress St
No family Physician

No. for Year, 78
Insane Relatives, None
Cause Exciting, Unknown
Cause Predisposing, Previous attack
Form, Chronic Mania
Accompanying Bodily Disorder, None Stated
Suicidal or Not, Not
Date of this Attack, 2 3/4 years ago.
Duration, 2 3/4 years.
No. of Attack, 2nd (one 3 years ago)
No. of Admissions, 1st (Thus)
Age First Attack, about 30.
Time of Leaving, Apr. 26 1900
Time in Hospital,
Result, Transferred to Hastings

EXAMINATION ON ADMISSION.

Exd by Dr. Ely, Oct 30/93 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Fairly clear
Quick or Sluggish, Slightly sluggish

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

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

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

GENERAL DESCRIPTIVE REMARKS:
Complains of "noises in head", Constantly for a long time. Never liked to complain, though he knew himself to be sick, tho' not severely

EMOTIONAL STATE:
Normal, Calm, Normal (about) though
Indifferent,
Exalted,
Depressed, Slightly

DELUSIONS:
Systematized or Not, None noted
Special Subjects,
Transitory or Not,

HALLUCINATIONS: "of hearing"

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, fairly free in answering questions.

Personal and Medical History of Chas. H. Galligan

ADMISSION.—(Continued.)

ERISTICS.

…ght 165 lbs NUTRITION, quite fair.

…ht Promptness Movement, quite prompt; deviates to rt

…Size, slightly dilated

…modation, yes

…read, eyes shut, hand slight inaccuracy.

…steady.

TREMORS, Hands, Considerable …ble

Chas. H. Galligan.

Vol. 25.

Case No. 3508

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

…g.

SENSIBILITY, normal
HEART, Sounds not very distinct, but no murmurs.
LUNGS, Sounds are normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Quite long ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living — claims healthy
Father or Pat. Relations, Father living — claims healthy
Brothers or Sisters, None of brothers or sisters ever severely sick, or in hospital —

Personal and Medical History of Chas. H. Galligan

EBBERT, PICKLIN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3508

Residence, 159 Congress St W

Date Admission, 10th October 1893

Admitted by, Dr Rheeke — Hour, 7 PM.

How Sent, Jno. B. Olivier, Jof P. Ram

Sex, Male

Age, 33

Civil Condition, Married

Children, —

Age Youngest Child,

Occupation, Laborer

Degree Education, Common School

Profession Religion, R. Catholic

Habits, Not intemperate

Nativity, Mass. (Father, Ireland; mother,

Physicians Committing, Geo. J. Hanley & L

Correspondents, address of friend 159 Con

No family Physician

Mrs. C. H. Galligan 159 N. Congress St. St. Paul

Mrs. J. H. Galligan. Bro

Mr. Mathew Galligan F.

Mrs. Matthew Galligan

Murdock, Minn.

(Patients' hand-writing - on day of examination Oct 30/93)

No. of Admissions, 1 (one)

Age First Attack, about 30.

Case No. 3508 Vol. 25.

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

EXAMINATION ON ADMISSION.

Exd by Dr. Ely, Oct 30/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Fairly clear

Quick or Sluggish, Slightly sluggish

MEMORY:

Past Events,

Recent Events, Fairly good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, somewhat dull

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State, Fairly good

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Complains of "noises in head", Constantly for a long time. Never liked to complain, though he knew himself to be sick, tho' not severely

EMOTIONAL STATE:

Normal, Calm, Normal (about) though

Indifferent,

Exalted,

Depressed, Slightly

DELUSIONS:

Systematized or Not, None noted

Special Subjects,

Transitory or Not,

HALLUCINATIONS: "of hearing"

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, fairly free in answering questions.

Personal and Medical History of Chas. H. Galligan

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ WEIGHT, usually about 165 lbs NUTRITION, quite fair.

WOUNDS OR ABNORMALITIES, None noted

TONGUE, Tremors, Considerable Coatings, very slight Promptness Movement, quite prompt; deviates to rt

PUPILS, Equality, Equal Size, slightly dilated

Response Light, yes Accommodation, yes

SIGHT, quite good

HEARING, Very much injured

COORDINATION, Arms, Quite good. Fingers nose, eyes shut, found slight inaccuracy.

Legs, Standing, eyes shut, steady.

TREMORS, Hands, Considerable Tongue, considerable

Facial Muscles, some, slight General,

REFLEXES, Patellar, Equal; quite exaggerated — 50 q.

Other Reflexes,

ARTICULATION, Hesitating, slightly Slurred,

FACIAL EXPRESSION, Normal

SENSIBILITY, normal

HEART, Sounds not very distinct, but no murmurs.

LUNGS, Sounds are normal

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Records kept Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Quite long ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother living — claims healthy

Father or Pat. Relations, Father living — claims healthy

Brothers or Sisters, None of brothers or sisters ever severely sick, or in hospital —

Personal and Medical History of Chas. H. Galligan

EBERT, FEILAR & QUARBERG, DAVENPORT, IOWA

1893

Was brought here by Deputy Sheriff Haas, attended by Mr Smith, with the following history. There is no history of consanguinity or heredity. This seems to be the 2nd attack: had one 3 years ago when he was sent to St Peters Hospital; remained 3 mos: result, improved. Disease seems Chronic since he came back: is variable. Derangement is now shown by his "hearing voices"; thinks something interferes with his free will & that his brain needs exercise. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. No peculiarities were previously known. There is no history of intemperance. He fell & hurt the top of his head one month before he went to the Hospital (3 years ago). Cause of disease is unknown. No treatment known of except when at above hospital. On personal examination, patient appeared weary & stupid; indifferent to everything. Said he hears spirits & voices & that people bother him. "Hears voices at the present time" - appearance & manner those of an insane person. This also ascertained that he wants to sleep 16 to 18 hours a day & will not work, because he cannot direct his will.

Oct 10 — Oct 10/93. On admission, is in fair physical condition. Was put on B2. Bodily Condition clean: No injuries or peculiarities noted. Oct 11/93. Slept 8 hours, last night; appetite good; Is quiet & well-behaved. Talks some or but little; no cough noticed. Was today, struck by a fellow patient. —

" 12 — Oct 12/93. Slept 7 hours last night; was quiet. AM. Pulse 80. T 99. Appetite good. Talks some. Walks about the ward. PM. Pulse 82. T 99 2. Oct 13/93. Slept quite well, last night. AM. Pulse 82. T 99 2. Appetite continues good. Walks quietly about ward. Talks when addressed, but answers briefly and in a

" 14 — half-dazed manner. Health fairly good. AM. Pulse 80. T 99. Oct 14/93. Again rested & slept quite well, last night. Was quiet when awake. AM. Pulse 82. Is on medicine. Appetite good. Walks about ward. Reads some. Continues quiet & well-behaved. Oct 15/93. Slept 8 hours last night.

" 16 — AM. Pulse 80. Oct 16/93. Was quite restless last night, sleeping but 5 hours. Appetite only medium.

" 17 — Still takes medicine. Talks some, when addressed. Oct 17/93. Quiet last night but slept only 6 hours. AM. Pulse 82. Talks quite freely, at times. Appetite good; but bowels are somewhat constipated & he is given laxatives. Face has a drawn, paretic appearance. Helps some with the hall-work.

" 24 — Oct 24/93. During the early part of this past week, patient slept about 6 hours each night; was somewhat restless, but during last few nights he has rested much better, sleeping about 8 hours each night; is frequently restless; appetite good & bowels have become quite regular. Pulse is now normal. Talks quite freely. Reads, goes walking & plays games. Also works some inward. Still manifests delusions. His manner is rather dull; his movements rather purposeless; and he seems quite clouded, mentally. Oct 31/93. Appetite is good. Patient reads some. Plays games, talks with his fellow patients. Walks about the hall & helps some with work inward. Says his head aches, at times. Inclined to be stubborn; dont like to mind. Does not go out walking. Is quite

" 31 — dazed, at times. Admits his memory is slow and his mind weak.

Nov 1/93 — Nov 1/93. Wt 169 pds. Is gaining in flesh: Pulse 80. Nov 15/93. Appetite good. Generally stands about while in hall, in a vacant way; goes out walking sometimes. Makes no complaints. Works some

" 30 — Nov 30/93. Is quiet & well-behaved. Appetite medium; Walks about hall; talks some; is deluded. Helps with the ward-work, at times. Habits are good.

Dec 1/93 — Dec 1/93. Weight 171½ pds. Pulse 78. Dec 15/93. Stands about in a restless manner. Talks but little; memory poor; when he tries to talk much he gets things "mixed up". Appetite good. Physical condition

" 31 — also good. Does no work now. — Dec 31/93. About the same. Deluded. "Wants to go down on B4" —

Personal and Medical History of Charles H. Galligan

1894

Jan 2 — Jan 2/94. Wt 151 pounds (Note by Asst. This is evidently a mistake as patient is in about his usual flesh).

" 15 — Pulse 80. Jan 15/94. Appetite, as a rule, is good. Stands about most of the time, while at the hall; Complains of headache, at times. Talk is rather incoherent, that is, cannot retain one subject for any length of time. Mental state best described as Confused and feeble. Goes walking two days

" 30 — Jan 30/94. Usually, apparently sleeping well, was, last night, restless for about 6 hours, sleeping

" 31 — but 2 hours. Appetite is good. Physical condition also good. Jan 31/94. No material change.

Feb 1/7 — Feb 1/94. Wt 174 pds. Pulse 70. Feb 7/94. Usually, apparently sleeping well, was restless 5 hours,

" 22 — and slept only 3 hours, last night. Feb 22/94. Sits about on the benches, most of the time. Talks some - Complains of headache, at times. Is deluded. Gets "mixed up" when he tries to talk much.

" 23 — Feb 23/94. Patient had been committed here under "Law of 1893", recently declared unconstitutional. He was today Taken out and Returned under "new Commitment papers" from Allerton County.

" 28 — Feb 28/94. Still deluded; cries & Complains of headache, at times. Stands about. Does no work.

Mar 2/7 — March 2/94. Wt 174 pds. Pulse 92. March 5/94. Was noisy, last night, for 5 hours; Crying & talking.

" 31 — Slept but 3 hours. March 31/94. Is well-behaved; has "spells of crying"; still Complains of headaches; talks incoherently; works some. Habits are clean. — —

Apl 2/30 — Apl 2/94. Wt 191½ pds (a gain of 17½ pounds, in past month). Pulse 98. Apl rd 30/94. Complains

" — quite frequently of headaches. Talks freely, but incoherently. Seldom works. Physical condition good.

May 1/8 — May 1/94. Wt 194 pds. Pulse 72. May 8/94. Quiet & well-behaved; Makes no Complaints. Transferred to A1.

" 31 — May 31/94. A quiet & well-behaved patient; keeps about the yard all the time. Talks to himself a good deal. Is somewhat incoherent; shifting from one subject to another without reason. Habits, Cleanly.

June 1/30 — June 1/94. Wt 189 pds. Pulse 76. June 30/94. Of late, has been working in kitchen, most of the time. Does not seem to change any from month to month. Is a quiet & well-conducted patient.

July 9 — July 9/94. Wt 183½ pds (has been losing in flesh the past 2 months without apparent cause). S. P 60.

" 14/30 — July 14/94. Tried to escape today; attempted to fight, when brought back. July 31/94. Patients mental condition does not seem to change any. Conduct & behavior about as usual. He works some in kitchen

Aug 2/28 — Aug 2/94. Wt 179 pds. Pulse 82. - Aug 31/94. Appetite poor; bowels regular. Behavior is good. Gets easily confused & mixed up; has very poor ideas of anything. Talks much of time to self. Habits clean.

Sept 4 — Sept 4/94. Wt 168½ pds (quite a loss in flesh in past month) yet he has not Complained (ill feeling).

" 10 — Pulse 80. Sept 10/94. Appetite fair. Behavior somewhat excited for past few days. Refuses to wear his clothes. Said "they were not his own". Was today, transferred to B2.

" 30 — Sept 30/94. Sleeps well. Behaves well, since coming in this (B2) hall. Still shows delusions.

Oct 1/3 — Oct 1/94. Wt 173 pds (has picked up some, in flesh). P 63. Oct 31/94. No special change. Works some

Nov 2/24 — Nov 2/94. Wt 176 " Pulse 80. Nov 30/94. Works in kitchen, occasionally. Dec 1/94. Wt 171 pds.

Dec 1/94 Jan 2/31 — Pulse 90. Jan 1/95. Wt 170 pds. Pulse 90. Appetite good. Jan 31/95. Appetite continues good. Patient talks incoherently. Is demented. Works in kitchen, at times. Health seems good.

Feb 1/28 — Feb 1/95. Wt 169 pds. Pulse 76. Feb 28/95. Behaves well & is quiet. Makes no complaints. No mental change noted. Talks incoherently & in a demented manner. Works in kitchen.

Mar 1/31 Apl 1 — March 1/95. Wt 171 pds. Pulse 72. March 31/95. Transferred to B1. - March 31/95. No change noted. Seems despondent & has "crying spells", at times. April 1/95. Wt 169 pds. P 76.

" 30 — Apl 30/95. Keeps about the same. Has many delusions; talks foolishly, at times. Behaves well. Works some inward.

Carried to Transfer Book a - 188

Personal and Medical History of James Mitchell (Colored)

GIBERT, FICLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3514

Residence, St Paul (at the street, 2d patient says).

Date Admission, 16th October 1893.

Admitted by, Dr Phelps Hour, 7 PM

How Sent, John. B. Oliver, Jr. Ramsey County

Sex, Male

Age, 40 years

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Barber

Degree Education, ?

Profession Religion, "don't answer"

Habits, Not intemperate

Nativity, Indiana (don't know that of parents).

Physicians Committing, Geo. J. Hauley & D. C. Jones

Correspondents, None given in "papers" — no family Physician

No. for Year, 84

Insane Relatives, refuses to answer questions

Cause Exciting, not known

Cause Predisposing, previous attack probably

Form, Mania-a-potu

Accompanying Bodily Disorder, none stated in papers

Suicidal or Not, unknown

Date of this Attack, probably recent

Duration, probably short

No. of Attack, 2nd (no further particulars)

No. of Admissions, 1st

Age First Attack, not known

Time of Leaving, Mch. 14 '94

Time in Hospital, 3 mos 29 dys.

Result, Rec.

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

EXAMINATION ON ADMISSION.

Exd by Dr. Ely, Oct 31/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear at present.

Quick or Sluggish, Quite Quick

MEMORY:

Past Events, Good

Recent Events, seems good.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct at present

REASONING POWER:

Ordinary Subjects, Good.

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Admits some drink-habit: and, from story told by him, his case is the result of a "spree" Had had a previous attack & was in Bellevue Hospital New York, about 4 years ago. Says he feels much better than at time of coming —

EMOTIONAL STATE:

Normal, Calm, Normal, at present

Indifferent,

Exalted,

Depressed,

DELUSIONS: Denies having any delusions now, but says he had them when he came & for a day or so afterwards —

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None, at present, noted.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free.

HE SAW BUZZ SAWS.

James Mitchell, a Colored Man, Becomes Insane on the Street.

James Mitchell, a colored man about forty years old, attracted a large crowd at Bridge square yesterday afternoon by his peculiar actions. He was first noticed standing exactly in the center of the square near the flag pole, with his right hand pointing toward the sky. First one pedestrian and then another noticed him, but when their eyes traveled heavenward in the direction his index finger was pointing they could see nothing, and some of the wise people said he was doing it for a joke. But it was a very serious matter with him, as was shown when one of the bystanders, more curious than the others, asked him what he was doing. The darkey never moved his eyes away from the heavens, but in a voice, husky with his emotions, he said:

"Doan, you see dat big saw up dere? See de teef! See how hit glissens. Dats de most wondfelest saw I eber seed. See! dere it goes roun' an' roun', an' see! dere hit's comin' right down yere arrah me," and the poor man shrunk to the pavement and groveled in the dirt of the street to escape the phantom saw his fancy had conjured among the clouds. By this time a stalwart, blue-coated guardian of the peace had arrived on the scene, and, scattering the crowd, he raised the poor fellow to his feet and asked the colored man what ailed him. Again the negro's arm went into the air, and once more he described the shining saw, with its mastodon teeth.

"Daffy," said the "copper," as he led the frightened darkey toward a patrol box and sent in call No. 5 for the central station patrol wagon. A moment later the big wagon came thundering down the street and the poor, unfortunate was loaded into it and whirled away to the station. It was while the man was sitting in the wagon that Officer Phil Gibbons, who rides in the wagon its various errands of mercy and justice, noticed that the negro still held his right arm aloft and gazed with a fixed, glassy stare into the blue dome of heaven. Nor could he be made to put it down until he was led in through the door of the station house and Sergeant Horn and the house officer pulled his arm down and held it at his side. He was locked up, said Dr. Jones, assistant city physician, was called to examine the man. With pensive air the negro sat on a stool in the cell and gazed out through the bars at the policemen. He relapsed into moody silence and would answer none of the questions directed to him. "Do you live in the city? Where were you going?" and like questions were all met with a vacant stare and no response. "He is insane," said Dr. Jones, who examined the man in the station at 5 o'clock, and the colored man who saw phantom buzz saws in the air was taken to the county jail for safe keeping.

Personal and Medical History of James Mitchell

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

6in WEIGHT, 139 lbs NUTRITION, Quite good.

ABNORMALITIES, None noted. Fear on tongue; but it is a fad; when young —

Fine Coatings, heavy Promptness Movement, Prompt

Equal Size, Slightly dilated

Light, Yes Accommodation, Yes.

shows slight impairment.

Good.

Arms, } Quite good. Finger to nose, eyes shut, quite accurate.

Legs, } Standing, eyes shut, Stands steadily.

Slight Tongue, Slight & fine

Muscles, None General, Gone

, Equal — diminished — about 3 or 4. —

Reflexes,

Vasitating, Quite Good ~~Slurred,~~

ION, Normal

Normal

Sounds are good

Sounds good

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short (this time) ONSET GRADUAL OR SUDDEN, Sudden.

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

Mother or Mat. Relations, Mother living —

Father or Pat. Relations, Father died at 60 — hard work.

Brothers or Sisters, 2 brothers, 1 sister living.

No history of insanity he knows of.

Personal and Medical History of James Mitchell (colored)

HERBERT, FICKAS & CHAMBERS, DAVENPORT, IOWA

Whole No. 3514

Residence, St Paul (with Street, & patient says).

Date Admission, 16th October 1893.

Admitted by, Dr Phelps Hour, 7 PM

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

Sex, Male

Age, 40 years

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Barber

Degree Education, ?

Profession Religion, "wont answer"

Habits, Not intemperate

Nativity, Indiana (dont know that of parents).

Physicians Committing, Geo. J. Hanley & D. C. Jones

Correspondents, None given in "papers" —
no family Physician

No. for Year, 84

Insane Relatives, refuses to answer question

Cause Exciting, not known

Cause Predisposing, previous attack probably

Form, Mania-a-potu

Accompanying Bodily Disorder, none stated in papers

Suicidal or Not, unknown

Date of this Attack, probably recent

Duration, probably short.

No. of Attack, 2nd (no further particulars)

No. of Admissions, 1st

Age First Attack, not known

Time of Leaving, Mch. 14 '94

Time in Hospital, 3 mos 29 ds.

Result, Rec.

Crossed off from Transfer List, April 18, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Exd by Dr Eby, Oct 31/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear at present.

Quick or Sluggish, Quite Quick

MEMORY:

Past Events, Good

Recent Events, Seems good.

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct at present

REASONING POWER:

Ordinary Subjects, Good.

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Admits some drink-habit: and, from story told by him, his case is the result of a fire. Had had a previous attack & was in Bellevue Hospital "New York, about 4 years ago. Says he feels much better than at time of coming —

EMOTIONAL STATE:

Normal, Calm, Normal, at present

Indifferent,

Exalted,

Depressed,

DELUSIONS: Denies having any delusions now, but says he had them when he came to for a day or so after-wards —

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None, at present, noted.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, quite free

Personal and Medical History of James Mitchell

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 139 pds NUTRITION, Quite good.

WOUNDS OR ABNORMALITIES, None noted. Scar on tongue; bit it in a fall; when young —

TONGUE, Tremors, Fine Coatings, Heavy Promptness Movement, Prompt

PUPILS, Equality, Equal Size, Slightly dilated

Response Light, Yes Accommodation, Yes.

SIGHT, Shows slight impairment.

HEARING, Good.

COORDINATION, Arms, } Quite good. Finger to nose, eyes shut, quite accurate.
Legs, } Standing, eyes shut, Stands steadily.

TREMORS, Hands, Slight Tongue, Slight & fine

Facial Muscles, None General, None

REFLEXES, Patellar, Equal — diminished — about 3 or 4 —

Other Reflexes,

ARTICULATION, ~~Hesitating,~~ Quite good ~~Slurred,~~

FACIAL EXPRESSION, Normal

SENSIBILITY, normal

HEART, Sounds are good

LUNGS, Sounds good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short (this time) ONSET GRADUAL OR SUDDEN, Sudden.

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

Mother or Mat. Relations, Mother living.

Father or Pat. Relations, Father died at 60 — hard work.

Brothers or Sisters, 2 brothers, 1 sister living.

No history of insanity he knows of.

Personal and Medical History of James Mitchell

LOMBARD, FOLGAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriff P.C. Haas, with the following history. Says "his parents were monkeys"- This is the 2nd attack; Can't give any further particulars & he wont answer question "if sent to hospital": This present attack is probably recent; no history obtainable beyond the fact that he was found by Policeman on street yesterday in a raving condition. State of disease not mentioned; not known if variable or if there are rational intervals. Derangement now shown by his hearing strange voices and seeing strange things. Is sullen. Is to disposition to injure others, Suicidal propensities, filthy or destructive habits, nothing is known. Refuses to answer question touching on heredity. There is no history prior to yesterday. During last night he talked a religious a great deal. There is no history of intemperance, nor of any severe disease or injury to head. Will not answer if he has been restrained or confined. Don't know cause of disease. He has had no medical treatment. On personal examination, patient has a wild look in his eye; actions as stated above. He above facts were also brought out. Was sullen. Appearance and manner indicated insanity. Most of information obtained from police.

Oct 16 Oct 16/93. On admission, is in fair physical condition. Wasp. ton B.B. (See attached "clipping" from Paper).
" 17 no injuries or peculiarities noted. Oct 17/93. Slept 5 hours, last night; was restless & noisy for 4 hours. AM. P 116 T@ 100 4. Did not eat any supper last night. Bowels seem regular; no cough noticed. Is quietly behaved; walks the floor a good deal; laughs & talks to himself. Thinks he can get out of here, whenever he wishes. No complaints or injuries to note. Oct 18/93. Restless & noisy for 4 hours, sleeping but 5, last night. AM. Pulse 102. T. 100. Appetite fairly good. Started to run away, while out walking today. Talks promptly and gives a good account
" 18 of past events, but shows no realizing sense or much care for his position. Oct 19/93. Was restless for 3 hours, last night, but slept 6 hours. Got up a couple of times & put his pants on. AM. Pulse 85. T@ 99.6. Appetite
" 19 fairly good. Bowels regular. Oct 20/93. Was restless and noisy for 4 hours last night; slept 5 hours. —
" 20 AM. Pulse 90. T@ 99.5. Appetite good. Bowels normal. Says "he has been confined in the Bellevue Pavilion N.Y. but don't remember how long ago or how long he was there; says "Guesses about 5 years ago"—
" 21 Oct 21/93. Slightly noisy for 5 hours, last night. AM. Pulse 70. T@ 99. Appetite good. Bowels regular.
" 22 Oct 22/93. Slept but 3 hours, last night; slightly noisy & restless for 6 hours. AM. Pulse 90. T@ 98.5.
" 23 Oct 23/93. Slightly noisy & restless for 5 hours, sleeping but 4, last night. AM. Pulse 90. T@ 99. Is quiet. Rarely ever enters into conversation with anyone, but will answer when spoken to.
" 24 Oct 24/93. AM. Pulse 80. T@ 99. Walks the hall a good part of the time. Talks to himself & laughs—
" 25 Talks, however, quite rationally, at times. Oct 25/93. AM. Pulse 88. T@ 99.4. Appetite is good now.
" 26 Bowels regular. Oct 26/93. AM. Pulse 80. T@ 99. Oct 27/93. Patient sleeps very poorly, at night.
" 27 Oct 28/93. Does not seem to change any. Oct 29/93. For the past few nights, rest & sleep have been very
" 29 poor. He has been noisy & restless the greater part of the time, sleeping only from 3 to 5 hours, each
" 30 night. Last night, however, he was more restful & slept about 7 hours. Oct 30/93. Slept 7 hours last night & was quiet. Appetite continues good & Bowels regular. Patient does not change, in any respect, as time goes on. ——

Nov 1 Nov 1/93. Wt 153 pds. (Has made a marked gain in flesh, 14 pounds, since his coming). Pulse 72.
" 30 Nov 30/93. Appetite good. Bowels Regular. Always quiet & well-behaved, very civil & obliging; works well & willingly in the ward. Attendant remarks that he seems to be all right & he can see nothing wrong about patient.
Dec 1/31 Dec 1/93. Wt 160 pounds (a further gain of 7 pounds, in past 4 weeks). Pulse 72. Dec 31/93. Apparently rests & sleeps well at night. Appetite good. Bowels normal. Continues quiet & well-behaved, at

Personal and Medical History of James Mitchell

1893

Dec 31 at all times; Causes no trouble; makes no complaints. Attends chapel services; also dances
Cont'd & other entertainments participating in them, at all times is very well-conducted. Habits are
1894 neat & clean and physical health is very good. He seems quite contented here.
Jan 1/31 Jan 1/94. Wt 160 pds. Jan 31/94. Appetite good; bowels regular. Talks freely, pleasantly and rationally; no delusions noted. Quiet and well-behaved; always pleasant and agreeable. Works well and willingly in the ward. Habits neat and clean. Is in good physical condition.
Feb 1/28 Feb 1/94. Wt 159 pds. Pulse 107. Feb 28/94. Is a good patient. Pleasant in manner. Very neat & tidy about his personal appearance. Talks quite freely; no delusions noted. Health good.
Mar 1/14 Mar 1/94. Wt 160½ pds. Pulse 63. Mar 14/94. Went home today. Patient was a good humored, careless negro. Probably is inebriate, in tendencies chiefly.

— Crossed off the books; Illegally Committed —

Porter A. Dewitt

1894 From 36.
Nov 2/4/11 Nov 2/94. Wt 149½ pds. Pulse 78. Nov 4/94. Has liberty of the grounds. Nov 11/94. Visited by friend—
" 30 Nov 30/94. No special change. Very easily confused & excited; much inclined to find fault. Is not a worker.
Dec 3/31 Dec 3/94. Wt 154½ pds. Pulse 83. Dec 31/94. Occasionally, restless at night. Is very nervous & excitable. Likes in bed until about 8. Am & then feels offended if breakfast is not saved for him. Claims he feels too
1895 nervous to get up earlier. Is a very hard patient to get along with. Much given to fault-finding &c.
Jan 3/18 Jan 3/95. Wt 156½ pds. Pulse 71. Jany 18/95. Is about ½ of nights, since 1st last, patient has been restless about
" 31 ½ of each night, sleeping poorly the remainder of the time. Jan 31/95. Appetite good; bowels regular; keeps
Feb 2 about the same, all the time, and as generally reported, above. Feb 2/95. Wt 163 pounds. Pulse 71.
" 28 Feb 28/95. At times, is quite restless at night & sleeping poorly; sometimes, also, out of bed & in the hall. He still complains of feeling nervous; is cranky & very hard to please; wants a great deal of his own way; obstinate. Annoys other patients, during nights, by walking about in hall, coughing & making noise. Is grumbling & fault finding. Indolent; does no work.
March 2/31 March 2/95. Wt 162 pds. P 76. March 31/95. No change noticeable in any way. —
April 1/30 April 1/95. Wt 167 " " 74. April 30/95. Behavior somewhat better of late; less cranky & more agreeable. Has had a "limited parole" for some time. Still indolent & does no work.
May 2/13 May 2/95. Wt 171 pds. Pulse 86. May 13/95. Complained of a cold in the head, past 2 days; (when taken P 94. T 98½); remained in his room. Feels much better today. Went out for a walk.
" 31 May 31/95. Complains still of great "nervousness" & is anxious. Claims he does not sleep well. He talks freely & rationally; mental condition seems quite good. No delusions noticed. Is on 4th diet. Still he is quite cranky & irritable at times, yet not so grumbling & fault finding, as in the past.
June 1/30 June 1/95. Wt 172 pds. Pulse 84. June 30/95. No change to note. Is in good physical health.
July 1/31 Is very indolent; reads some, but does no work. July 1/95. Wt 174 pds. P 88. July 31/95. Keeps about same from month to month. Still complains of "nervous spells" & is anxious. Has a "limited parole". Does no work.
Aug 1 Aug 1/95. Wt 175 pds. Pulse 78. Sept 1/95. Wt 174 pds. P 76. Oct 1/95. Wt 179½ pds. P 76. Oct 31/95. No special change. Is
Sept " very easily disturbed. Claims he is very nervous; goes through peculiar motions with head & shoulders. Talks freely & rationally.
Oct 1/31 Seems in good condition, mentally & physically. Somewhat cranky. Has a "limited parole". Visits of his relatives.

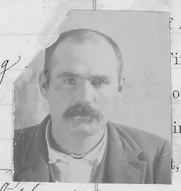
Carries of transfer book. a. Page 243

Personal and Medical History of Patrick O'Donnell #2

GIBBS, FULLAM & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3515.
Residence, 1074 Winnipeg Ave, St Paul
Date Admission, 16th October 1893.
Admitted by, D. Phelps Hour, 7 PM.
How Sent, John B. Olivier, Jof P, Ramsey County
Sex, Male
Age, 26
Civil Condition, —
Children, —
Age Youngest Child, —
Occupation, Street Ry. Motor-Man
Degree Education, Limited to reading & writing
Profession Religion, Catholic
Habits, no history of intemperance.
Nativity, Minnesota (Parents born in Ireland)
Physicians Committing, Talbot Jones & J. A. Fanlin
Correspondents (Brother) J. P. O'Donnell 761 Pare Ave
"No family Physician" " Hugh O'Donnell 104 Winnipeg ave St Paul.





No. for Year, 85.
Insane Relatives, none
Cause Exciting, unknown.
Cause Predisposing, not given
Form, Alcoholic Dementia
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, not
Date of this Attack, 5 months ago
Duration, 5 months
No. of Attack, 1st
[illegible] Admissions, 1st
[illegible] First Attack, about 25
[illegible] of Leaving,
[illegible] in Hospital,
[illegible],

EXAMINATION ON ADMISSION.

Exd by D. Phelps, Oct 17/93. MENTAL CHARACTERISTICS.

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

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

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

REASONING POWER:
Ordinary Subjects,
Own Mental State, Sluggish & uncertain
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Owns to being Steadily afraid. Does not think it was a delusion. Mental state one of slight depression, with a very considerable feebleness of mental activity.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, somewhat & feebleminded

DELUSIONS:
Systematized ~~or Not~~, a subject of persecution
Special Subjects,
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, quite Coherent; fairly
Voluble or Reticent, accurate on ordinary subjects.
Says he received hurt on a street-car about a year ago & had to stop work about 6 months ago. Admits he was afraid some one was scheming against him; also thought that poison was put in tea & food for him.

Personal and Medical History of Patrick O'Donnell #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 in. WEIGHT, 114½ lbs (usual 160 to 165 lbs) NUTRITION, Seems fair
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, none noted Coatings, narrow & flabby Promptness Movement, prompt
PUPILS, Equality, seem equal Size, about normal
Response Light, Accommodation,
SIGHT, I seems good
HEARING, seems normal
COORDINATION, Arms, [illegible] ...ance in right
REFLEXES, Patellar, [illegible] ...eyes shut, quite steadily
Other Reflexes, ...d

Patrick O'Donnell #2
Case No. 3515 File No. 9
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file with the original ones.

ARTICULATION, ~~Hesitating~~, fairly good ~~Slurred~~,
FACIAL EXPRESSION, good
SENSIBILITY,
HEART, Sounds are normal
LUNGS, Sounds normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, fairly Medium, Poor,
SLEEP, Good, Poor, last night Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 5 months ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died of heart trouble
Father or Pat. Relations, Father living; healthy
Brothers or Sisters, three living are all healthy.
no history of heredity obtained

Personal and Medical History of Patrick O'Donnell #2

EBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3515.

Residence, 1014 Winnipeg Ave, St Paul

Date Admission, 16th October 1893.

Admitted by, D. Phelps Hour, 7 PM

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

Sex, Male

Age, 26

Civil Condition, —

Children, —

Age Youngest Child, —

Occupation, Street Ry. Motor-Man

Degree Education, Limited to reading & writing

Profession Religion, Catholic

Habits, no history of Intemperance.?

Nativity, Minnesota (Parents born in Ireland

Physicians Committing, Talbot Jones & J.H. [illegible]

Correspondents, (Brother) P. O'Donnell 781 Pare Ave

No family Physician " Hugh O'Donnell 104 Winnipeg Ave St Paul.



No. for Year, 85.

Insane Relatives, none

Cause Exciting, unknown

Cause Predisposing, not given

Form, Alcoholic Dementia

Accompanying Bodily Disorder, none mentioned

Suicidal or Not, not

Date of this Attack, 5 months ago

EXAMINATION ON ADMISSION.

Exd by D. Phelps, Oct 17/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, slightly confused

Quick or Sluggish,

MEMORY:

Past Events,

Recent Events, Seemingly good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, somewhat dulled

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State, Sluggish & uncertain

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Owns to being Heavily afraid. Does not think it has a delusion. Mental state one of slight depression, with very considerable feebleness of mental activity.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, somewhat & feebleminded

DELUSIONS:

Systematized ~~or Not~~, a subject of persecution

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, quite Coherent; fairly

Voluble or Reticent, accurate on ordinary subjects.

Says he received hurt on a street-car about a year ago & had to stop work about 8 months ago. Admits he was afraid some one was poisoning a pancake given him; also thought that person was putting tea & food for him.

Personal and Medical History of Patrick O'Donnell #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 in WEIGHT, 114½ lbs. (usual 160 to 165 lbs) NUTRITION, Seems fair

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, none noted Coatings, narrow & flabby Promptness Movement, prompt

PUPILS, Equality, seem equal Size, about normal

Response Light, Accommodation,

SIGHT, seems good

HEARING, seems normal

COORDINATION, Arms, finger to nose, eyes shut, some inaccuracy; none in right

Legs, Standing on foot, quite steady; Hands, Eyes shut, quite steadily

TREMORS, Hands, considerable Tongue, none noted

Facial Muscles, General,

REFLEXES, Patellar, equal; about 7 to 8 — D. P's Scale.

Other Reflexes,

ARTICULATION, ~~Hesitating~~, fairly good ~~Slurred~~,

FACIAL EXPRESSION, good

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Sounds normal

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 5 months ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother died of heart trouble

Father or Pat. Relations, Father living; healthy

Brothers or Sisters, three living are all healthy.

no history of heredity obtained

Personal and Medical History of Patrick O'Donnell #2

EMERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893	Was brought here by Deputy Sheriff Haas + brother, with following history. There is no history of consanguinity or heredity. This is the 1st attack; (has not been sent to hospital before); first symptoms of it were manifested 5 months ago; thinks some unknown persons are plotting against him. He also refuses food. Disease appears stationary; if variable or paroxysmal intervals unknown. Derangement now shown by delusions as to persons plotting against him. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Idiosyncrasies previously shown. No history of intemperance, nor of any severe disease or head-injury. He has not been restrained or confined, nor under medical treatment. Supposed cause of disease is unknown. On personal examination, appearance + manner excitable; it was with difficulty that his delusions were brought out. Says "Nefarious unknown persons are plotting against him; also that medicines are surreptitiously put in his tea + food, to his injury". Did nothing out of the way while being examined.
Oct 16	Oct 16/93. Patient, on admission, is in fair condition. Was put on B3. Bodily condition quite clean; no injuries or peculiarities noted. Oct 17/93. Was restless nearly all last night. Slept but 1½ hours. AM. Pulse 88 T. 99.4. Appetite good. Bowels generally free. No cough noticed. Is restless today; walks about hall some. Thinks some one is going to kill him. No injuries or complaints to note. PM. Pulse 90. T. 99.2. Oct 18/93. Was again restless last night but slept 5 hours or so. AM. Pulse 84. T. 99.2. Appetite good. Is very nervous. Still believes that he is going to be killed. PM. Pulse 88. T. 99.4. Oct 19/93. Rested + slept better, 7 hours, last night + was quiet. AM. Pulse 82. T. 98.8. Stands about, w hall; rather stupid. Talks but very little. PM. Pulse 86. T. 98.8. When examined recently, he showed delusions as subject of persecution; also owned up to being shabbily clad. Was slightly depressed, with a considerable feebleness of mental activity.
" 20/21	Oct 20/93. Slept 7 hours last night. Was quiet. AM. Pulse 88. Oct 21/93. AM. Pulse 84. Talks but little. Is morose.
" 22	Oct 22/93. AM. Pulse 80. Appetite fairly good. Prays considerable. Talks with his fellow patients. Is quiet
" 23	and well-behaved, by day. Oct 23/93. Has been sleeping well, 8 hours, in each of past 2 nights. Has
" 31	also been quiet. AM. Pulse 76. Oct 31/93. During this the 2nd week of his stay, patient has been quiet + restful at night, sleeping uniformly 8 hours, in each. Pulse has gradually become more even, about normal. Is quiet + well-behaved by day. At first reticent, talking but little with his fellow patients; the last 2 days has been conversing more freely. Prays a good deal. Reads some. Takes no part in cards or games. Works some on ward. Seems in better spirits. —
Nov 1/30	Nov 1/93. Wt 153½ pds. (a slight gain, since coming). Pulse 76. Nov 8/93. Appetite good; bowels regular; Works some; goes out walking sometimes. Is rather depressed. Nov 30/93. Patient has not been eating well, of late. Vomited at table. Depressed; "wants some one to kill him" - Shows delusions. Works but little.
Dec 4	Dec 4/93. Appetite poor; eats but very little. Still much depressed. Wt. today, 151½ pounds. Pulse 84. —
" 11/31	Dec 11/93. Still eats very scantily. Dec 31/93. Apparently, rests + sleeps well, at night. Appetite has been very
1894 Jan 2/31	poor now, for some time past. Has complains of headache, at times. Is depressed and talks but little. Still deluded. Jan 2/94. Wt 153 pds. Pulse 80. Tried to run away while out walking today. Jan 31/94. Appetite continues good. Patient is deluded; depressed. Takes no interest in games &c. Goes walking some-times - Does no work. Habits are clean. —
Feb 1/27	Feb 1/94. Wt 154 pds. Pulse 76. Feb 20/94. Restless, walking about the hall. Rather "cranky" + irritable. Talks loudly + boisterously, at times. Appetite good. Makes no complaints.
" 23	Feb 23/94. This patient has been committed here under "Law of 1893", recently declared unconstitutional —

Personal and Medical History of Patrick O'Donnell #2

1894 Feb 23	Feb 23/94. Patient was, today, Taken out and Returned under "New Committment papers"
" 28	from Olmsted County. Feb 28/94. Sits about in a seat, most of the time; seems much depressed, at times. Occasionally, talks very loudly; still manifests delusions. Appetite good; he makes no complaints.
Mar 2/31	March 2/94. Wt 160 pds. (a gain of 9 pounds in the past month). Pulse 80. Mar 31/94. Still talks loudly, and boisterously, at times. Goes out walking. Appetite good. Does no work. —
Apl 2/19	Apl 2/94. Wt 171½ pds (a further gain of 6½ pds. in past month). Pulse 80. Apl 19/94. Apparently rests and sleeps well, at night. Appetite good. While in hall, sits about in the seats. Goes out walking, sometimes, fairly regularly. Works none. Is still deluded. Talks quite freely when addressed; still given to loud and boisterous talking, at times. Makes no complaints. Physical condition good —
" 21/30	Apl 21/94. Was interviewed by Dr. Archer, this evening. April 30/94. Sits about on the seats most of the time. Talks but little. Appetite good. Takes no recreation, except walking. Physical condition good.
May 1/3	May 1/94. Wt 171½ pds. Pulse 80. May 3/94. Talking rather boisterously today. "Imagines some of
" 8	the patients have done him some wrong in the past". May 8/94. Talking most of time; is deluded.
" 15/25	May 15/94. Slept only 3 hours last night; was noisy 3 hours or so. May 15/94. Transferred to B3 —
" 29/31	May 29/94. Visited by father, today. May 31/94. Is very restless; while on ward, keeps walking about in a small space; will talk to himself; there is no sense in what he says. Is not inclined to work.
June 1/30	June 1/94. Wt 168 pds. Pulse 66. June 30/94. Quite mean + contrary, at times: is most always finding fault about every thing. Has delusions - Quite difficult to make out what he is talking about.
July 4/31	July 4/94. Wt 165½ pds. Pulse 64. July 31/94. No change to report in regard to his condition —
Aug 1/31	Aug 1/94. Wt 159½ " " 80. Aug 31/94. Keeps about the same. Has many delusions. Talks a great deal to himself; is quite restless, at all times, + inclined to be ugly + contrary. Not a worker; takes part in no games &c. Appetite good, bowels regular. Health apparently good -
Sep 3/30	Sep 3/94. Wt 151 pounds. Pulse 74. Sep 30/94. Of a mean + disagreeable disposition; always + finding fault: contrary + stubborn; ugly, at times. Still shows many delusions - Hard to understand what he says. Insolent + does no work.
Oct 7	Oct 2/94. Wt 146 pds. (Patient has lost gradually, in flesh, for 4 months - Has lost 21½ pds. in the past 6 months; no cause apparent) -
" 31	Pulse 84. Oct 31/94. Continues about the same - Contrary, stubborn + fault finding.
Nov 2/30	Nov 2/94. Wt 145 pds. Pulse 79. Nov 30/94. Still shows delusions. Is much inclined to be
Dec 3 1894 Jan 31/95	contrary + stubborn. Does not work any. Dec 3/94. Wt 142½ pounds. Pulse 69. Appetite is good; bowels regular. Jan 31/95. Wt 144 pds. Pulse 84 - Jan 31/95. Once in a great while, restless + noisy, at night. Very stubborn and noisy, at times, by day; still shows delusions - Does not help any with ward-work.
Feb 2/14	Feb 2/95. Wt 140½ pds. Pulse 80. Feb 28/95. Is often noisy on ward, + inclined to be quarrelsome + obstinate: very restless + always walking the hall. Appetite good: bowels regular: no complaints.
Mar 1	March 1/95. Transferred to B3 East - Wt 134 pds. Pulse 64. Has been losing in flesh the past 10
" 14	months, (without known cause). March 14/95. Has been very quiet in this ward, never causing any
" 31	trouble. Talks but very little. Transferred to B3 E. March 31/95. Behavior somewhat improved. Not so restless + does not walk the hall so much as he used to. Still holds delusions. Is not a worker.
Apl 1/13	April 1/95. Wt 138 pds. Pulse 68. Apl 13/95: Had a "spell" today + was very noisy; restless, walking the
" 30	hall + using profane language. Apl 30/95: Is quiet now. Does not improve mentally: keeps about the same, all the time. Still shows delusions. Physical condition good. Insolent + does no work.

Carried to Transfer Wk A-190

Personal and Medical History of Harley Harrison

wi prev. Commitment Harvey Harrison

SIBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3516.
No. for Year, 86.
Residence, Albert Lea, Minn
Insane Relatives, Sister + brother
Date Admission, 17th October 1893.
Cause Exciting, Not definitely known; some neuroses.
Admitted by, Dr Phelps Hour, 6 P.M.
Cause Predisposing, Heredity
How Sent, Herman Blackmer, Jo P, Freeborn County
Form, Chronic Melancholia
Sex, Male
Accompanying Bodily Disorder, None stated
Age, 32
Suicidal or Not, not
Civil Condition, Single
Date of this Attack, Last Spring or July
Children,
Duration, Some months
Age Youngest Child,
No. of Attack, Probably 2nd (prev in fall of 1888).
Occupation, Farmer
No. of Admissions, 2nd (in Rochester before for over a year)
Degree Education, High School
Age First Attack, 29.
Profession Religion, Lutheran
Time of Leaving,
Habits, Probably not very good
Time in Hospital,
Nativity, Wisconsin, (Parents born in Norway).
Result,
Physicians Committing, H.B. Wilcox & J.P. Von Berg
Correspondents, both Henry Harris in, Albert Lea Minn
Address of family Physician, Albert Lea

EXAMINATION ON ADMISSION.

Exd by Dr. Phelps, Oct 17/93.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Recent Events, Special Subjects, } Probably good

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

REASONING POWER
Ordinary Subjects, Own Mental State, Special Subjects, } rather poor

GENERAL DESCRIPTIVE REMARKS:
Says his life was threatened if he did not leave (Colo) which is probably true. He is, at present in a depressed slightly Confused State of mind.
He seems to find difficulty in Comprehending questions. Has to have them repeated before answering them.

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

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

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Able to give fair account of ordinary events - Believes, however, he was in days of his life in Colorado City.
Coherent or Incoherent,
Voluble or Reticent,

Personal and Medical History of Harley Harrison

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, Somewhat impaired
WOUNDS OR ABNORMALITIES, None noted
TONGUE, Tremors, considerable Coatings, Promptness Movement, fairly prompt
PUPILS, Equality, Equal Size, Normal
Response Light, Yes Accommodation,
SIGHT, Probably good
HEARING, Considerably impaired in right Ear; slightly in left.

Harley Harrison.
Case No. 3516 File No. 9

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

Eyesight, fairly steady.
bee

ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds palpitating + active; no murmurs.
LUNGS, Sounds seem slightly impaired, Toward apex.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, previous attack ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters, Brother + sister Insane

Personal and Medical History of Harley Harrison

in prev. Commitment Harold Harrison

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3516.

Residence, Albert Lea, Minn.

Date Admission, 17th October 1893.

Admitted by, Dr Phelps Hour, 6 A.M.

How Sent, Newman Blackmer, Jof P, Freeborn County

Sex, Male

Age, 32

Civil Condition, Single

Children,

Age Youngest Child,

Occupation, Farmer

Degree Education, High School

Profession Religion, Lutheran

Habits, probably not very good

Nativity, Wisconsin, (Parents born in Norway)

Physicians Committing, H.H. Wilcox & J.P. Ho...

Correspondents, both Henry Harrison, Albert L...

Address of family Physician, Albert Lea

No. for Year, 86.

Insane Relatives, Sister & brother

Cause Exciting, not definitely known; some nervous.

Cause Predisposing, Heredity

Form, Chronic Melancholia

Accompanying Bodily Disorder, none stated

Suicidal or Not, not

Date of this Attack, Last Spring or July

Duration, some months

No. of Attack, probably 2nd (one in fall of 1880)



EXAMINATION ON ADMISSION.

Exd by Dr. Phelps, Oct 17/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, somewhat confused

Quick or Sluggish, sluggish

MEMORY:

Past Events, Recent Events, Special Subjects, } probably good

PERCEPTIVITY:

Alert or Dull, quite dull

Correct or Illusive,

REASONING POWER

Ordinary Subjects, Own Mental State, Special Subjects, } rather poor

GENERAL DESCRIPTIVE REMARKS:

Says his life was threatened if he did not leave (Colorado) which is probably true. He is, at present in a depressed, slightly confused state of mind.

He seems to find difficulty in comprehending questions. Has to have them repeated before answering them.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, somewhat

DELUSIONS:

Systematized ~~or Not,~~ fairly

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION: Coherent or Incoherent, Voluble or Reticent, } able to give fair account of ordinary events - believes, however, he was in days of his life in Colorado City.

Personal and Medical History of Harley Harrison

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION, somewhat impaired

WOUNDS OR ABNORMALITIES, none noted

TONGUE, Tremors, considerable Coatings, Promptness Movement, fairly prompt

PUPILS, Equality, Equal Size, normal

Response Light, yes Accommodation,

SIGHT, probably good

HEARING, Considerably impaired in right Ear; slightly in left.

COORDINATION, Arms, } Fairly good.

Legs, } standing on foot, fairly good. Standing, eyes shut, fairly steady.

TREMORS, Hands, some; none marked Tongue, considerable

Facial Muscles, General,

REFLEXES, Patellar, Equal; very much exaggerated; 8—9—

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART, found palpitating & active; no murmurs.

LUNGS, found seem slightly impaired, toward apex.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, previous attack ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters, brother & sister Insane

EARLEY, FISHER & CHAMBERS, DAVENPORT, IOWA.

1893

Has brought here by Deputy-Sheriff J. L. Jorgeson with the following history of case. There is no history of consanguinity but there is of heredity, a sister and a brother being insane. This is probably the 2nd attack; one occurring in fall of 1888 when he was sent to this Rochester Hospital for over a year. — He took a trip to Colorado in the Spring and returned in July saying "the people did want to kill him, so he returned home". Disease seems increasing, but is variable & there are rational intervals, at irregular periods. Derangement is now shown by his saying that four women were buried in town who had much money ($15000.) about their person. He also wishes to go to Wisconsin, as the people here were too bad to live with. He borrowed money under the pretenses of getting a new hat & took a train to a neighboring town looking for a position as a book-keeper. Patient is neither disposed to injure others nor fiendish nor of filthy or destructive habits. Previously, was very quiet; seldom taking part in conversation; religious impressions; contradiction in argument of an angry nature. There is no history of intemperance nor of any severe disease or injury to head. Patient has not been restrained or confined nor under medical treatment. Do not know cause of the disease but there seem to be some neurosis. On personal exam^n patient is anaemic, emaciated, tendon reflex exaggerated. Looks shy & keeps his eyes on floor much of the time. Complains of pain in limbs, as if rheumatism. He said that he saw some women were buried near the hotel who had $15000. about their person. He interrupted witnesses & looked about the room as though afraid something were coming from behind. Appearance & manner were melancholy, indifferent & shy. Other facts indicating insanity were delusions, fits of laughter, walking most of the day, grouning, excited over contradictions. NOTE*. Patient was at this hospital before (under name of Harold Harrison) from Nov 2/88 to Dec 17/89. During that stay, he was much given to "spells" of depression; was full of delusions; frequently refused meals & had to be fed. Eloped Dec 17/89. At time of leaving, was in good physical health, though mental condition was unimproved. (see Vol 11. page 100. No. 1900)

Note *

Oct 17 — Oct 17/93. On admission, is in fair physical condition. Temperature B^y. Bodily condition clean; no injuries or peculiarities noted. AM. Pulse 80. T(e) 99. Appetite only medium. No cough noticed. Is very restless; walks about hall most of the time. Talks but very little. PM. Pulse 82. T(e) 99.2. On examination, in office, today, he showed a depressed and slightly confused state of mind. Seemed to find difficulty in comprehending questions. Also showed fairly systematized delusions. Oct 18/93. Was restless, sleeping but 4 hours, last night. AM. Pulse 78. T(e) 98.8. Appetite good. Is nervous & restless. Walks the floor most of the time.

" 18

" 19 — Talks some, when addressed. PM. Pulse 80. T(e) 99. Oct 19/93. Again restless, sleeping but 6 hours last night.

" 20 — AM. Pulse 82. T(e) 98.8. Conduct & behavior by day, as usual. PM. Pulse 86 T(e) 99. Oct 20/93. AM. Pulse 84.

" 21 — No change, otherwise. Oct 21/93. AM. Pulse 88. Talks none. Nervous restless, all the time, onward.

" 22 — Oct 22/93. Has been restless & sleeping poorly, the past 2 nights, about 5 hours each. AM. Pulse 82. Still, very restless by day. Has a dazed expression and is sluggish to talk. Half-comprehending things.

" 23 — Oct 23/93. Was quiet and slept 8 hours, last night. AM. Pulse 80. Does not change any, from day to day.

" 31 — Oct 31/93. Patient has been sleeping better, this past week, 7 to 8 hours each night. Pulse also has become about normal. Appetite is good. Has lately become quite cranky & stubborn when requested to do anything. There has been little or no change in patient's condition, since coming here.

Nov 1/6 — Nov 1/93. Wt 139 pds. Pulse 76. Nov 6/93. Appetite is good. Patient is indifferent. Does not play games or read. Goes out walking with the rest.

" 13/30 — Nov 13/93. Transferred to B^s today. Nov 30/93. A quiet patient; is inclined to keep by himself. Has nothing to say. Appears to be contented. Has "spells" at times, when he will jerk his head to one side, with all his might. Helps some with ward-work.

1893

Nov 30 / Dec 1/in — Dec 23/93. Wt 144 pds; a gain of 5 pounds, in past month. Pulse 64. Dec 23/93. A quiet and well-behaved patient. Does not talk or play games with other patients. Reads, once in a while; is a willing worker. —

" 31 — Dec 31/93. Keeps about the same, almost, from day to day; very easily excited. Is quite contrary, at times, of late. Appetite poor; bowels regular. Still has the peculiar habit of jerking his head to one side.

1894

Jan 1/5 — Jan 1/94. Wt 140 pds. Pulse 102. Jan 15/94. Is a quiet & for the most part, well-behaved patient. Is much inclined to keep by himself, and lounge about on the benches. Is quite easily excited & has "spells" of walking the floor, jerking his head to one side & then to the other, with all his force. Is not inclined to talk and, when spoken to, is very short in answering. Works some on ward.

" 31 — Jan 31/94. No material change to note. Still inclined to be alone; takes no part in games &c. &c.

Feb 2/20 — Feb 2/94. Wt 145 pds (some gain in flesh); Pulse 102. Feb 20/94. Is a quiet patient. Has the "peculiar spells" above mentioned, when he will keep jerking his head. Is easily excited and quite stubborn, when in these "spells"; restless, walking the hall, a good deal of the time. — Never speaks, unless first addressed. Keeps by himself, but works well on the ward.

" 21 — Was today taken out, and committed under "old Law" from Olmsted County

" 28 — Returned to B^s. Feb 28/94. Quiet and well-behaved. Is easily excited. Has "spells" of going about ward, jerking his head to one side. Not much inclined to talk. Works well, on the ward.

Mar 3/31 — March 3/94. Wt 150 pds; (is still gaining in flesh). Pulse 76. March 31/94. Keeps about the same. Acts very strangely, at times, and wont speak. Appetite good; bowels regular; a good & willing worker.

Apr 2/30 — April 2/94. Wt 153 pds. Pulse 80. April 30/94. Is a quiet, well-behaved patient; is always by himself; has nothing to say; always willing to work. Is easily confused and hard to reason with, when he is excited. Appetite good; bowels regular; habits are clean. Physical condition seems good. —

May 3 — May 3/94. Wt. 165½ pds. Pulse 68. (Has gained considerably in flesh during the past month) —

" 18 — May 18/94. Does not change much if any. Has "spells" when he will jerk his head to one side. —

" 31 — Was, today, transferred to B^s! — May 31/94. No special change. Well-behaved. Willingly assists with work

June 1/30 — June 1/94. Wt 161 pds. Pulse 90. June 30/94. No change to report during this present month.

July 9/31 — July 9/94. Wt 159 " " 78. July 31/94. Quiet & well-behaved. Is about the same, all the time. At times, quite restless & will walk the hall, back & forth, for hours at a time, if allowed. Works in dining room.

Aug 2/10 — Aug 2/94. Wt 161½ pds. Pulse 86. Aug 10/94. About as usual. Apparently in good bodily health. —

" 13 — Aug 13/94. Patient was among a number who were sent downtown this evening to attend an entertainment in the Opera House, and when coming out he managed to elude the attendants and made his escape. Diligent search was made for him, but without avail. —

" 21 — Aug 21/94. Word was received that patient had arrived at his home, near Albert Lea, and an attendant (C. T. Olsen) was today sent to bring him back. Some members of his family declined to have him returned & secreted him. — Aug 24/94. Was found & brought back this

" 24 — Evening by a Deputy Sheriff. Was put on B^s.

" 31 — Aug 31/94. Is inclined to be obstreperous. Talks but little; does not read or play games. Inclined to be lazy & indolent. Sleeps well. —

Sep 1/30 — Sep 1/94. Wt 169 pds. Pulse 88. Sep 7/94. Transferred to B^s. — Sep 30/94. Quiet & well-behaved. Has spells of restlessness at times & will then walk about a great deal. Somewhat stubborn, occasionally. Reads some. Will not talk unless addressed. Works some in the sun. —

(carried to 236)

Personal and Medical History of John Mullen #2

EBERT, FIDLAR & OHAMBERS, DAVENPORT, IOWA

Whole No. 3521.
Residence, Freeman, Minn.
Date Admission, 20th October 1893.
Admitted by, D. Phelps Hour, 11 A.M.
How Sent, Herman Blackmer, J.P., Freeborn County
Sex, Male
Age, 21 years
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Farmer
Degree Education, Slight
Profession Religion, Catholic
Habits, not intemperate
Nativity, Minnesota (Father, Ireland; Mother, Germany).
Physicians Committing, A.C. Wedge + J.A. Blackmer
Correspondents, Judge H. Blackmer (afriend)
Family Physcn J.A. Blackmer

No. for Year, 91.
Insane Relatives, Mother somewhat deficient in mind
Cause Exciting, Masturbation
Cause Predisposing, possibly some heredity
Form, Pubescent Insanity
Accompanying Bodily Disorder, no history of any
Suicidal or Not, not.
Date of this Attack, Last July
Duration, about 3 months
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 21 —
Time of Leaving, Mar. 20 '94
Time in Hospital, 5 mo.
Result, Improved.

EXAMINATION ON ADMISSION.

Exd by Dr. Eby, Nov 25/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear, at present
Quick or Sluggish, Fairly quick
MEMORY:
Past Events, good
Recent Events, quite good now
Special Subjects,
PERCEPTIVITY:
Alert or Dull, not over - alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects,
Own Mental State, Poor
Special Subjects,

EMOTIONAL STATE:
Normal, Calm, Normal
Indifferent,
Exalted,
Depressed,
DELUSIONS: None detected
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Inclined to be voluble

GENERAL DESCRIPTIVE REMARKS:
Says he is feeling much better than when he first came. Claims that his getting up + going from home, nights, was merely out of excitement - Has a foolish air about him. Has had times, when things would become all dark before his eyes. Thought he could see stars &c."

Personal and Medical History of John Mullen #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11½ WEIGHT, 137¼ lbs NUTRITION, Fairly good, at present.
WOUNDS OR ABNORMALITIES, None noted.
TONGUE, Tremors, very fine Coatings, quite heavy Promptness Movement, prompt
PUPILS, Equality, Equal Size, slightly dilated
Response Light, Yes Accommodation, Yes

John Mullen #2.
Case No. 3521 Vol. 25.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file with the original ones.

SIGHT, Quite fair
HEARING
COORDINATION
TREMOR
GENERAL
noted.

REFLEXES, Patellar, equal; about normal.
Other Reflexes,
ARTICULATION, ~~Hesitating~~, fair; some foreign accent Slurred, —
FACIAL EXPRESSION, about normal.
SENSIBILITY,
HEART, Sounds are good
LUNGS, Sounds normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Kept 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, Mother living -
Father or Pat. Relations, Father dead — don't know cause -
Brothers or Sisters, no brothers — 1 sister - claims she is healthy.
} no history of heredity obtained —

Personal and Medical History of John Mullen #2

KEARNEY, POLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3521.
Residence, Freeman, Minn.
Date Admission, 20th October 1893.
Admitted by, D. Phelps Hour, 11 AM.
How Sent, Herman Blackmer, Jct P, Freeborn County
Sex, Male
Age, 21 years
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Farmer
Degree Education, Slight
Profession Religion, Catholic
Habits, not intemperate
Nativity, Minnesota (Father, Ireland; Mother, Germany).
Physicians Committing, A.C. Wedge + F.A. Blackmer
Correspondents, Judge H. Blackmer (a friend)
Family Physician F.A. Blackmer

No. for Year, 91.
Insane Relatives, mother somewhat deficient in mind
Cause Exciting, Masturbation
Cause Predisposing, possibly some heredity
Form, Pubescent Insanity
Accompanying Bodily Disorder, no history of any
Suicidal or Not, not

Time in Hospital, 5 mo.
Result, Improved.

EXAMINATION ON ADMISSION.

Exd by Dr. Eby. Nov 25/93.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, good
Recent Events, quite good now
Special Subjects,

PERCEPTIVITY:
Alert or Dull, not over-alert
Correct or Illusive, Correct

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

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

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

HALLUCINATIONS: None noted
ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Inclined to be voluble

GENERAL DESCRIPTIVE REMARKS:
Says he is feeling much better than when he first came. Claims that his getting up + going from home, nights, was merely out of excitement - Has a foolish air about him. - Has had times, when things would become all dark before his eyes. Thought he could see stars &c."

Personal and Medical History of John Mullen #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11½ WEIGHT, 137¼ lbs NUTRITION, Fairly good, at present.
WOUNDS OR ABNORMALITIES, None noted.
TONGUE, Tremors, very fine Coatings, quite heavy Promptness Movement, prompt
PUPILS, Equality, Equal Size, slightly dilated
Response Light, Yes Accommodation Yes
SIGHT, quite Fair
HEARING, Good
COORDINATION, Arms, Finger tremor, eyes shut, some inaccuracy.
Legs, staggering, eyes shut, slight swaying. —
TREMORS, Hands, some Tongue, very fine
Facial Muscles, — General, none noted.
REFLEXES, Patellar, equal, about normal.
Other Reflexes,
ARTICULATION, ~~Hesitating~~, fair; some foreign accent Slurred, —
FACIAL EXPRESSION, about normal.
SENSIBILITY,
HEART, Sounds are good
LUNGS, Sounds normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, Record kept RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living -
Father or Pat. Relations, Father dead — Don't know cause -
Brothers or Sisters, No brothers — 1 sister - claims she is healthy.

no history of heredity obtained —

Personal and Medical History of John Mullen #2

1893 Was brought here by Deputy - Sheriff W.C. Mitchell, with the following history. There is no history of consanguinity, but mother is said to be deficient in mind. This is the 1st attack; symptoms manifesting themselves last July, by dancing and childish actions and by running away. Disease appears to be increasing, but is variable and there are rational intervals, but these not at regular periods. Derangement is now shown by childish actions, such as dancing; visiting the neighbors' houses, nights, at late hours; running races with the cars etc. He is neither disposed to injure others, nor suicidal, nor filthy nor destructive. No peculiarities previously shown. There is no history of intemperance nor of any severe disease etc or injury to head. Has been locked into his room, nights. Supposed cause of the disease is Masturbation. Has been under treatment by bromides & tonics. On Personal Examination, he says "he is insane, at times, but, afterwards, remembers his actions; "he has a queer feeling in his head". Patient had a peculiar expression of eyes. —

Oct 20 Oct 20/93. On admission, is found to be in fair physical condition. Was put on B[3]. Pulse 74 Te 98.2 Bodily condition clean. No injuries or peculiarities noted. Appetite good. Bowels seem regular. No cough noticed. Is noisy & restless today; singing part of the time. Shows delusions. Thinks he is training Charley Mitchell" & goes through some peculiar actions & motions. No complaints or injuries to note.

" 21 Oct 21/93. Slept apparently well (8 hours) last night. Am. Pulse 56. Te 98.4. Appetite good; bowels normal

" 22 Oct 22/93. Again excited & slept well, last night. Am. Pulse 70. Te 99. Seems to be more quiet this morning, than previously. Oct 23/93. Slept 8 hours, last night. Am. Pulse &c. Te 98.8 - Appetite good.

" 23

" 24 Oct 24/93 - Restless for 2 hours or so, but slept 7 hours, last night. Am " 70 - 98.4 Seems to be improving some. Oct 25/93. Slept & rested well, last night. Am. Pulse 82. Te 98.8. Appetite good. Bowels regular.

" 25

" 26 Oct 26/93. Slept 7 hours last night; restless 2 hours or so. Am. " 60 " 98.6 Oct 27/93. Slept 8 hours, being restless 7 hours, last night. Continues quiet & fairly well-behaved by day. Habits are clean.

Nov 2 Nov 2/93. Since last note on this subject, patient has been only occasionally restless at night and has slept from 7 to 8 hours each night. Conduct & behavior by day about as usual. Seems to be rather foolish in talk & actions. Evidently still holds to his delusions. Wt 167½ pds. Pulse 72. (Has

" 23 gained 10¼ pounds in weight, since coming). Nov 23/93. Visited, today, by uncle. —

" 30 Nov 30/93. Appetite good. Bowels regular. Is rather restless & talk somewhat foolish. Habits clean.

Dec 1 Dec 1/93. Wt 168 pounds. (Has made a very marked gain in flesh, 20½ pounds, in past months).

" 31 Pulse 80. Dec 31/93. Quiet & well-behaved; causes no trouble on ward. Talk is, apparently, quite sensible. Works some on the ward. Physical condition is good.

1894 Jan 1/5 Jan 2/94. Weight 166½ pds. Pulse 50. Jan 15/94. Appetite good; bowels regular. Talks quite rationally; no delusions noted. Habits clean; is in good physical condition. Works well on the ward.

" 31 Jan 31/94. No material change in patient's condition.

Feb 1 Feb 1/94. Weight 167 pounds. Pulse 80. Condition does not seem to change very much.

" 20 Feb 20/94. Was taken out today & Committed under "old Law" from Olmsted County. —

" 28 Returned to B[3]. Feb 28/94. No change to report in his condition, at this date.

Mar 1 March 1/94. Wt 171½ pds. (a further gain in flesh). Pulse 82. Well-behaved. Habits clean. Works some.

" 20 March 20/94. Was sent home, today, with his uncle. —

— Discharged —

Personal and Medical History of Charles Clausen

(P)

1894 July 2/5 July 2/94. Wt 116 pds. July 9/94. Appetite continues poor. July 23/94. No noticeable Change in patients' Condition. Sits idly about; dull; depressed. Talks none. Does no work. —

Aug 23 Aug 1/94. Wt 120 pds. Pulse 70. Aug 23/94. Appetite not good. Sits idly about, all the day; will not talk unless addressed. Seems to be failing mentally & also physically. Is very dull and depressed.

Sept 1/30 Sept 1/94. Wt 127 pds (Is gaining some in flesh). Pulse 93. Sept 27/94. Does not sleep well, at night. —

Oct 1/31 Sept 30/94. Rest & sleep at night still are poor. There is no change in Mental Condition. Is very melancholy.

Nov 1/30 Oct 1/94. Wt 129½ pds. Pulse 95. Oct 31/94. Still melancholy & Depressed. Talks none. Sits idly about all day.

Dec 1/31 Nov 1/94. Wt 130 " " 96. Nov 30/94. Sits about on seats, in a stupid & depressed condition. Works occasionally. Talks but very seldom; is tidy in dress. Dec/94. Wt 137 pds. Pulse 90. Dec 31/94. No change noted.

1895 Jan 2/31 Jan 2/95. Wt 145 pounds (has gained quite markedly in flesh, the past 2 months). Pulse 100. Jan 31/95. Beyond increase in weight, there is no change noted in either his mental or physical condition for this month. At times, he goes out for exercise; is still in a dull & stupid condition all the time. Habits are clean & tidy.

Feb 1/28 Feb 1/95. Wt 143 pds. Pulse 100. Feb 28/95. Appetite changeable. He is stupid & melancholy. Works some.

Mar 2/30 March 2/95. Wt 140 " " 100 - Transferred to D[2]. March 30/95. No change is noticeable. —

April 30 April 30/95. Keeps about the same, from month to month. Stupid & melancholy. Has work on farm, of late.

May 31 } During this quarter, no change specially noticeable. He is quiet; seldom speaks unless spoken to;
June 30 } works on farm & is a good & trustworthy worker. When onward, sits in one place; seems quite
July 31 } melancholy. Habits clean: dresses tidy & neat. Physical condition is quite good. —

Aug 1/ Sept 30 } During these 3 months, Condition has remained about the same: quiet; seems melancholy;
Oct 31 } works on farm & works faithfully; seldom speaks, unless spoken to. Health apparently good. —

Nov 4/ Dec 31 } Nov 4/95. Wt 136 pds. Pulse 80. Nov Dec & to Jany 31/96. During this period, no change noted.
1896 Jan 31 } Quiet & well-behaved; works faithfully on the farm. Seldom speaks; health is good.

Feb May & June 30 } Feb March & to April 30/96. During this period, Patient's Condition has remained about the same. Works on farm, every day. Speech is quite rational, but he seldom speaks, unless spoken to. When onward, sits in one place, and seems melancholy. Habits clean. Health apparently good. Lives along contentedly here.

May 1/96 to Feb 16/97 Summary Nurses Notes by Dr. Phelps - Patient during stay here worked on farm in an intelligent quiet & orderly way. In Dec. 96 He seemed to be growing somewhat more rational & brighter mentally but did not seem restless here & was quite contented. He seemed to be working along in a rather mechanical way & was kept here until Feb. 16 '97 when he was sent home. He can be quite justly marked as recovered as the length of time which he was here makes it quite sure: The probability is that he is back to his previous mental condition.

Discharged.

Personal and Medical History of Gust. Dohling

Whole No. 3522.
Residence, Egan Town, Dakota County
Date Admission, 20th October 1893.
Admitted by, D. Phelps Hour, 11 A.M.
How Sent, Thos. P. Moran, Jof P, Dakota County
Sex, Male
Age, 20 years
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, Limited
Profession Religion, German Evangelist
Habits, Do not know
Nativity, Germany (parents also born there).
Physicians Committing, J.C. Fitch and J.P. Caldwell.
Correspondents, Thomas Redican, Dakota Co. Minn Empire PO.

Mr Chas Raan
Egan Town (near Rosemount Dakota Co Minn)

No. for Year, 92.
Insane Relatives, Do not know
Cause Exciting, not known.
Cause Predisposing, not known
Form, Pubescent Insanity
Accompanying Bodily Disorder, do not know
Suicidal or Not, NOT
Date of this Attack, January 27th 1893
Duration, about 9 months
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 19 years
Time of Leaving, March 29th '94
Time in Hospital, 5 mo. 7d.
Result, Imp.

Crossed [illegible] committed. [illegible]

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Evaly D. Phelps, Nov 4/93.

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,

cannot be tested as he will not talk

GENERAL DESCRIPTIVE REMARKS:
Patient is in a stupid, semi-cataleptic state.

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, Will not talk at all.

cannot ascertain any thing in these points as he will not talk at all

Personal and Medical History of Gust. Dohling

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 in. WEIGHT, 127 lbs. NUTRITION, Good
WOUNDS OR ABNORMALITIES, probably none
TONGUE, (Tremors, cannot make test as cannot get him to protrude tongue)
PUPILS, Equality, Equal Size, quite dilated
Response Light, Yes Accommodation, Yes
SIGHT, probably good
HEARING, Good —
COORDINATION, Arms, } probably good.
Legs, }
TREMORS, Hands, none special Tongue, (?)
Facial Muscles, General, none
REFLEXES, Patellar, Cant get patellar reflex.
Other Reflexes,
ARTICULATION, Hesitating, wont talk — Slurred,
FACIAL EXPRESSION, Torpid + blank
SENSIBILITY, ✓
HEART, Sounds all right
LUNGS, good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good, Record kept	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,

no information can be obtained as the patient wont talk at all

Personal and Medical History of Gust Dohling

SARGENT, PIGLER & CHANDLER, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriff Thomas Redican, with the following history of case. This is rather meagre. As to consanguinity, heredity, habits, intemperance, severe disease &c or any injury to head, nothing seems to be known. This is the first attack: never before committed to hospital. First symptoms of this attack was manifested January 29th 1893, by vomiting, drowsiness, lack of muscular co-ordination, increasing daily day; unmanageable by any except the Keeper of the Poor-Farm. Disease seems increasing; not variable; no rational intervals; Derangement is now shown by conditions; inarticulate mutterings. Patient is not disposed to injure others, nor is he suicidal; no filthy or destructive habits. No peculiarities previously shown. He has not been restrained or confined. Do not know cause of disease. Case has only recently been seen. It is learnt that anti-spasmodics and electricity have been used as treatment.

On personal examination, patient is listless, stupid, moaning almost continually, giving no signs of recognition when spoken to, dilated pupils, no reflexes; saliva runs from the mouth, unconsciously; cannot use the mind long enough to answer questions. Case is judged from general & special conditions as we find them at this examination. He did nothing. Appearance & manner, listless & apathetic. The Keeper says the described conditions have existed for some time & that he only has been able to continue the patient in any manner. Patient has had no family Physician; has been treated at the County-House by the County Physicians.

Oct 20 Oct. 20/93. On admission, is in a stuporous condition. Was Put to Bed. Pulse 84. R 24. Is fairly well nourished; skin free from blemishes. No injuries or peculiarities noted. Is quite weak in limbs. Can swallow nothing but liquids & even these with difficulty. Has had no passage of bowels since his admission, nor made his water, either. No cough noticed. Is quiet & well-behaved; appears inactive and cataleptic. Wont talk: keeps muttering, in a low voice, to himself, but is mostly silent. Eyes staring & can't

" 21 P.M. Pulse 80. R 22. Oct 21/93. Slept well, last night. A.M. Pulse 96. R 30. Is much inclined to sleep all the time. Is still in the same half-unconscious condition. Talk none; makes only low mutterings. Has no desire for food, and it is only by force that the liquids he has taken have been got down his throat. He has not passed water nor had a movement of the bowels since his admission (now 48 hours).

" 22 Oct 22/93. Sleeps from the time he is put to bed, till he is taken out of bed in the morning, without moving his position. A.M. Pulse 98. R 24. Talks none. Still has to be forced to take food & scarcely takes enough to sustain life. Made his water yesterday, but bowels have been badly constipated, past 3 days.

" 23 Oct 23/93. Patient the same; never moves from the position in which he is placed. Pulse 104, irregular. Made his water last night for the second time since admission, but bowels still badly constipated (4 days, now).

" 24 Oct 24/93. Not as somnolent as yesterday. He got up 3 times & went to W.C. without assistance. Was given 2 injections yesterday (afternoon & evening) & patient got some relief, though slight. Pulse 96; irregular & weak. Oct 25/93. A.M. Pulse 88. Patient is not improving; bowels much constipated,

" 26 injections given do not have much effect. Oct 26/93. Still the same. Sleeping most of the time. No appetite. Has much difficulty in swallowing, notwithstanding medicine given him & injections, has not had but one slight passage from bowels, since admission (7 days ago). Pulse 92. —

" 27 Oct 27/93. Patient brightening up a little. Walked to W.C. yesterday afternoon without assistance. Still has to be forced to take food. Has slept well, at night. Mutters to himself; moans a good deal, as if in pain

" 28 Pulse 84. Has had no passage of bowels, yet. Oct 28/93. Patient does not keep his eyes shut quite so

Personal and Medical History of Gust Dohling

1893

Oct 28 much, as at first. Food still has to be forced down his throat. Pulse 82. Still constipated.

" 29 Oct 29/93. Does not appear to suffer any pain. Pulse 80, this A.M. No movement of bowels as yet.

" 30 Oct 30/93. Patient continues the same; without motion or any knowledge of what is passing around him. A.M. Pulse 84. Constipation still persists. Oct 31/93. Seems to be getting more helpless, and rarely wakes up out of the Cataleptic sleep. No appetite. Has had no passage of the bowels yet. Pulse 90. ——— " ———

Nov 1 Nov 1/93. Patient still the same. Slept 9 hours, last night. A.M. Pulse 80. R 22. Has no appetite. Had a natural passage of bowels yesterday, before noon; no cough noticed. Does not appear to

" 2 suffer any pain, but his limbs tremble at short intervals. Nov 2/93. Is still forced to swallow his food. Has had only one movement of the bowels, since admission. There are "spells" of trembling.

" 3 Has caught a slight cold. Pulse 76. Nov 3/93. Slept 9 hours last night. Patient took considerable of Cathartic medicine; even croton oil not operating. His history is that of going to St. Paul Hospital, with stomach-trouble, improving, and then falling into a cataleptic state, (which was called a 14 months' sleep), not coming out suddenly, but gradually. Was then much emaciated. — Weight 123 pounds. (Has lost a few pounds in weight). Pulse 82. Patient

" 30 was visited by a clergyman on 1st inst. Nov 30/93. Appetite is very poor, has to be fed. Bowels are very constipated. No cough noticed, but he has eructations & vomitings after each meal. He appears oblivious of his surroundings &c, apparently, asleep, about half the day, in his Chair. Patient is quiet and well-behaved. Cannot be got to talk or take the slightest interest in anything. (Was dirty 14 Days during the month).

Dec 27/31 Dec 27/93. Wt 122 pounds. Pulse 80. Dec 31/93. Has changed some, during the past month. Grew, slowly, more active, and was even somewhat noisy, in a sluggish way. For past few days he has been vomiting a good deal; whether voluntary or not, it is hard to say. Health is poor.

1894
Jan 1 Jan 1/94. Wt 105 pounds. Pulse 84. (Has lost very markedly in flesh, in past month.) —

" 31 Jan 31/94. During last two weeks, patient's appetite has greatly improved & he now eats well. His physical condition has also improved in a marked degree. Behavior is good, although, at times, he is inclined to be prejudistic. Talks freely & easily, but his mind still appears to be clouded, to some extent. He is, at this date, cleanly in habits, but was 4 days dirty, during the month.

Feb 1/28 Feb 1/94. Wt 113 pds. (Has gained 8 pounds, in past month). Pulse 86. Feb 26/94. Was vaccinated to day.

" 28 Feb 28/94. Apparently sleeps well, at night. Appetite good. Bowels regular; no cough noticed. — Behavior is generally good, but patient is bad-tempered, obstinate and difficult to manage. — When walking, has the habit of turning round 2 or 3 times, then going straight ahead. Talks quite rationally & appears to have quite recovered his mental faculties. Has so much improved that he is now able to work some in the ward, and seems in good Physical health. Habits clean.

Mar 10/27 March 10/94. No change to note. Mar 27/94. Appetite continues good. Bowels regular. — Is still inclined to be fragmentary & obstinate. Has a very bad temper, as mean disposition and is very annoying to the attendants. Talks freely & rationally. Works well in the ward. Is, apparently, in good bodily health. Habits continue cleanly.

Went home to day with his brother.

Crossed off the Records — Illegally Committed —

Personal and Medical History of Pete (Peter) Ole Marken

FORBES, FISLAR & SHAMBERG, DAVENPORT, IOWA

Whole No. 3524.
Residence, Minneapolis, Minn.
Date Admission, 21st October 1893.
Admitted by, D. Kilbourne Hour, 7 P.M.
How Sent, W. K. Kerr. Ct Comrs Hennepin County
Sex, Male
Age, 26
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Common Laborer
Degree Education, None
Profession Religion, Attends Swedish Lutheran
Habits, unknown
Nativity, Sweden (parents also born there).
Physicians Committing, H. L. Staples and F. J. Grant
Correspondents, unknown

No. for Year, 94
Insane Relatives, unknown
Cause Exciting, unknown
Cause Predisposing, previous attack
Form, Acute Mania
Accompanying Bodily Disorder, unknown
Suicidal or Not, unknown
Date of this Attack, unknown
Duration, unknown
No. of Attack, probably 2d (me), four months ago).
No. of Admissions, 1st
Age First Attack, about 25.
Time of Leaving, June 29. 1897
Time in Hospital, 3 yrs. 8 mo. 8 d.
Result, Transferred to Fergus Falls.

J.K.P.M.

EXAMINATION ON ADMISSION.

Exd by Dr Ely; Nov 11/93 = (Attendant nels nelson interpreting)

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, fairly clear
Quick or Sluggish, quick

MEMORY:
Past Events,
Recent Events, } seems quite good
Special Subjects,

PERCEPTIVITY:
Alert or Dull, } quite good
Correct or Illusive,

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

GENERAL DESCRIPTIVE REMARKS:
Cannot speak English — Examination conducted through interpreter (Att Nels Nelson). Says he is dizzy in morning but feels better as day goes on. Tells, with great laughing, the story of his digging for Gold & the Policeman coming & taking him to the Court-house. Still thinks he would find the gold, if keeping long enough. —

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

DELUSIONS:
Systematized or ~~Not,~~ offering gold by digging.
Special Subjects,
Transitory or Not,

HALLUCINATIONS: ?

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent and
Voluble or Reticent, quite free, in own language.

Personal and Medical History of Pete Ole Marken

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet ½ in WEIGHT, 197½ pds. NUTRITION, Seems quite fair
WOUNDS OR ABNORMALITIES, none noted
TONGUE, Tremors, marked Coatings, quite heavy Promptness Movement, prompt
PUPILS, Equality, Equal Size, about normal
Response Light, Yes Accommodation, Yes
SIGHT, probably good
HEARING, seems normal
COORDINATION, Arms,) quite steady.

Peter Ole Marken.
Case No. 3524 Vol. 25.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file with the original ones.

FACIAL EXPRESSION, vacant & staring, but brightens up when interpreter speaks to him.
SENSIBILITY, normal
HEART, Sounds are good
LUNGS, Sounds good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Seems kept Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother living; in Sweden; was well 1 year ago.
Father or Pat. Relations, Father living " " " "
Brothers or Sisters,
} no history of heredity obtained. —

Personal and Medical History of Pete (Peter) Ole Marken

LIBERTY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3524

Residence, Minneapolis, Minn.

Date Admission, 21st October 1893.

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

How Sent, H. A. Kerr, Ct Commr. Hennepin County

Sex, Male

Age, 26

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Common Laborer

Degree Education, None

Profession Religion, Attends Swedish Lutheran

Habits, unknown

Nativity, Sweden (Parents also born there).

Physicians Committing, H. L. Staples and J. G. Grant

Correspondents, unknown

No. for Year, 94

Insane Relatives, unknown

Cause Exciting, unknown

Cause Predisposing, previous attack

Form, Acute Mania

Accompanying Bodily Disorder, unknown

Suicidal or Not, unknown

Date of this Attack, unknown

Duration, unknown

No. of Attack, probably 2d (one) four months ago).

J. K. Jpm

EXAMINATION ON ADMISSION.

Exd by Dr Ely; Nov 11/93 = (Attendant tells below interpreting)

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, quick

MEMORY:

Past Events,

Recent Events, } seems quite good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, } quite good

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State, poor

Special Subjects,

EMOTIONAL STATE:

Normal, Calm, Yes

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or ~~Not,~~ offering gold by digging.

Special Subjects,

Transitory or Not,

HALLUCINATIONS: ?

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent and

Voluble or Reticent, quite free, in own language.

GENERAL DESCRIPTIVE REMARKS:

Cannot speak English — Examination conducted through Interpreter (Att. tells below). Says he is dizzy in morning but feels better as day goes on. Tells, with great laughing, the story of his digging for Gold & the Policeman coming & taking him to the Court-house. Still thinks he would find the gold, if he dug long enough. —

Personal and Medical History of Pete Ole Marken

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet ½ in WEIGHT, 197½ pds. NUTRITION, Seems quite fair

WOUNDS OR ABNORMALITIES, none noted

TONGUE, Tremors, marked Coatings, quite heavy Promptness Movement, prompt

PUPILS, Equality, Equal Size, abnt normal

Response Light, Yes Accommodation, Yes

SIGHT, probably good

HEARING, seems normal

COORDINATION, Arms, } Quite Good. Standing, eyes shut, quite steady.

Legs, }

TREMORS, Hands, slight Tongue, marked

Facial Muscles, General, none

REFLEXES, Patellar, equal; about 6.

Other Reflexes,

ARTICULATION, Hesitating, — Slurred, —

FACIAL EXPRESSION, vacant & staring, but brightens up when interpreter speaks to him.

SENSIBILITY, normal

HEART, Sounds are good

LUNGS, Sounds good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Seems kept 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 heredity obtained. —

Mother or Mat. Relations, Mother living; in Sweden; was well 1 year ago.

Father or Pat. Relations, Father living " " " "

Brothers or Sisters,

Personal and Medical History of Pete Ole Marken

EMBERT, FIDLAR & KHAMBERS, DAVENPORT, IOWA.

1893

This patient was received here at the hands of Deputy Sheriff Adolf Peterson & Wm. Humphrey, with the following history. There is no history of Consanguinity; as to heredity unknown. This is not 1st attack; had one 4 months ago; duration unknown. When first symptoms of this attack were manifested, as to disposition to injure others, fiendal propensities, previous peculiarities &c, history of intemperance, severe disease &c of head - injury, nothing seems to be known. Disease appears to be increasing in no rational intervals. Derangement is now shown by his wandering in the woods; by delusions and hallucinations; digging in ground; seeing spirits; imagining that a man is endeavoring to kill him. Is disposed to filthy & destructive habits. He has not been restrained or confined. Cause of the disease is unknown. It is also unknown if he has been under medical treatment. —— On personal examination, there are noted, a vacant expression, incoherent talking, filthy appearance. Examiners could get no statement from him. Appearance & manner, as stated. A Policeman found him wandering in the woods; talking wildly; seeing strange figures; striving to destroy a man who was at enmity with him.

Oct 21/93. Patient, on admission, was put on B.; bodily condition, seen at bath, dirty. No injuries or peculiarities noted. Oct 22/93. Slept 8 hours last night. AM. Pulse 100. T(e) 99.2. Appetite good; bowels seem regular. No cough noticed. Says he had a vision, one night, that he could find gold in a hill at Brainard & went up there & dug for 4 days, when he went to Minneapolis, thinking he could take the land as homestead; was then sent down here. Is quietly behaved, on ward. No complaints or injuries.

Oct 23/93. Slept well, eight hours, last night. AM. Pulse 100. T(e) 98.6. Appetite good. Bowels normal. Reads the Bible most of the time. Can't speak English. Converses freely about the past in his native language. Oct 24/93. Was restless a couple of hours, last night, but slept 7 hours. AM. Pulse 70. T(e) 99.4. Works some on ward. Oct 25/93. Quiet, sleeping 8 hours, last night. AM. Pulse 100. T(e) 99.6. — Oct 26/93. Was restless for 3 hours, sleeping but 5 hours, last night. AM. Pulse 72. T(e) 99.4. Is quiet and well-behaved. Appetite continues good. Bowels regular. Keeps with hall-work. Oct 27/93. Slept 8 hours last night. AM. Pulse 72. T(e) 100.2. Oct 28/93. Rested & slept well, last night. AM. Pulse 76. T(e) 99.4. Maintains the same rather dull manner. Is quiet & perfectly obedient. Oct 29/93 AM " 80 " 99.6. Oct 30/93. AM. Pulse 100. T(e) 99.6. Oct 31/93. AM. Pulse 78. T(e) 100. (working & heated when Temp.e taken).

Nov 1/93. Weight, today, 203 pounds. Has made a slight gain in flesh. Nov 2/93. AM. Pulse 106. T(e) 99.8. Nov 3/93. AM. Pulse 102; T(e) 99.8, when heated: (99.2 when not heated). Nov 4/93 AM " 120. " 100.8 (heated). Nov 5/93. Patient has, as a rule, slept well during the past week, only on two nights being somewhat restless. Appetite has continued good & bowels regular. Is a very quiet and well-behaved patient; never causing any trouble. Works on ward. Is always willing to do anything requested of him. Pulse 100. T(e) 100. taken when heated; T(e) 99. (2 hours later when not heated)

Nov 6/93. Pulse 120 T(e) 99.8. Nov 7/93. Pulse 120. T(e) 99.6. Nov 8/93. Pulse 120 T(e) 99.2. — Nov 9/93. Pulse 82. T(e) 100 (not heated). Nov 10/93. Pulse 120. T(e) 100 (heated). T(e) 99.4, when not heated. Nov 11/93. Pulse 104. T(e) 100 (heated). T(e) 99.6. (when not heated). Nov 12/93. Pulse 120. T(e) 100. (heated). Nov 13/93. Pulse 124. T(e) 101. (quite warm). T(e) 99.4 (when not heated). Nov 14/93. Pulse 120 (T(e) 99.5 not heated). Nov 15/93. Pulse 120. T(e) 100. Nov 16/93. Pulse 90. T(e) 99.6 (not heated). Nov 17/93. Pulse 95. T(e) 99. — Nov 18/93. Pulse 104. T(e) 99.4 (slightly warm). Nov 19/93. Pulse 92. T(e) 99.2. Nov 20/93. Pulse 105. T(e) 99. — Nov 21/93. Pulse 118. T(e) 99. Nov 22/93. Pulse 120. T(e) 99.4. Nov 23/93. Pulse 114. T(e) 99. Nov 24/93 P 120. T(e) 99.2

Personal and Medical History of Pete Ole Marken

1893

Nov 25/93. Pulse 120 T(e) 99.4. Nov 26/93. Pulse 126 T(e) 100. Nov 27/93. Pulse 120 T(e) 99. — Patient, of late, appears to be growing worse; says, now, "he can see Ghosts & converse with them". He is not as talkative as when first brought in. Seems to be in a dull state of mind. Works a little at the ward.

Nov 28/93. Pulse 120. T(e) 99.4. Nov 29/93. Pulse 130 T(e) 99.4. Nov 30/93. Pulse 114. T(e) 99.2. Appetite is good; bowels regular. Is quietly behaved. Hardly ever speaks to anyone. Manifests delusions, and illusions. Works some in the ward. Habits are neat and clean.

Dec 1/93. Dec 2/93. Pulse 120 T(e) 99.2. Dec 3/93. Pulse 75 T(e) 100. Dec 4/93. Has not taken any food, now, for 3 meals. Says "he is not going to eat anymore, as he can get along without it". Wt 197 pounds (has lost 6 pounds, in past 4 weeks). Pulse 72. Dec 5/93. Has not eaten anything for 7 meals. Ate supper, however, last evening and breakfast this morning. Dec 31/93. Appetite for the past 4 weeks, has been good (with exception above noted). Bowels regular. Still shows delusions & illusions. Is fairly well-behaved. Seems, however, to be growing worse, on the whole. Thinks "that some of the patients are spirits". Works some in the ward. Habits are cleanly. —

1894

Jan 2/94. Jan 2/94. Wt 199 pds. Pulse 96. Jan 31/94. No noticeable change in patient's condition. —

Feb 1/94. Feb 1/94. Wt 196½ pds. Pulse 92. Feb 28/94. Appetite good; bowels regular. Is quietly behaved - occasionally "cranky". Talks incoherently, showing delusions. Physical condition is good. — Habits are clean. Works well & willingly, on the ward. —

Feb 24/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. He was, today, Taken Out and Returned under new Warrant from Olmsted County. Feby 28/94. no change to report since last general note. —

March 1/94. Wt 191 pds. (is losing some in flesh, without apparent cause). March 31/94. Appetite good; bowels regular; talks sensibly, though still shows delusions. Behavior is very good and he is a good and willing worker on the ward. Habits neat & clean. Physical condition good. —

April 5/94. While in dining-room today, threw a bone & struck Jo. Bricke, causing a slight scalp-wound. April 6/94. Wt 192 pds. Pulse 70. April 27/94. Struck a fellow-patient (Peter Dalen) over the eye, causing a slight abrasion of the skin. April 30/94. Patient's condition does not change noticeably.

May 1/94. Wt 191 pds. Pulse 96. May 31/94. Patient's condition is about as described in note of March 31st.

June 2/94. Wt 193 " " 105. June 30/94. There is no change to report regarding this patient.

July 2/94. Wt 191 " " 108. July 23/94. About as usual. Today, was transferred to B. —

July 31/94. Quiet & well-behaved. Talks but little; fairly rational. Still seems to hold his delusions. Works at daily with man, carrying clothes to the various halls. Seems good physical health.

Aug. 1/94. Wt 181 pds. (has lost 14 pounds in weight in past month; hard work at cook may account for this).

Aug 31/94. Quiet & well behaved. Keeps about the same all the while. Has no "spells". Inclined to be alone. Works outside, daily, with the laundry-man. Appetite good; health good. —

Sept 3/94. Wt 190 pds (has recovered some of his lost flesh). Pulse 84. Sept 17/94. Refused to work any longer with the laundry man & is now going to remain on the ward. Sept 30/94. No special change. Works some on the ward. Appears to be quite contented. Physical condition good.

Oct 31/94. Wt 189 pds. P 100. Oct 31/94. Keeps about the same from month to month. Habits clean.

Nov 1/94. Wt 184½ " " 83. Dec 3/94. Wt 190½ pds. Pulse 96. Dec 17/94. Complains of being sick at his stomach, last night. Appetite is fair, bowels regular. Physical health good

(carried to page 224)

Personal and Medical History of Charles Clanson (P)

FERRY, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3525.
Residence, Minneapolis, Minn.
Date Admission, 21st October 1893.
Admitted by, D. Kilbourne Hour, 1 P.M.
How Sent, W. A. Kerr, Ct Commr. Hennepin County
Sex, Male
Age, 45
Civil Condition, married
Children, Three
Age Youngest Child, ——
Occupation, Common Laborer
Degree Education, none
Profession Religion, Not a Church member
Habits, not intemperate
Nativity, Sweden (parents also born there).
Physicians Committing, H. B. Staples + J. G. Grant
Correspondents, John J. Clanson, 3315-3381 No. 14th
Family Physician Dr. Whiston 14th Minn

No. for Year, 95.
Insane Relatives, one sister
Cause Exciting, Fever and Sunstroke (result of)
Cause Predisposing, Heredity
Form, Acute Melancholia
Accompanying Bodily Disorder, Lasted fever + Sunstroke
Suicidal or Not, Attempted it, by an axe
Date of this Attack, 4 months ago (after Sunstroke)
Duration, 4 months —
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 44.
Time of Leaving, Feb. 16. 1897.
Time in Hospital, 3 yrs. 3 mos. 26 ds.
Result, Discharged 2/16/97. Recov.

EXAMINATION ON ADMISSION.

Exd by Dr. Ely, Oct 30/93.

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:
Cant obtain any particulars in above points, as patient will not speak, or answer any questions.

EMOTIONAL STATE:
- Normal, Calm,
- Indifferent,
- Exalted,
- Depressed, yes

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

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
- Coherent or Incoherent,
- Voluble or Reticent, reticent

Patient seems dull, depressed + stupid. Does not seem to understand English well; fairly willing to do some things, but does not speak at all

Personal and Medical History of Charles Clanson (P)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet. WEIGHT, 118 pds NUTRITION, much below normal; anaemic
WOUNDS OR ABNORMALITIES, ✓
TONGUE, Tremors, quite tremulous Coatings, none Promptness Movement, prompt
PUPILS, Equality, equal Size, about normal
Response Light, Accommodation,
SIGHT, probably fair
HEARING, probably fair

Chas. P. Clauson.
Vol. 25.
Case No. 3525.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

Slurred, —

FACIAL EXPRESSION, Depressed look.
SENSIBILITY,
HEART, Sounds are good
LUNGS, Sounds good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Records kept

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 4 months ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, ✓
Father or Pat. Relations, ✓
Brothers or Sisters, one sister Insane

Personal and Medical History of Charles Clanson (P)

ROBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3525.
Residence, Minneapolis, Minn.
Date Admission, 21st October 1893.
Admitted by, Dr Kellogg and Hour, 1 PM
How Sent, W. A. Kerr, Ct Commr. Hennepin County
Sex, Male
Age, 45
Civil Condition, married
Children, three
Age Youngest Child, ——
Occupation, Common Laborer
Degree Education, none
Profession Religion, not a Church member
Habits, not intemperate
Nativity, Sweden (parents also born there)
Physicians Committing, H L Staples + J G Gray
Correspondents, John F. Clanson, 3315-3rd Av. So. Minn
Family Physician Dr Holcister Minneapolis Minn

No. for Year, 95.
Insane Relatives, one sister
Cause Exciting, Fever and Sunstroke (result of)
Cause Predisposing, Heredity
Form, Acute Melancholia
Accompanying Bodily Disorder, Lasted fever + sunstroke
Suicidal or Not, Attempted it, by an axe
Date of this Attack, 4 months ago (after sunstroke)
Duration, 4 months

EXAMINATION ON ADMISSION.

Exd by Dr Ely, Oct 30/93.

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:
Cant obtain any particulars, as above points, as patient will not speak, or answer any questions.—

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, yes
DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent, reticent
Patient seems dull, depressed + stupid. Does not seem to understand English well; fairly willing to do somethings, but does not speak at all.

Personal and Medical History of Charles Clanson (P)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet WEIGHT, 118 pds NUTRITION, Much below normal; anaemic
WOUNDS OR ABNORMALITIES, ✓
TONGUE, Tremors, quite tremulous Coatings, some Promptness Movement, prompt
PUPILS, Equality, equal Size, abnt normal
Response Light, (?) Accommodation,
SIGHT, probably fair
HEARING, probably fair
COORDINATION, Arms, } cannot test this, as he does not seem to understand what is required
Legs, } of him.
TREMORS, Hands, Tongue, Quite tremulous
Facial Muscles, General,
REFLEXES, Patellar, equal; abnt +
Other Reflexes,
ARTICULATION, Hesitating, (wont speak) Slurred, —
FACIAL EXPRESSION, Depressed look.
SENSIBILITY,
HEART, Sounds are good
LUNGS, Sounds good
EXAM. URINE.

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

Records Kept

HISTORICAL.

LENGTH OF INVASION, 4 months ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, ✓
Father or Pat. Relations, ✓
Brothers or Sisters, one sister Insane

Personal and Medical History of Charles (C) Clanson

LIBBEY, PIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893

This patient was received here at the hands of Deputy Sheriff Adolf Peterson & Wm Humphrey with the following history of case. No consanguinity; some history of heredity, one sister being insane. This is 1st attack. Symptoms appearing immediately after a sunstroke four months ago; showed an inability to work; loss of sleep & memory; lately, suicidal tendencies. Disease seems to be increasing. No rational symptoms. Is, now, maniacal at times; & uncontrolable. Tried to kill herself with an axe; propensity now active. Has shown no disposition to injure others. Has filthy & destructive habit. She had a fever 4 years ago; was delirious seven weeks. There is no history of intemperance. Has been in Jail for 2 days. Result of disease supposed to be the cause of this attack. Not known if she has been under medical treatment. On personal examination, has a vacant & unkempt appearance; there are also loss of memory, nervous twitchings &c. She also refuses food. She made no satisfactory answers to questions. ——

Oct 21/93. On admission, was put on B²; Pulse 78. T. 99.6. Bodily condition very dirty. No injuries or peculiarities noted. Oct 22/93. Was very restless last night; out of bed, & slept but 2 hours. Am. P 80 T 99.6. Appetite poor. Stands about the hall. Does not seem to comprehend when spoken to. Talks none. Has some cough. No complaints or injuries to note. Pm. Pulse 78. T 99.8. Oct 23/93. Slept somewhat better, 7 hours, last night. Was quiet. Am. Pulse 78. T 99. Appetite very poor. Stands about hall in a dull, stupid manner. Talks none. Pm " 78 " 99.4. Oct 24/93. Was quite restless last night and slept only 4 hours. Am Pulse 78. T 99.2. No change in conduct or behavior, by day. — Pm Pulse 76. T 99. Oct 25/93. Was restless for 5 hours last night, sleeping but 3 hours. Am. Pulse 76. Is also restless during day. Walks aimlessly about hall, taking hold of patients. Does not seem to know what he is doing. Appetite very poor. Does not talk any. Oct 26/93. Slept 5 hours, being restless for 3 hours, last night. Am. Pulse 76. Keeps about as above, by day. Talks no English. Oct 27/93. Was very restless, last night, but slept 5 hours. Appetite poor; eats but little. Very stupid. Pulse this Am. 72. Oct 28/93. Slept 6 hours last night; was somewhat restless. Am. Pulse 70. Still eats but very little. Mucid seems very weak. Is very restless during the day. Oct 29/93. Passed a poor night, last night, very restless, slept only 3 hours. Am. Pulse 70. Is still rather stupid but not so bad as at time of Coming. Cannot talk English & seldom speaks in his own language. Appetite still poor. Works on ward, some. Wants to go home. Oct 30/93. Rested & slept well (8 hours) last night. Pulse has become normal. Has examined in office, to day. He seemed dull, depressed and stupid. Was fairly willing to do something, but would not speak at all, so that "Mental Characteristics &c" could not be judged of. —

Nov 5/93. On 3. of the past 6 nights, patient has been fairly restful & has slept from 7 to 8 hours, each. On the other 3 nights, sleep has been broken; he has been restless & at times, noisy & then sleeping only 4 or 5 hours on each. Appetite, sometimes good; at others, poor. Bowels generally regular. Pulse normal. Talks some with the others. Keeped for a while with the work on ward, but does so now, only occasionally. At times, is nervous & restless, by day. Goes out walking. Has not been repeated as filthy & destructive, since admission. Weight, on 1st inst. 121½ lbs (a slight gain). Pulse 72. Nov 8/93. Has been quite noisy, the past 3 nights, sleeping only from 4 to 6 hours, each. Has also been restless by day. Appetite poor. Nov 9/93. Very noisy, sleeping but 2 hours, last night. Nov 10/93. Again noisy, last night, sleeping only 4 hours. Appetite reducing. Walks out with the rest, sometimes. Works some on the ward. Nov 11/93. Slept but 5 hours last night; was quite restless. Nov 30/93. Appetite poor, and he is losing in flesh. Talks but little. Is deluded. Makes no improvement; works some on the ward. Makes no complaints.

Personal and Medical History of Charles (P) Clausen

1893 cont'd

Nov 30 - Dec 11 Dec 11/93. Wt 120 lbs. Pulse 82. Dec 11/93. Appetite poor. No perceptible change in his condition. —

" 31 Dec 31/93. Apparently sleeps well, at night, now. Appetite is very poor. Patient is dull & listless; sits about on a bench most of the time. Talks but very little. —

1894

Jan 15 Jan 15/94. Wt 119 lbs. Pulse 80. Jan 15/94. Seems losing gradually. Takes Emulsion of Malt and

" 31 cod-liver oil. Jan 31/94. Eats but little; is losing in flesh. Continues to take also emulsion. Talks but little; seems depressed. Works some on the ward.

1894 Oct 2	HOUR		PULSE	
DATE	AM	PM	AM	PM
1		5		60
2	7	5	60	66
3	7	5	64	56
4	7	5	60	56
5	7	5	66	54
6	7	5	58	56
7	7	5	60	58
8	7	5	60	50
9	7	5	60	72
10	7	5	70	70
11	7	5	68	52
12	7	5	70	62
13	7	5	76	56
14	7	5	60	66
15	7	5	76	68
16	7	5	68	54
17		5		64
18	7	5	72	60
19		5		60
20	7	5	60	60
21	7	5	72	64
22		5		70
23	7	5	60	66
24	7	5	72	74
25	7		64	
26	7	5	72	64
27	7	5	64	60
28	7	5	64	58
29				
30	7	5	70	60
31	7	5	68	66

Feb 7/94. Was restless for part of the time & slept but 2 hours, last night. Appetite is very poor. Is losing in flesh (a loss of 7½ lbs, in the past month). Pulse 68. Feb 7/94. Was restless for part of the time & slept but 2 hours, last night. Appetite is very poor. Eats but little, but will take milk quite freely. Feb 22/94. Eats but little but talks but little to others; talks to himself at times. Melancholy; looks some. He was committed here under the "Law of 1893" recently declared insane today. Taken Out and Returned under "New Warrant" from Feb 25/94. Does not change very much. Sits about most of the time; makes some in the ward. Habits are clean. Patient seems much depressed. — Pulse 68. March 3/94. Patient seems to be "running down" generally. Is C², the "Sick ward", and put to bed. March 6/94. Appetite fairly good; quietly in bed & talks fairly rationally. March 10/94. Complains, today, March 14/94. Lies in bed, steadily. Is very quiet; talks but little; Appetite regular. March 19/94. Complains of pain in his lungs, at times. Is very dull; sleeps a great deal during the day. March 29/94. Has seemed last few days. Appetite good, bowels regular. March 30/94. 8 Am. ght lung. Lies steadily in bed; remains there quietly. — clothing) 112½ lbs. Has a passage, last night (at 10 Pm). Appetite Good; bowels Is Failing; only seems despondent. Lies steadily in bed. Was vaccinated today. Is Sedative, of late. Talks, at times, quite freely. Appetite Continues good. night, had a passage. Since last noted, & while being on this ward, patient 2 hours nightly. April 8/94. Appetite good; bowels more regular; he appears up. April 9/94. Was got up & dressed: remained upon ward, all day. up, on ward, daily. Appetite is poor; he has to be urged in order to get him gular. April 21/94. Patient was given "Massage Treatment" today. — a "massage treatment" today. April 27/94. Another treatment, today. — is continued up, daily; sits in one place, all the day. Will not eat, unless gular. Patient seems very despondent, at times. — all today; appetite not very good; bowels regular. Massage treatment is continued. improved very rapidly; always appears despondent; as a rule, will eat dily. May 6/94. About the same. Sleeps about 6 or 7 hours, nightly. 3rd. May 23/94. Eats but little. May 31/94. Quiet; very stupid & dull. Sits about on a seat most of the time. Does no work. — Pulse 70. June 30/94. About the same, for the past 3 months. —

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Personal and Medical History of Charles Clanson (P)

TABBERT, FICKLER & CHAMBERS, DAVENPORT, IOWA

1893

This patient was received here at the hands of Deputy Sheriff Adolf Peterson & Wm Humphrey with the following history of Case. No consanguinity; some history of heredity, ancestor insane. This is 1st attack. Symptoms appearing immediately after a sunstroke four months ago. Inability to work; loss of sleep & memory; lately, suicidal tendencies. Disease seems to be no rational symptoms. Is, now, maniacal at times; & uncontrolable. Tried to hie[ ] an axe; propensity now active. Has shown no disposition to injure others. He had a fever 4 years ago; was delirious seven weeks. There is no history [ ] been in Jail for 2 days. Result of diseases supposed to be the cause of this [ ] been under medical treatment. On personal examination, has a[ ] there are also loss of memory, nervous twitchings &c. He also rel[ ] -factory answers to questions. ——

Oct 21/93. On admission, temperature B²; Pulse 78. R(e) 99.6 [ ] & peculiarities noted. Oct 22/93. Was very restless last night [ ] R(e) 99.6. Appetite poor. Stands about the hall. Does not se[ ]

" 23 Has some Cough. No complaints or injuries to note. PM [ ] better, 7 hours, last night. Was quiet. AM. Pulse [ ]

" 24 a dull, stupid manner. Talks none. PM [ ] night and slept only 4 hours. AM Pulse 78

" 25 PM Pulse 78. R(e) 99. Oct 25/93. Was restless [ ] Is also restless during day. Walks a[ ] know what he is doing. Appetite s[ ]

" 27 for 3 hours, last night. AM C[ ] very restless, last night, but slept [ ]

" 28 Oct 28/93. Slept 6 hours las[ ]

" 29 Incid Seems very weak [ ] very restless, slept onl[ ] Coming. Cannot tal[ ]

" 30 Same. Wants to [ ] Has examined, in office [ ] but would not speak [ ]

Nov 5 Nov 5/93. On 3, of the past 6 [ ] other 3 nights, sleep has been broken [ ] Appetite, Sometimes Good; at others, [ ] others. Sleeped for a while with the work attendant, but does so now, only occasionally. At times, is nervous & restless, by day. Goes out walking. Has not been reported as filthy or destructive, since admission. Weight

" 8 on 1st inst, 121½ pds (a slight gain); Pulse 78. Nov 8/93. Has been quite noisy, the past 3 night, sleeping only

" 9 from 4 to 6 hours, in each. Has also been restless by day. Appetite poor. Nov 9/93. Very noisy, sleeping

" 10 but 2 hours, last night. Nov 10/93. Again noisy, last night, sleeping only 4 hours. Appetite refractive. Walks

" 11 out, with the rest, sometimes. Broke some in the ward. Nov 11/93. Slept but 5 hours last night; was quite restless.

" 30 Nov 30/93. Appetite poor, and he is losing in flesh. Talks but little. Is deluded. Makes no improve-

Personal and Medical History of Charles Clausen (P)

1893 cont'd

Nov 30 -ment, Walks some in the ward. Makes no complaints.

Dec 11 Dec 11/93. Wt 120 pds. Pulse 82. Dec 11/93. Appetite poor. No perceptible Change in her condition. —

" 31 Dec 31/93. Apparently sleeps well, at night, now. Appetite is very poor. Patient is dull & restless; sits about on a bench most of the time. Talks but very little. —

1894

Jan 15 Jan 5/94. Wt 119 pds. Pulse 80. Jan 15/94. Seems losing gradually. Takes Emulsion of Malt and cod-liver oil. Jan 31/94. Eats but little; is losing in flesh. Continues to take also emulsion. Talks but [ ]ttle; seems depressed. Walks some in the ward.

1894 @ 2.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RE AM	RE P
April 2	7	5	60	60		
3	7	5	72	64		
4	7	5	76	66		
5	7	5	64	64		
6	7		62			
7	7	5	70	64		
8	7	5	66	60		
9	7	5	70			
10	7	5				
11	7	5				
12						
14						
21						
24						
27						
30						

(Wt 112½ pds (a loss of 7½ pds, in the past month). Pulse 68. Feb 7/94. Was restless for [ ] part of the time & slept but 2 hours, last night. Appetite is very poor. [ ] little, but will take milk quite freely. Feb 22/94. Eats but little but [ ] talks but little to others; talks to himself at times. Melancholy; looks sad. [ ] was committed here under the "Law of 1893" recently declared uncon- [ ] today. Taken Out and Returned under "New Warrant" from [ ] Feb 28/94. Does not change very much. Sits about most of the time; makes [ ]me in the ward. Habits are clean. Patient seems much depressed. —

[ ]s. Pulse 68. March 3/94. Patient seems to be "running down" generally. [ ] to C², the "Sick ward", and put to bed. March 5/94. Appetite fairly good; [ ] quietly in bed & talks fairly rationally. March 10/94. Complains, today, [ ] March 14/94. Lies in bed, steadily. Is very quiet; talks but little; Ap- [ ]vels regular. March 19/94. Complains of pain in his lungs, at times. [ ] very dull; sleeps a great deal during the day. March 29/94. Has seemed [ ] past few days. Appetite good; bowels regular. March 30/94. 8 PM. [ ]ight lung. Lies steadily in bed; remains there quietly. —

[ ]clothing) Wt 112½ pds. Has a passage, last night (at 10 PM). Appetite good; bowels [ ] Thing; only seems despondent. Lies steadily in bed. Was vaccinated today. [ ]s active, of late. Talks, at times, quite freely. Appetite continues good. [ ]night, had a passage. Incid last noted, while being in this ward, patient [ ]y hours nightly. April 5/94. Appetite good; bowels more regular; he appears [ ]up. April 9/94. Was got up & dressed: remained upon ward, all day, [ ]up, ward, daily. Appetite is poor; he has to be urged in order to get him [ ]gular. April 21/94. Patient was given "Massage Treatment" today. — [ ]ven "massage treatment" today. April 27/94. Another treatment, today. — [ ]has continued up, daily; sits in one place, all the day. Will not eat, unless [ ]gular. Patient seems very despondent, at times. —

[ ]all today; appetite not very good; bowels regular. Massage treatment discontinued. [ ]s improved very rapidly; always appears despondent; as a rule, will sit [ ]steadily. May 16/94. About the same. Sleeps about 6 or 7 hours, nightly. — [ ]B². May 23/94. Eats but little. May 31/94. Quiet; very stupid & dull. [ ]sits about on a seat most of the time. Does no work. — Pulse 70. June 30/94. About the same, for the past 3 months. —

(Carried to page 176)

Personal and Medical History of Charles Clanson (P)

TIBBETT, PUDLAY & CHAMBERS, DAVENPORT, IOWA

1893

This patient was received here at the hands of Deputy Sheriff Adolf Peterson & Wm Humphrey with the following history of case. No consanguinity; Some history of heredity, one sister being insane. This is 1st attack. Symptoms appearing immediately after a sunstroke four months [illegible] ago, followed an inability to work; loss of sleep & memory; lately, suicidal tendencies. Disease seems to [illegible] no rational symptoms. Is, now, maniacal at times; & uncontrolable. Tried to hi[illegible] an axe; propensity now active. Has shown no disposition to injure others. Ha[illegible] He had a fever 4 years ago; was delirious seven weeks. There is no history of [illegible] been in Jail for 2 days. Result of disease supposed to be the cause of this at[illegible] been under medical treatment. On personal examination, has a vac[illegible] there are also loss of memory, nervous twitchings &c. He also refuse[illegible] -factory answers to questions.

Oct 21/93. On admission, was put on B²; Pulse 78. T@ 99.6. B[illegible]

Oct 22/93. Was very restless last night; o[illegible] w peculiarities noted. T@ 99.6. Appetite poor. Stands about the hall. Does not seem to c[illegible]

Has some cough. No complaints or injuries to note. PM Pulse[illegible] at

better, 7 hours, last night. Was quiet. AM. Pulse 78. T@ 9[illegible] el in

a dull, stupid manner. Talks none. PM " 78 " [illegible] ast

night and slept only 4 hours. AM Pulse 78. T@ 99[illegible] y day. —

PM Pulse 78. T@ 99. Oct 25/93. Was restless for 5 hou[illegible] n. Pulse 76.

Is also restless during day. Walks aimlessly a[illegible] oes not seem to

know what he is doing. Appetite very poor. S[illegible] us, being restless

for 3 hours, last night. AM. Pulse 76. Kep[illegible] ish. Oct 27/93. Was

very restless, last night, but slept 5 hours. A[illegible] Pulse this Am, 72.

Oct 28/93. Slept 6 hours last night; was [illegible] still eats but very little.

Fluid seems very weak. Is very re[illegible] ed a few night, last night,

very restless, slept only 3 hours. Th[illegible] t not so bad as at time of

Coming. Cannot talk English & pl[illegible] petite still poor. Works on ward,

Home. Wants to go home. Oct [illegible] night. Pulse has become normal.

Has examined in office, today [illegible] d. Was fairly willing to do something.

but would not speak at [illegible] " could not be judged of. —

Nov 3/93. On 3, of the pas[illegible] has slept from 7 to 8 hours, each. On the

other 3 nights, sleep has been ra[illegible] es, noisy, & then sleeping only 4 or 5 hours on each.

Appetite sometimes good; at other[illegible] regular. Pulse normal. Talks some with the

others. Helped for a while with the work an[illegible] now, only occasionally. At times, is nervous &

restless, by day. Goes out walking. Has mor[illegible] d as filthy & destructive, since admission. Weight,

on 1st inst, 121½ lbs (a slight gain); Pulse 72. Nov 8/93. Has been quite noisy, the past 3 night, sleeping only

from 4 to 6 hours, each. Has also been restless by day. Appetite poor. Nov 9/93. Very noisy, sleeping

but 2 hours, last night. Nov 10/93. Again noisy, last night, sleeping only 4 hours. Appetite abnormal. Walks

out with the rest, sometimes. Works some in the ward. Nov 11/93. Slept but 5 hours last night; was quite restless.

Nov 30/93. Appetite poor, and he is losing in flesh. Talks but little. Is deluded. Makes no improve-

Personal and Medical History of Charles Clausen (P)

1893 Contd

Nov 30 - ment; Works some in the ward. Makes no complaints.

Dec 11/93. Wt 120 lbs. Pulse 82. Dec 11/93. Appetite poor. No perceptible change in his condition. —

" 31 Dec 31/93. Apparently sleeps well, at night, now. Appetite is very poor. Patient is dull & listless; sits about on a bench most of the time. Talks but very little. —

1894

Jan 2/94. Wt 119 lbs. Pulse 80. Jan 15/94. Seems losing gradually. Takes Emulsion of Malt and Cod-liver oil. Jan 31/94. Eats but little; is losing in flesh. Continues to take also emulsion. Talks but little; does not complain; seems depressed. Works some in the ward.

Feb 1/94. Wt 111½ lbs (a loss of 7½ lbs, in the past month). Pulse 68. Feb 7/94. Was restless for 8 hours, noisy a great part of the time & slept but 2 hours, last night. Appetite is very poor.

" 11/94. Feb 11/94. Eats but very little, but will take milk quite freely. Feb 22/94. Eats but little but takes milk freely. Talks but little to others; talks to himself at times. Melancholy; Works some

" 24 Feb 24/94. This Patient was committed here under the "Law of 1893" "recently declared unconstitutional". He was, today, Taken Out and Returned under "new warrant" from

" 28 Olmsted County. Feb 28/94. Does not change very much. Sits about ½ of the time; makes no complaints. Works some in the ward. Habits are clean. Patient seems much depressed. —

Mar 2/94. Wt 116 lbs. Pulse 68. March 3/94. Patient seems to be "running down" generally.

" 6 Was today, transferred to C², the "sick ward", and put to bed. March 5/94. Appetite fairly good;

" 10 bowels regular. Lies quietly in bed & talks fairly rationally. March 10/94. Complains, today,

" 14 of feeling quite weak. March 14/94. Lies in bed, steadily. Is very quiet; talks but little; Ap-

" 19 petite fairly good; bowels regular. March 19/94. Complains of pain in his lungs, at times.

" 24/94 March 24/94. Appears very dull; sleeps a great deal during the day. March 29/94. Has seemed

" 30 somewhat brighter, the past few days. Appetite good, bowels regular. March 30/94. 8 Am. Complains of pain in right lung. Lies steadily in bed; remains there quietly. —

April 2/94. Wt (in underclothing) 112½ lbs. Has a passage, last night (at 10 Pm). Appetite good; bowels

" 5 regular. Appears fairly strong; only seems despondent. Lies steadily in bed. Was vaccinated today.

" 6 April 5/94. Has been very active, of late. Talks, at times, quite freely. Appetite continues good.

" 8 April 6/94. 11. Pm last night, had a passage. Since last noted, & while being in this ward, patient has slept, on the average, 7 hours nightly. April 8/94. Appetite good; bowels more regular; he appears

" 9 well enough now to get up. April 9/94. Was got up & dressed: remained upon ward, all day.

" 14 April 14/94. Has continued up, on ward, daily. Appetite is poor; he has to be urged in order to get him

" 21 to eat. Bowels are regular. April 21/94. Patient was given "Massage Treatment" today. —

" 24/94 April 24/94. Given another "massage treatment" today. April 27/94. Another treatment, today. —

" 30 April 30/94. Patient has continued up, daily; sits in one place, all the day. Will not eat, unless urged. Bowels are regular. Patient seems very despondent, at times. —

May 2 May 2/94. Patient up & on hall today; appetite not very good; bowels regular. Massage treatment discontinued.

" 10 May 10/94. Does not seem to improve very rapidly; always appears despondent; as a rule, will sit

" 16 or stand in one place steadily. May 16/94. About the same. Sleeps about 6 or 7 hours, nightly. —

" 18/31 May 18/94. Transferred to B². May 23/94. Eats but little. May 31/94. Quiet; very stupid & dull.

Depressed. Talks none. Sits about on a seat most of the time. Does no work. —

June 30 June 1/94. Wt 117 lbs. Pulse 70. June 30/94. About the same, for the past 3 months. —

(Carried to page 175)

Personal and Medical History of Eugene O'Connor

Whole No. 3526.
Residence, Pleasant Grove, Minn
Date Admission, 23rd October 1893.
Admitted by, Dr Kilbourne Hour, 4.30 PM
How Sent, Thomas Fraser, Jof P, Olmsted County
Sex, Male
Age, 24 years
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Farming
Degree Education, Common School
Profession Religion, Catholic
Habits, not intemperate
Nativity, Minnesota; (parents born in Ireland).
Physicians Committing, W W Mayo & A W Stinchfield
Correspondents, None saved in Papers
Family Physician D. C. St. Mayo. Rochester. Minn

No. for Year, 96.
Insane Relatives, None
Cause Exciting, not known
Cause Predisposing, not known
Form, Acute Mania
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, Not
Date of this Attack, Oct 9th - 1893 (2 weeks ago)
Duration, about 2 weeks
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 24 years
Time of Leaving, Jan 5 '94
Time in Hospital, 2 mo 14 ds.
Result, Rec.

Crossed + = Absence 1st April 1894 because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr Ely, Oct 23rd 93 =

MENTAL ACTIVITY:
Clear or Confused, clear at times; at others, Confused
Quick or Sluggish, Quick

MEMORY:
Past Events, Good
Recent Events, seems somewhat clouded
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Dulled
Correct or Illusive,

REASONING POWER:
Ordinary Subjects, not very good
Own Mental State, Thinks himself perfectly sane; "never was insane"
Special Subjects,

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

DELUSIONS:
Systematized ~~or Not~~, of having revelations from God & of people being all dead &c.
Special Subjects,
Transitory or Not,

HALLUCINATIONS: "of hearing"
ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Answers questions coherently but otherwise talks incoherently
Voluble or Reticent, Voluble

GENERAL DESCRIPTIVE REMARKS:
Says "he had the Palsy (?) about 2 weeks ago & has not quite got over it yet." Has also had lung-fever (he claims). Describes this "Palsy" as shooting, burning pains, through whole body, arms, legs &c. Tells a story of some woman wanting him & some one else; of her "disgracing herself & shame him"; of his being turned out of the church by Father Dorr & of patients having to go & confess &c. Says he so strenuously resisted being brought here because he did not consider himself obliged to come here. Claims he has a special revelation from God in regard to certain persons. Quite often "crosses" himself during examination.

Personal and Medical History of Eugene O'Connor

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, Usually abt 148 lbs NUTRITION, Somewhat below normal
WOUNDS OR ABNORMALITIES, None noted
TONGUE, Tremors, Some fine Coatings, Quite heavy Promptness Movement, Quite prompt
PUPILS, Equality, equal Size, about normal
Response Light, Yes Accommodation, Yes
SIGHT, probably good
HEARING, probably good
COORDINATION, Arms, (on usual test) Quite good with right hand; some inaccuracy with left. —
Legs, Standing, eyes shut, Quite Steady
TREMORS, Hands, some slight Tongue, some fine
Facial Muscles, General, None noted.
REFLEXES, Patellar, unequal: Right about 4; left about 6 or 7.
Other Reflexes,
ARTICULATION, ~~Hesitating,~~ quite good ~~Slurred,~~
FACIAL EXPRESSION, about normal
SENSIBILITY, normal
HEART, Sounds normal
LUNGS, Sounds normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short (2 weeks) ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Can't ascertain anything about history of heredity as he says "everybody is dead" "the whole country is dead."

EGBERT, FIDLAR & GRAUBERG, DAVENPORT, IOWA.

1893 Has been brought here by William O'Connor, attended by Dr. Keely, Chas. Ratcliffe, Richard O'Connor & Geo. Ratcliffe, with the following history of case. There is no history of either insanity or hereditary. This is the 1st attack. Symptoms appearing Oct 9/93 (2 weeks ago); Disease seems to be increasing; not variable; no rational intervals. Derangement now shown by his being indifferent to everything, the first week; during past week, violently insane. Has shown disposition to injure others. Is not suicidal, nor filthy nor destructive. No peculiarities to be noted previously noticeable. There is no history of intemperance nor of any severe disease or injury to head. Restraint has been employed for 2 days, as he was very violent; frenzied. Don't know cause of disease. No treatment has been given for his relief. On personal examination, the above facts brought out. He said nothing; was in violent frenzy; was held by 2 men; tried to free himself.

Oct 23 Oct 23/93. On admission, is in apparently good physical condition. Has mildly maniacal. Arms were tied, when brought here. Has put in C3. Bodily condition clean. Is well dressed. The following were noticed; Scar on back (old injuries); two small wounds on right hand, which, he says, were caused by coming in contact with a wire fence. Pulse 68. R 15. T 98.2. Appetite very good. Bowels have moved. No cough observed. Is very much excited, noisy & hard to control, until 6 A.M. when he became quiet. No delusions or illusions noted. Answers questions in a rational manner; sometimes hesitates. Complains of being tired; "worn out". Oct 24/93. Rested & slept well (8 hours), last night. — 11 A.M. Transferred to B2. Wanted to go back down in C3. Was quite violent for a while; but was quiet all, or nearly all, afternoon. Appetite fairly good. Talks freely & sensibly, at times. Pulse (A.M.) 74. T 99.4. " 25 P.M. 7 P. T 99.2. Oct 25/93. Restless for 3 hours, Sleeping 5 hours, last night. A.M. Pulse 70. T 99.6. His appetite is poor. Has been quite noisy, by spells, during the day; violent 3 hours; (from 3 to 6 P.M.). Talks " 26 loudly at times. P.M. Pulse 74. T 99.2. Oct 26/93. Restless 4 hours, noisy 1 hour, sleeping but 3 hours, last night. A.M. Pulse 74. Appetite medium. Very noisy, at times; talks quite freely, at times. " 27 Oct 27/93. Very restless, nearly all last night; up, attempting to dress. A.M. Pulse 76. Appetite medium. Has been very troublesome today. Quite violent twice. Has struck by a fellow-patient (Norling) " 28 making a mark on forehead. Oct 28/93. Was very restless last night; slept only 5 hours. A.M. Pulse 74. Appetite still only medium. Noisy by spells. Caused some trouble during the day. Was " 29 visited today by brother & sister. Oct 29/93. Was quiet & slept 6 hours, last night. A.M. Pulse 76. Is very troublesome inward: fond of striking patients a back of neck when not looking; is also violent at times. Eats but very little. Was examined, in office, yesterday. Manifested both delusions & hallucinations; also told of his having had the "Palsy" (?) (see Remarks) — " 30 Oct 30/93. Slept 6 hours, restless 2 hours, last night. Quite boisterous, troublesome & noisy, by day. — " 31 Talks but little. Oct 31/93. Lies around in the seats, most of time, while in hall. Talks but little, is stubborn & boisterous. Tried to run away, while out walking, today.

Nov 1 Nov 1/93. Appetite medium. Is noisy, at times, though generally quiet during day. Prays. Talks " 2 but little. Bowels generally free. Nov 2/93. Was noisy last night. Also wet his bed. Appetite very poor. Generally quiet by day. Habits have become dirty. Visited by relatives today. — " 3/4 Nov 3/93. Talks but little; does not go out walking now. Nov 4/93. Quarrelsome & picked a fight " 5 with a fellow-patient (Jamison) today. Nov 5/93. Sat in a seat, with eyes closed, most of the day. Was visited by brother but would not talk to him nor look up. Appetite only medium still &

1893

Nov 5 (cont'd) and he seems to be losing in weight. Is naturally, of a mean disposition. Habits are dirty.
" 6 Nov 6/93. During 5 nights of past week, patient has been quite restful, apparently sleeping well, 8 hours on each; on the other 2, has been restless & somewhat noisy, but sleeping 5 hours, each night. Pulse has been about normal. Bowels seem regular. Wt, on 1st inst, 131 pounds.
" 10 Nov 10/93. Is quiet now, during the day. Appetite medium. Is on medicines. Is not taken out
" 17 walking on account of his trying to run away, when he is out. Nov 17/93. Has been ugly and pugnacious the past 2 days striking and kicking his fellow patients. Has also been dirty in
" 23 his habits; on one days, extremely so. Nov 23/93. Has been very dirty the past 5 days or so; spits
" 25 on his clothing, seats, floor, in fact, upon everything in sight. Nov 25/93 Again quarrelsome today, also practises his dirty habits. Struck a fellow-patient (C. Elenberg) today. Transferred to B3 —
" 30 Nov 30/93. Appetite good; bowels regular. As a rule, is quietly behaved; though he, at times, becomes rough & quite often will strike his fellow patients. Habits filthy; spits as low, clothing &c.
Dec 2/ Dec 2/93. Visited by his brother, today. Dec 1/93. Wt 130 pounds. Pulse 76. Appetite good. Seems to be improving some, in the last few days. Talks quite freely and does not spit about, as much as before. Has been wanting to go back to St Mary's Hospital again. —
" 10 Dec 10/93. Was struck by another patient (Joseph Brikke), causing his nose to bleed some.
" 21 Dec 21/93. Patient improving steadily. For past week, has not insisted on his change of
" 25 name. Now talks with fair clearness. Dec 25/93. Was, today, transferred to B1 —
" 31 Dec 31/93. Is doing nicely and appears to be all right. Has no "spells". Eats well; also sleeps
1894 well. Appetite good. Bowels regular. —
Jan 1 Jan 1/94. Is a very quiet & well-behaved patient. Is becoming quite clear; losing even
" 2 the nervousness of a couple of weeks ago. Jan 2/94. Wt 132½ pounds (A gain of 1½ pds
" 5 in weight, in past 4 weeks). Pulse 74. Jan 5/94. Appears all right. Has had no "spells" for some time. Is quite cheerful & quite well recovered.

Returned to his home, today, with brother.

= Crossed off the records; illegally committed =

Personal and Medical History of Martin Keller

SHERRY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3527.
Residence, St Paul, Minn (legal settlement).
Date Admission, 23rd October 1893.
Admitted by, D. Phelps Hour, 7 PM
How Sent, Rudolph Lehmicke. Jo P. Washington County



Sex, Male
Age, 40
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Laborer
Degree Education, Common School
Profession Religion, German Catholic
Habits, not intemperate
Nativity, Germany (parents also born there)
Physicians Committing, W. C. Voigt & J. C. Clark
Correspondents, none given in "Papers"

Order for hearing petition for Guardian Served this date – W. C. Voigt; Stillwater, (guard.)
Petition filed hearing Nov 10 93

No. for Year, 97.
Insane Relatives, None
Cause Exciting, Unknown
Cause Predisposing, probably head injury, last winter
Form, Acute Mania
Accompanying Bodily Disorder, probably some head injury
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, 40.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exd by Dr. Eby, Oct 28/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Quick
MEMORY:
Past Events,
Recent Events, Seems fairly Good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Fairly alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Quite good
Own Mental State, Doesn't quite realize his condition
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
"Started a fire w/ Stillwater – reason sent here – was stationary by a telegraph pole & voices told him to set fire, right away" – Says "he was knocked in the head last winter, while working in the woods & has suffered, ever, from headache" –

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Yes
DELUSIONS:
Systematized or Not, None detected
Special Subjects,
Transitory or Not,
HALLUCINATIONS: "of hearing"
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Quite free

Personal and Medical History of Martin Keller

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11 1/4 WEIGHT, 153 lbs NUTRITION, Fair
WOUNDS OR ABNORMALITIES, Probably none
TONGUE, Tremors, Marked Coatings, Heavy Promptness Movement, Quite Prompt
PUPILS, Equality, Equal Size, quite dilated
Response Light, Yes Accommodation, Yes
SIGHT, Impaired a good deal
HEARING, Some impairment

Matin Keller.
Case No. 3527 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, Depressed
SENSIBILITY, Hypersensitive
HEART, very rapid (further examination to be made)–
LUNGS, Sounds are good.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Records kept

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 3 weeks ago. ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother was living – 4 months ago.
Father or Pat. Relations, Father died 4 months ago – Don't know cause
Brothers or Sisters, 1 brother died in St Paul, 3 years ago; Consumption [?] 2 sisters living – no history of heredity obtained C.]

Personal and Medical History of Martin Keller

SEIBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3527

Residence, St Paul, Minn (legal settlement).

Date Admission, 23rd October 1893.

Admitted by, D. Phelps Hour, 7 PM

How Sent, Rudolph Lehnicke. Jct P, Washington County

Sex, Male

Age, 40

Civil Condition, single

Children,

Age Youngest Child,

Occupation, Laborer

Degree Education, Common School

Profession Religion, German Catholic

Habits, not intemperate

Nativity, Germany (parents also born the

Physicians Committing, W. C. Voigt & J. C. Bla

Correspondents, none given in "Papers"

Order for hearing petition for Guardian Served this date – W. C. Voigt; Stillwater, (guard.)



No. for Year, 97.

Insane Relatives, none

Cause Exciting, unknown

Cause Predisposing, probably head injury, last winter

Form, Acute Mania

Accompanying Bodily Disorder, probably some head injury

Suicidal or Not, not

Date of this Attack, 3 weeks ago

Duration, 3 weeks

No. of Attack, 1st

EXAMINATION ON ADMISSION.

Exd by Dr. Eby, Oct 28/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events,

Recent Events, seems fairly Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Fairly alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, quite good

Own Mental State, Does not quite realize his Condition

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

"Started a fire in Stillwater – reason sent here – "was standing by a telegraph pole & wires told him to set "fire, right away" – says "he was knocked in the head "last winter, while working in the woods & has suffered, "ever, from headache" –

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not, None detected

Special Subjects,

Transitory or Not,

HALLUCINATIONS: "of hearing"

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, quite free

Personal and Medical History of Martin Keller

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11/4 WEIGHT, 153 lbs NUTRITION, Fair

WOUNDS OR ABNORMALITIES, probably none

TONGUE, Tremors, Marked Coatings, Heavy Promptness Movement, quite prompt

PUPILS, Equality, Equal Size, quite dilated

Response Light, Yes Accommodation, Yes

SIGHT, Impaired a good deal

HEARING, some impairment

COORDINATION, Arms, Finger to nose, eyes shut, fairly accurate

Legs, Standing, eyes shut, fairly steady.

TREMORS, Hands, some Tongue, marked

Facial Muscles, some General, some

REFLEXES, Patellar, equal; very much exaggerated. 10+

Other Reflexes, ankle clonus

ARTICULATION, ~~Hesitating~~, quite good ~~Slurred~~,

FACIAL EXPRESSION, Depressed

SENSIBILITY, hypersensitive

HEART, very rapid (further examination to be made)

LUNGS, Sounds are good.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Records kept

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 3 weeks ago. ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, mother was living – 4 months ago.

Father or Pat. Relations, Father died 4 months ago – Don't know cause

Brothers or Sisters, 1 brother died in St Paul, 3 years ago; Consumption (?) 2 sisters living – no history of heredity obtained (?)

Personal and Medical History of Martin Keller

EBERT, FUCAS & STAEBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy-Sheriff O.D. Anderson, with the following history. There is no history of consanguinity or heredity. This is the 1st attack; (has not been sent to hospital before); first symptoms manifested 3 weeks ago; heard voices talking to him day & night-time. Disease seems stationary: not variable; no rational intervals. Derangement is now shown by his hearing voices talking to him in regard to money & suggesting incendiarism. Is either disposed to injure others, nor suicidal, nor filthy nor destructive. Not known as to previous peculiarities &c. There is no history of intemperance. Patient received a severe beating about the head with a fist, last winter. No restraint or confinement has been employed. Cause of the disease is unknown. Has had no medical treatment. On personal examination, there are noted, rapid pulse, contracted pupils; is very nervous; shows a tendency to weep. Patient said "he received telegrams ordering him to set incendiary fires, which he promptly obeyed". Was nervous, but no unusual action. Appearance & manner was those of a person laboring under a mental strain. His landlord states that he has been erratic in his actions, for some time.

Oct 23 — Oct 23/93. On admission, is found to be in fair Physical condition. Has put on 3 lbs. Pulse 112. T. 98.8. Bodily condition dirty; (some lice also found); no injuries or peculiarities noted. Oct 24/93. Was restless for 1 hour last night; slept 7 hours. AM. Pulse 108 T. 99. Appetite good. Bowels seem regular; no cough noticed. Is quiet. Sits in a seat most of the time. Talks freely. No delusions noted.

" 24 — Says "it was cold up at Stillwater & the set sons fries". PM. Pulse 106. T. 98.8. Oct 25/93. Slept apparently well, 8 hours, last night. AM. Pulse 110. T. 99. Appetite continues good. Is quiet and well-behaved during the day. Talks freely when addressed. Makes no complaints. PM. Pulse 116 T. 99.

" 26 — Oct 26/93. Slept 6 hours, last night, restless 2 hours. Conduct by day as usual. Reads some. Talks freely.

" 27 — AM. Pulse 112. T. 99. PM. Pulse 108 T. 99.4. Oct 27/93. Slept fairly well, 7 hours, last night; was restless for an hour or so. AM. Wt. Oct 28/93. Was restless a couple of hours, but slept 6 hours, last night. AM. Pulse 100. Appetite good. Quiet and well-behaved. Answers questions readily.

" 29 — Talks freely. Does not go out walking. Oct 29/93. AM. Pulse 102. Sits quietly nearly all day; reads some.

" 30 — Oct 30/93. Continues about the same from day to day. AM. Pulse 94. When examined recently, did not seem to quite realize his condition. Admitted his setting fires in Stillwater. No delusions were detected but hallucinations "of hearing" were manifested.

Nov 7 — Nov 7/93. For the past 10 nights, patient has rested & apparently slept well (8 hours) each night. Has continued quiet & well-behaved by Day. Pulse has ranged from 100 to 92, during past week. Appetite has continued good. Conduct & behavior has not changed. Talks quite freely. Sits by himself most of the time. Does not go out walking. Does no work. Wt (on 1st first) 151½ pounds. Pulse 94. Nov 30/93. Apparently rests and sleeps well, at night. Walks about hall but does not care to go out walking with the rest. Talks when addressed. Makes no complaints. Physical condition good.

" 30

Dec 4/93 — Dec 4/93. Wt 154 pds. Pulse 76. Dec 31/93. Continues quiet & well-behaved. Otherwise, no material change.

1894 Jan 1/31 — Jan 2/94 Wt 151 " " 82. Jan 31/94. Appetite good; bowels constipated, at times. Sits about in a settee. Talks but little. Does not work any.

Feb 1/28 — Feb 1/94. Wt 153 pds. Pulse 82. Febr 28/94. No noticeable change. Does no work. Habits clean.

Mar 1/31 — Mar 1/94. " 149 " " 100. Complains of earache: was, from this cause, restless 6 hours, sleeping but 2 hours, last night. March 31/94. Still troubled with ear-ache. Lying in bed, part of the day. Mar 1/93. Was in bed,

Personal and Medical History of Martin Keller

1894

Mar 6/30 — part of the time, yesterday and also today. Mar 6/94. Up, today. March 20/94. Appetite good; "hears people talking to him" - Works some in ward. Appears very despondent & depressed. -

" 21 — Mar 21/94. Patient was committed here under the "Law of '93" recently declared unconstitutional; he was today Taken out and Returned under "new Warrant" from Olmsted County.

" 31 — Mar 31/94. Appetite good. Behaves well; makes no complaints - "hears voices"; keeps with the work.

Apr 2/30 — April 2/94. Wt 152 pds. Pulse 80. April 30/94. Continues quiet & well-behaved. Eats well. Reads some; for the past few days, has been working with the painters. Seems very depressed, at times. Still "hears people talking to him". Habits are clean. Seems in good Physical health. -

May 1/14 — May 1/94. Wt 150 pds. Pulse 76. May 1/94. For past 10 days, has been working with the painter.

" 15 — May 15/94. Remains now in the ward. Does no work. Quiet & well-behaved. Transferred to B! -

" 18 — May 18/94. Has continued quiet & well-behaved. A good worker on the hall. Today was moved to A! -

" 30 — May 30/94. No change beyond what is above reported. Continues well behaved. Takes part in games. Works well.

June 1/30 — June 1/94. Wt 150½ pds - Pulse 90. June 30/94. Keeps about the yard all the time. Has no "spells" - Has not spoken lately regarding his delusions & hallucinations - Seems in good physical health.

July 1/31 — July 1/94. Wt 145 pds. Pulse 81. July 31/94. No special change. Talks freely; plays games - Works willingly.

Aug 1/31 — Aug 1/94. Wt 148½ " " 84. Aug 29/94. Became a little stubborn this week & tried to struggle with the attendant - Aug 31/94. Seems somewhat less depressed of late - Otherwise no special Change.

Sep 1/30 — Sep 1/94. Wt 149 pds. Pulse 90. Sep 30/94. No "Spells" observable - Is about the yard all the time. Seems to feel contented - Does some work in the ward - Habits clean. Physical health seems good.

Oct 1/31 — Oct 1/94. Wt 145½ pds. Pulse 94. Oct 31/94. Quiet & well-behaved - Works willingly in ward - Complains of "hard & lumpy feelings" in bowels, (probably constipation). No delusions noticed of late.

Nov 1 — Nov 1/94. Wt 144 pds. Pulse 86. Dec 3/94. Wt 140½ pds. Pulse 86. Jan 3/95. Wt 139 pds. Pulse 80. —

Dec 3 1894 Jan 3/31 — Appetite fair - Jan 31/95. Apparently sleeps well - Appetite fairly good, but bowels are irregular - Complains, at times, of pain in bowels - Behaves well; works about ward & building, washing windows &c - Health seems good.

Feb 1 — Feb 1/95. Wt 136 pds. Pulse 98. March 2/95. Wt 139½ pds. P 80. April 1/95. Wt 140 pounds. Pulse 102.

Mar 1 — April 30/95. Keeps about the same, all the time. Sits by himself; does not play games &c. Behaves well and is quiet. Talks freely. No delusions noticed - Talks about going to Germany". Works some in ward.

April 30 — May 31/95. Wt 139½ pds. P 82. May 31/95. Behaves well & is quiet. Does some work in ward; is very easily excited; talks freely, but in a somewhat unsteady manner. Does not associate with other patients. Keeps always by himself.

May 31 — June 1/95. Wt 136 pds. Pulse 80. June 30/95. No change noticeable in patients' condition.

June 1/30 — July 1/95. Wt 133½ pds. Pulse 72. July 31/95. Keeps about the same, all the time. Wants to go to Germany -

July 1/31 — Aug 1/95. Wt 135 pds. Pulse 92; Sep 2/95. Wt 135 pds. Pulse 92; Oct 1/95. Wt 135 pds. Pulse 84.

Aug 1 — Oct 31/95. Behavior good: is easily excited. reads, most of the time: does some work on ward & has occasionally worked in kitchen & store-room. Always seems the same: no definite "Spells" noticed. Health seems good.

Sep 2

Oct 1/31

Nov 1 — Nov 2/95. Wt 137 pds. Pulse 88: Dec 3/95. Wt 146½ pds. Pulse 100. Jan 1/96. Wt 152½ pds. Pulse 84. -

Dec 3 1895 Jan 1/31 — Jan 31/96. Patient is very easily excited: has not seemed to improve any, mentally. Talks quite freely. Does not play any games &c. Reads most of the time. Works in dining-room.

Feb 1/29 — Feb 1/96. Wt 155 pds. Pulse 98. March 2/96. Wt 156½ pds. P 100. March 27/96. Behavior fair. Eats & sleeps well: works in dining room. Mental condition remains about the same.

Mar 1/30 — Transferred to D[E]. April 30/96. Quiet & well-behaved: no work: talks some but irrationally.

April 30

Transfer Book A. page 298.

Personal and Medical History of Andreas Nelsen

BERGET, PICLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3529.
Residence, Rushford, Minn
Date Admission, 25th October 1893.
Admitted by, Dr Kilbourne Hour, 3.15 PM.
How Sent, E. V. Farrington, Sh. P. Fillmore County
Sex, Male
Age, 48 years
Civil Condition, married
Children, two
Age Youngest Child,
Occupation, Sewing-Machine Agent
Degree Education, Common School
Profession Religion, Lutheran
Habits, not intemperate
Nativity, Norway (Parents also born there).
Physicians Committing, H. C. Grover & J. W. Nagelsveen
Correspondents, Wife lives in Pateros" Mrs Andrew Nelson (wife) Rushford Minn.
Family Physcn J. W. Nagelsveen, Rushford Minn

No. for Year, 99.
Insane Relatives, none
Cause Exciting, unknown
Cause Predisposing, previous attacks
Form, Acute Mania
Accompanying Bodily Disorder, no history of any.
Suicidal or Not, not
Date of this Attack, about 6 weeks ago
Duration, about 6 weeks
No. of Attack, 2nd (one about 2 years ago).
No. of Admissions, 1st
Age First Attack, about 46.
Time of Leaving, Oct. 31. 1899
Time in Hospital, 6 yrs. 6 d.
Result, Discharged May 2. 1900
Improved

EXAMINATION ON ADMISSION.

Exd by Dr. Eby, Oct 28/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, quite quick
MEMORY:
Past Events, Fairly good
Recent Events, Fairly good
Special Subjects, Fairly good
PERCEPTIVITY:
Alert or Dull, Quite dull
Correct or Illusive,
REASONING POWER:
Ordinary Subjects, Seems fairly Good
Own Mental State, Poor
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Says "his friends bothered him; laughed at him. Would not leave him alone; Fought him; don't know why; had no special proof of this."—

EMOTIONAL STATE:
Normal, Calm, about normal
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or ~~Not~~, of Persecution
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Quite free in reply to questions.

Personal and Medical History of Andreas Nelsen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 136½ pds. NUTRITION, quite fair
WOUNDS OR ABNORMALITIES, probably none
TONGUE, Tremors, none slight Coatings, some little Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, somewhat impaired. Uses glasses.
HEARING, (slight).
COORDINATION, Ataxia, Station, Gait,
TREMORS, Facial, Lingual, Manual, slight
REFLEXES, Patellar, Slightly unequal, right normal, left abnt 7.
Other Reflexes,
ARTICULATION, ~~Hesitating,~~ Slurred, foreign accent.
FACIAL EXPRESSION, good
SENSIBILITY, normal
HEART, Sounds are good
LUNGS, Sounds good
EXAM. URINE.

Andreas Nelsen.
Case No. 3529. Vol. 25.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 6 weeks ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother died – don't know cause – sick only a Day.
Father or Pat. Relations, Father in Norway – thinks still living –
Brothers or Sisters, 2 brothers 2 sisters living; claims healthy. 1 sister dead.

Personal and Medical History of Andreas Nelsen

EGBERT, FOLEY & EGGLESTON, DAVENPORT, IOWA

Whole No. 3529.

Residence, Rushford, Minn

Date Admission, 25th October 1893.

Admitted by, Dr Kilbourne Hour, 3.15 P.M.

How Sent, E. V. Farrington, Sh. P. Fillmore County

Sex, Male

Age, 48 years

Civil Condition, married

Children, Two

Age Youngest Child,

Occupation, Sewing-Machine Agent

Degree Education, Common School

Profession Religion, Lutheran

Habits, not intemperate

Nativity, Norway (Parents also born there).

Physicians Committing, H.G. Grover & J.W. Magelssen

Correspondents, "Same as in Papers" Mrs Andrew Nelson (wife) Rushford Minn.

Family Physcn J.W. Magelssen Rushford Minn

No. for Year, 99.

Insane Relatives, None

Cause Exciting, unknown

Cause Predisposing, previous attack

Form, Acute Mania

Accompanying Bodily Disorder, no history of any

Suicidal or Not, Not

Date of this Attack, about 6 weeks ago

Result, discharged [illegible]

Improved

EXAMINATION ON ADMISSION.

Exd by Dr Eby, Oct 28/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, quite quick

MEMORY:

Past Events, Fairly good

Recent Events, Fairly good

Special Subjects, Fairly good

PERCEPTIVITY:

Alert or Dull, Quite dull

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Seems fairly Good

Own Mental State, Poor

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Says "his former bothered him; laughed at him. Worked not leave him alone; thought this; don't know why; had no special proof of this."

EMOTIONAL STATE:

Normal, Calm, about normal

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized ~~or Not~~, of Persecution

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free in reply to questions.

Personal and Medical History of Andreas Nelsen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 130 5/8 pds NUTRITION, quite fair

WOUNDS OR ABNORMALITIES, probably none

TONGUE, Tremors, some slight Coatings, some little Promptness Movement, prompt

PUPILS, Equality, Equal Size, Normal

Response Light, Yes Accommodation, Yes

SIGHT, somewhat impaired. Uses glasses.

HEARING, Seems good

COORDINATION, Arms, Inclined to miss, Eyes shut, some inaccuracy (slight).

Legs, Standing, Eyes shut, fairly steady.

TREMORS, Hands, none Tongue, some slight

Facial Muscles, none noted General, none

REFLEXES, Patellar, Slightly unequal; right normal; left about 7.

Other Reflexes,

ARTICULATION, ~~Hesitating,~~ Slurred, foreign accent.

FACIAL EXPRESSION, Good

SENSIBILITY, Normal

HEART, Sounds are good

LUNGS, Sounds good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 6 weeks ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother died – don't know cause – sick only 2 Days.

Father or Pat. Relations, Father in Norway – Thinks still living –

Brothers or Sisters, 2 brothers 2 sisters living; Claims healthy. 1 sister dead.

Personal and Medical History of Andreas Nelsen

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought hereby Deputy Sheriff Henry Nupson, with the following history. There is no history of consanguinity or heredity. This is said to be the 2nd attack; re-occurring about 2 years ago, lasting about 2 months; was not sent to Hospital. First symptoms of this attack manifested about 6 weeks ago; by general nervousness. Disease seems stationary; but is variable & there are rational intervals, but these do not occur at regular periods. Derangement is now shown in that he feels, according to his own statement, that there are some (a few) that he hates & would like to hurt if he could get a chance. Has a disposition, then, to injure others; but is not suicidal nor filthy nor destructive. Cannot learn of any peculiarities being previously shown. There is no history of intemperance or of any severe disease or head-injury. He has not been restrained or confined. Don't know cause of disease. No medical treatment has been given patient.

On Personal Examination, is very nervous. He said, as stated above, that he would like to hurt somebody"; showed religious scruples; "his own & other peoples' sins"; appears and says that "he is exceedingly nervous".

Oct 25 — Oct 25/93. On admission, is found to be in good physical condition. Wasp. tow B^r. Pulse 80. T(o) 98.8. Bodily Condition clean & neat. No peculiarities or injuries noted. Appetite only medium. No Cough noticed. Is quiet & well-behaved. Walks some about the hall. Talks when addressed. Answers questions quite freely. No complaints or injuries to note. Oct 26/93. Slept 6 hours, restless 2 hours, last night. Am. Pulse 76. T(o) 98.8. Appetite medium; has been quite restless during the day; walks about hall, mat of time. Makes no Complaints. Pm. Pulse 78. T(o) 99. Oct 27/93. Was very restless, last night and slept but 4 hours. Am. Pulse 76. T(o) 98.6. Bowels, as a rule, are regular.

" 26 — " 27 — " 28 — Has been quiet during the day. Talks but little. Reads some. Pm. Pulse 78. T(o) 98.8. Oct 28/93. Slept 8 hours last night; was quiet. Pulse (Am) 72. Appetite fairly good. Is restless to day. Talks very little.

" 29 — Oct 29/93. Was again quiet & slept 7 hours, last night. Patient is restless, again, today. Seems rather stupid. Makes no complaints. Pulse 76. When examined yesterday, was coherent in talk and conversation was quite free in answer to questions. Reasoning power, about our mental state, was poor. He showed systematized delusions of persecution". Oct 30/93. Was restless & out of bed last night; slept 6 hours. Am. Pulse 78. No change in conduct & behavior, by day.

" 30 — " 31 — Nov 8 — Oct 31/93. Slept well, last night. Am. Pulse 74. Restless to day. Talks but little. Appetite medium. Nov 8/93. Sleep, during the past week, has been much broken. Patient has been, nightly, noisy and restless, and has slept poorly; on 1 night 6 hours; on 1 night, 5 hours; on 1 night, 4 hours and on 4 nights, but 3 hours each. Has also been very restless, by day, walking the hall almost continually and has, frequently, to be made to sit down & rest. Appetite medium. Talks some. Does no work. Seems gradually growing worse. Pulse has been normal. Wt (on 1st inst) 135 lbs. P 78.

" 10 — Nov 10/93. Has been sleeping very poorly the past 2 nights (only about 4 hours a each). Has also been very restless, each night. Seems gradually growing worse in regard to his condition. Appetite only medium. Is quite restless by day. Does not seem to realize that you are speaking to him. Nov 11/93. Was very restless, (sleeping) only 3 hours last night. Nov 12/93. Was restless nearly all last night; slept but 1 hour.

" 11 — " 12 — " 26 — Nov 26/93. Was restless and noisy for 5 hours, and slept only 3 hours, last night. Had a spell of crying, yesterday; thinks "some one is following him to kill him"; also "hears voices". Nov 30/93. Appetite is medium; talks some or but seldom; continues restless & much disturbed also, by day.

" 30

Personal and Medical History of Andreas Nelsen

1893

Dec 3 — Dec 3/93. Going for 2 hours, restless 5 hours, and sleeping but 3 hours, last night. Restless by day.

" 11/10 — Dec 4/93. Wt 127½ lbs (a loss of 7½ lbs, in last 4 weeks); Pulse 56. Dec 10/93. Restless 4 hours, sleeping but 4 hours, last night.

" 25 — Dec 25/93. Slept but 4 hours, restless 4 hours, last night.

" 31 — Received a Xmas present from home, today. Dec 31/93. Has apparently been sleeping somewhat better, during the past month or so. Appetite is good. Restless by day, walking about hall. Talks but little. Is deluded, stubborn and restless. Does not play games or read. No complaints.

1894
Jan 7/31 — Jan 7/94. Wt 121½ lbs (a further loss of 6 pounds in past month) - Pulse 78. Jan 31/94. Restless; continually walking the hall. Appetite fairly good, but he has to be led in to his meals, &c. Talks but little; makes no complaints. Manifests delusions. —

Feb 1/28 — Feb 1/94. Wt 118 lbs. (a loss of 3½ lbs, in past month). Pulse 70. Feb 28/94. Continues about as described in last general note. Goes out walking, occasionally; also has "spells of loud-talking". - Is deluded. Appetite medium - Does not work any. —

Mar 1 — Mar 2/94. Wt 122½ lbs (some gain in flesh). Pulse 72. Patient was committed here, under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Olmsted County - Mar 31/94. No noticeable change. —

" 31 — Apl 2/30 — April 2/94. Keeps in quite fair flesh. April 30/94. Apparently rests well at night. By day, he stands idly about, with hands in pockets; is rather stupid. Talks some. Appetite is good; he goes out walking, quite regularly, but takes no other recreation. Habits are clean.

May 1/31 — May 1/94. Wt 127 lbs. Pulse 68. May 31/94. Is rather stupid: works some in the ward. Talk but little.

June 2/30 — June 2/94. Wt 129 " " 80. June 30/94. No special change. Has a habit of pounding his head, at times.

July 2/31 — July 2/94. Wt 124 lbs. July 31/94. Sleeps well, at night. Appetite medium - Is stupid. Talks but little. Still shows delusions; "thinks there is some one, 'wants to kill him". Works a little. Walks out daily.

Aug 2/31 — Aug 1/94. Wt 123½ lbs. Pulse 66. Aug 31/94. Behaves well; works some at ward; talks but little; has delusions.

Sept 1/30 — Sept 5/94. Wt 127½ " " 70. Sept 13/94. Visited by a cousin - Sept 30/94. No change noted.

Oct 1 — Oct 1/94. Wt 129½ " " 92. Had a fight with patient Laubrecht & received a slight black-eye.

" 31 — Oct 31/94. Works some in ward & occasionally outside. Talks but little. Still holds to his delusions.

Nov 1/30 — Nov 2/94. Wt 131 lbs. Pulse 76. Nov 30/94. Behaves well; works in ward. In other respects, about the same.

Dec 1/31 — Dec 1/94. Wt 135 " " 64. Dec 8/94. Worked in kitchen, today. Behaves well. Talks some. Goes walking

1895
Jan 2/31 — Jan 2/95. Wt 134 " " 92. Jan 9/95. Kicked a fellow patient, (C. Johnson) on the leg -

" 29/31 — Jan 30/95. Restless, walking hall & talking, nearly all day. Jan 31/95. Appetite good. Behaves quite well, though, at times, he is restless & somewhat abusive to the other patients. Makes no complaints. Refuses medicine.

Feb 1/28 — Feb 1/95. Wt 135 lbs. Pulse 92. Feb 28/95. Talks quite freely, but mind wanders from one thing to another. Works in kitchen, at times; also works in ward. Is clean: makes no complaints. Appetite good.

Mar 2/31 — March 2/95. Wt 136 lbs. Pulse 72. March 10/95. At times restless, walking the hall, considerably: in the whole, quiet & well-behaved. Works some in kitchen. March 11/95. Transferred to B1. March 31/95. About as usual. Behaves well. Still shows delusions. April 1/95. Wt 132½ lbs. P 74. April 7/95. Works in ward: appears to be improving mentally. April 30/95. Mental condition appears to be improving. Otherwise he is about same. May 2/95. Wt 132 lbs. P 84. May 15/95. Works some in kitchen. May 31/95. Well-behaved. Has delusions & talks very incoherent, at times. Memory very poor.

June 1/30 — He works some in ward. June 1/95. Wt 130 lbs. Pulse 88. June 10/95. Had a "spell" & talked all day.

(carried to 201)

Personal and Medical History of Michael Ryan #2

Whole No. 3530.
Residence, Drake & Sydabaum Pk. St. Paul.
Date Admission, 25th October 1893.
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, John D. Olivier, Sh'f Ramsey County
Sex, Male
Age, 46
Civil Condition, unknown
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, Reads & writes
Profession Religion, Catholic
Habits, a moderate drinker
Nativity, Ireland (parents also born there).
Physicians Committing, J. A. Quinn & G. J. Hanley
Correspondents, Mary Griffin 478 Robert St. St. Paul

No. for Year, 100.
Insane Relatives, None
Cause Exciting, Domestic worry
Cause Predisposing, not stated
Form, Acute Mania
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, Not
Date of this Attack, 6 weeks ago
Duration, 6 weeks
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 46 years
Time of Leaving, Apr. 16 '94
Time in Hospital, 5 m 21 d.
Result, Imp.

Jan 1894 — Rec'd Rec'd Letter from Mary Griffin 478 Robert St. St. Paul

EXAMINATION ON ADMISSION.

Exd by Dr. Eby, Oct 25 93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, fairly clear
Quick or Sluggish, sluggish

MEMORY:
Past Events, fair
Recent Events, rather poor
Special Subjects,

PERCEPTIVITY:
Alert or Dull, inclined to be dull
Correct or Illusive, Correct

REASONING POWER:
Ordinary Subjects,
Own Mental State, Considered himself perfectly sane when brought here —
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Says was blind for nearly a week about 18 years ago: caused by "Evil Proximity". Says was only sleepless — was not out of his head when brought here"

EMOTIONAL STATE:
Normal, Calm, almost normal but
Indifferent,
Exalted,
Depressed, seems somewhat.

DELUSIONS:
Systematized or Not, none brought out
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, slightly incoherent at times
Voluble or Reticent, fairly free in answer to questions.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11½ WEIGHT, 148 lbs NUTRITION, Fair
WOUNDS OR ABNORMALITIES, probably none
TONGUE, Tremors, fine Coatings, somewhat Promptness Movement, quite prompt
PUPILS, Equality, Equal Size, Normal
Response Light, yes Accommodation, yes
SIGHT, probably good
HEARING, somewhat impaired
COORDINATION, Arms, finger to nose, eyes shut; correct.

Michael Ryan #2.
Case No. 3530. Vol. 25.
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, normal
HEART, Sounds are good
LUNGS, Sounds, good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

HISTORICAL.

LENGTH OF INVASION, about 6 weeks ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died of jaundice & Dropsy.
Father or Pat. Relations, Father died of asthma
Brothers or Sisters, 2 brothers living; does not hear from them } cannot say as to health.
1 sister " " " her }

Personal and Medical History of Michael Ryan #2

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3530.
Residence, Drake & Sydabaum Pk St. Paul.
Date Admission, 25th October 1893.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John D. Oliver, Co P. Ramsey County
Sex, Male
Age, 46
Civil Condition, unknown
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, Reads & writes
Profession Religion, Catholic
Habits, a moderate drinker
Nativity, Ireland (parents also born
Physicians Committing, J. A. Dunn & G.
Correspondents, Mary Griffin 478 Rober St Paul

No. for Year, 100.
Insane Relatives, None
Cause Exciting, Domestic worry
Cause Predisposing, not stated
Form, Acute Mania
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, not
Date of this Attack, 6 weeks ago
Duration, 6 weeks
No. of Attack, 1st
No. of Admissions 1st

EXAMINATION ON ADMISSION.

Exd by Dr Eby, Oct 25th 93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, fairly clear
Quick or Sluggish, sluggish

MEMORY:
Past Events, fair
Recent Events, rather poor
Special Subjects,

PERCEPTIVITY:
Alert or Dull, inclined to be dull
Correct or Illusive, Correct

REASONING POWER:
Ordinary Subjects,
Own Mental State, Considered himself perfectly sane when brought here —
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Says "was blind for nearly a week about 15 years ago: caused by "Evil pneumatic". Says "was only sleepless — was not out of his head when brought here"

EMOTIONAL STATE:
Normal, Calm, almost normal but
Indifferent,
Exalted,
Depressed, seems somewhat.

DELUSIONS:
Systematized or Not, none brought out
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, slightly incoherent at times
Voluble or Reticent, fairly free in answer to questions.

Personal and Medical History of Michael Ryan #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11½ WEIGHT, 148 lbs NUTRITION, Fair
WOUNDS OR ABNORMALITIES, probably none
TONGUE, Tremors, fine Coatings, somewhat Promptness Movement, quite prompt
PUPILS, Equality, Equal Size, Normal
Response Light, Yes Accommodation, Yes
SIGHT, probably good
HEARING, somewhat impaired
COORDINATION, Arms, finger to nose, eyes shut; correct
Legs, standing, eyes shut, head slight swaying.
TREMORS, Hands, none Tongue, fine
Facial Muscles, none noted General, none
REFLEXES, Patellar, equal; about normal; though very sluggish.
Other Reflexes,
ARTICULATION, ~~Hesitating~~, Slurred, somewhat & lisping.
FACIAL EXPRESSION, about normal
SENSIBILITY, normal
HEART, Sounds are good
LUNGS, Sounds good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, about 6 weeks ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died of jaundice & dropsy.
Father or Pat. Relations, Father died of asthma
Brothers or Sisters, 2 brothers living; does not hear from them } cannot say as to health.
1 sister " " " her }

Personal and Medical History of Michael Ryan #2

HERBERT, FULLAR & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy Sheriff Haas, with the following history of case. No history of either consanguinity or hereditary. This is 1st attack; (has not previously been in Hospital); first symptoms appearing 6 weeks ago: disease seems increasing; but is variable & there are rational intervals if regular intervals, unknown. Derangement now manifested by general confusion in marriage and domestic relations. Is disposed to injure others; not suicidal, nor filthy nor destructive. No peculiarities as previously shown. Patient is a moderate drinker. Has had no severe disease &c. Has been in the Workhouse for 30 days. Cause of disease is domestic worry. Has had no medical treatment. On personal examination, it was found that patient had general confusion of thoughts; did not seem to have clear idea of anything; capable of no consecutive thought. "said "the above, on State & National rights"; "tribute to Great Britain"; "Special powers of Cook-book, Bible &c." Appearance & manner indicated insanity. Had a quarrel a month ago, with attempt at shooting.

Oct 25 Oct 25/93. Patient, on admission, is in fair condition. Has put on lbs. Bodily condition dirty; no injuries or peculiarities noted. Oct 26/93. Rested & slept apparently well, last night. Appetite good; bowels seem normal; no cough noticed. Is quietly behaved. Oct 27/93. Slept 8 hours last night; was quiet. Am. Pulse 76 Te. 98. Tried to run away, while out walking, today. Oct 28/93. Again rested and slept well, last night. Am. Pulse 92. T 99.2. Appetite good; bowels regular. Stands by ever speaks to any of his fellow-patients. Appears to be quite rational, however. Was examined in office today. Does not realize his condition. "Considers himself perfectly sane". No delusions or hallucinations were brought out.
" 29 Oct 29/93. Restless 2 hours, sleeping 7 hours, last night. Am. Pulse 82. T 98.8. Quiet; well-behaved.
" 30/31 Oct 30/93. Slept 8 hours, restless for 3 hours or so, last night. Am. " 78 " 100.2. Oct 31/93. Passed last night, about as the are preceding. Am. Pulse 70. T 100.2 (heated). Appetite is good; bowels regular.
Nov 1 Nov 1/93. Restless 4 hours, sleeping 5 hours, last night. Am. Pulse 98. T 100. (heated). T 99.4. —
" 2 Weight, today 154 pounds; a gain of 6 pounds, since admission. Nov 2/93. Am. Pulse 90. T 101.2
" 3 Nov 3/93. Am. Pulse 90 T 100.2 (when heated); T 99.2. (when cool). Appetite continues good.
" 4/5 Nov 4/93. Am. " 80 " 100 (taken when heated). Nov 5/93. Am. Pulse 80. T 98.8. (not heated).
" 6 Nov 6/93. Am. " 86 " 98.6. Seems to be in a bewildered state of mind & occasionally becomes quite excited. Works on ward & writes quite often. Nov 7/93. Am. Pulse 98. T 100. (heated). T 99.8 (not heated).
" 7 Nov 8/93. Patient has been generally restless at night, during past week, from 3 to 4 hours and has slept only 5 to 6 hours, each night. This Am. Pulse 76. T 99. Appetite has been uniformly
" 8 good; bowels normal. He seems in a fairly quiet, yet Chronic, weakened mental State. Works on ward.
" 30 Nov 30/93. Appetite continues good; bowels regular. Behavior good. Seems to be rather nervous, at times. Shows incoherence of speech. Works some on ward. Habits are clean (See Attached record of Pulses & Temperatures).
Dec 1/8 Dec 1/93 Wt 163 pds. Pulse 66. (Has gained 9 pounds, in weight in the past month). Dec 18/93. Is deluded;
" 24 thinks himself a detective & that he was sent down here by the Authorities of St Paul". Dec 24/93. Struck a fellow-patient (A Spandberg), with a shoe this evening, (after night-watch came on duty), inflicting a wound,
" 31 on scalp. Dec 31/93. Appetite Continues good; bowels normal. Is fairly well-behaved. Once in a while, he will get to quarrelling with the other patients, when he becomes quite noisy. Appears to have a mania for sewing and fixing clothes & generally will be found at this kind of work. Habits are cleanly.
Jan 1/31 Jan 1/94. Wt 169 pounds. (a further gain in flesh). Pulse 72. Jan 31/94. Appetite good; bowels

Personal and Medical History of Michael Ryan #2

Jan 31 regular — No delusions noted, though he seems to have a mania for sewing, as he is always sewing at something. Talks apparently quite rationally. Works some on ward. Habits clean.
Feb [illegible] Pulse 84. Feb 22/94. Is well-behaved, though, incoherently at times — Habits are clean, but
" 23 on the ward. Physical condition good.
" 28
Mar 1/31

Michael Ryan

Nov 1893	9	Pulse 72 Temp 99.2	10th	Pulse 84 Temp 99 -	11th	P. 78 T. 99.2	
	12	" 84 " 98.8	13th	" 90 " 99			
	14	" 90 " 98.6	15th	" 90 " 99.2	16th	P. 72 Temp 99.4	
	17	" 72 " 98.8	18th	" 74 " 99.4	19th	P. 72 " 99.4	
	20	" 94 " 99.4	21st	Pulse 96 Temp 99.2	22nd	P. 90 T. 100	
	23	" 84 " 100	24	" 104 " 100	25	" 90 " 99.2	
	26	" 86 — 99.8	27	105 " 99	28	" 78 " 99.2	
	29	" 104 " 98.6	30	72 " 99.4			
Dec	1st	" 72 " 99	2nd	70 " 100			

[illegible] Pulse 84. Feb 22/94. Is well-behaved, though,
" 23 incoherently at times — Habits are clean, but
" 28 on the ward. Physical condition good.
Mar 1/31

[illegible] Nelsen

June 30 [illegible], from month to month. Has "spells" when he will
July 1/31 [illegible] Wt 128 pds. Pulse 90. July 31/94. Does not sleep well:
Aug. 1 [illegible] delusions. Memory very poor. Works on ward some & in kitchen.
Sept 1 [illegible] Pulse 84. Oct 1/94. Wt 131 pds. Pulse 84
Oct 1/31 [illegible] 31/94. Is very quiet, well-behaved & agreeable
Nov 1 [illegible] hours, every day in main kitchen). Talks but little.
Dec 1 [illegible] Habits very neat & clean. Nov 1/94. Wt 132½ pds. P 80
1894 [illegible] 130½ pds. Pulse 78. Jan 1/95. Moved to Bd.
Jan 2/31 [illegible] No improvement noticed, mentally: at times, talks very incoherently: has many delusions. Memory very poor. Works in main kitchen. Walk seems good.
Feb 1/31 Feb 1/95. Wt 133 pds. Pulse 60. Feb 15/95. Works in Main kitchen every day. Feb 24/95. Behavior good: very quiet: no trouble
Mar 2/30 to anyone. Has delusions & talks very incoherently: memory poor: physical condition good: works in kitchen, part of every day.
Apr 1/30 Sleeps well. Appetite good: bowels regular. Mar 1/95. Wt 133 pds. Pulse [illegible]. Mar 30/95. Mental Condition not improved.
May 1/30 Works in Kitchen every day. Apl 1/95. Wt 133½ pds. P 70. Apr 30/95. No change noticeable from month to month.
to Summary Nurses Notes by Dr. Phelps. Quiet: a case of mild dementia: memory exceedingly poor:
Aug. 1/97 Physical condition uniformly good: somewhat incoherent. Nov 22 sent down to Infirmary, remained a few days: seemed to have a slight cold & fever. Remained upon sick ward during most of December Trans. Dec. 21/96 to Bd. On Jan. 6 commenced to work in kitchen: Jan 16 had a spell as if fainting: was very weak during rest of day: said he felt pretty well the next day: No change noted from this time on, in physical condition: Wt. 134 at beginning & 138 at end of period.

Trans for Book A page 376

Personal and Medical History of Michael Ryan #2

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy Sheriff Haas, with the following history of case. No history of either consanguinity or heredity. This is 1st attack; (has not previously been in Hospital); first symptoms appearing 6 weeks ago: disease seems increasing; but is variable & there are rational intervals if at regular intervals, unknown. Derangement now manifested by general confusion as to marriage and domestic relations. Is disposed to injure others; not suicidal, nor filthy nor destructive. No peculiarities as previously shown. Patient is a moderate drinker. Has had no severe diseases &c. Has been in [illegible] treatment. [illegible] thought; did [illegible] the above, no[illegible] Bible &c." A[illegible] attempt at [illegible]

Oct 25 Oct 25/93. [illegible]

" 26 no injuries or p[illegible]

" 27 bowels seem no[illegible]

" 28 AM. Pulse 76 slept well, last night [illegible] regular. Hardly ever speaks to any of his fellow-patients. Appears to be quite rational, however. Was examined in office today. Does not realize his condition. "Considers himself perfectly sane". No delusions or hallucinations were brought out.

" 29 Oct 29/93. Restless 2 hours, sleeping 7 hours, last night. AM. Pulse 82. T @ 98.8. Quiet; well-behaved.

" 30/31 Oct 30/93. Slept 6 hours, restless for 3 hours or so, last night. Am. " 78 " 100.2. Oct 31/93. Passed last night, about as the one preceding. AM. Pulse 70. T @ 100.2 (heated). Appetite is good; bowels regular.

Nov 1 Nov 1/93. Restless 4 hours, sleeping 5 hours, last night. AM. Pulse 98. T @ 100. (heated). T @ 99.4. —

" 2 Weight today 154 pounds; a gain of 5 pounds, since admission. Nov 2/93. AM. Pulse 90. T @ 101.2

" 3 Nov 3/93. Am. Pulse 90 T @ 100.2 (when heated); T @ 99.2. (when cool). Appetite continues good.

" 4/5 Nov 4/93. Am. " 80 " 100 (taken when heated). Nov 5/93. Am. Pulse 80. T @ 98.8. (not heated).

" 6 Nov 6/93. Am. " 86 " 98.6. Seems to be in a bewildered state of mind & occasionally becomes quite excited. Works in ward & writes quite often. Nov 7/93. AM. Pulse 98. T @ 100. (heated). T @ 99.6 (not heated).

" 7 Nov 8/93. Patient has been generally restless at night, during past week, from 3 to 4 hours and has slept only 5 to 6 hours, each night. This AM. Pulse 76. T @ 99. Appetite has been uniformly good; bowels normal. He seems in a fairly quiet, yet Chronic, weakened mental State. Works in ward.

" 8

" 30 Nov 30/93. Appetite continues good; bowels regular. Behavior good. Seems to be rather nervous, at times. Shows incoherence of speech. Works some in ward. Habits are clean. (See attached record of Pulses & Temperatures).

Dec 1/8 Dec 1/93. Wt 163 pds. Pulse 66. (Has gained 9 pounds, in weight in the past month). Dec 18/93. Is deluded; thinks himself a detective & that he was sent down here by the "Authorities of St Paul". Dec 24/93. Struck a fellow-patient (A Spansberg) with a shoe this evening (after night-watch came on duty), inflicting a wound, in scalp. Dec 31/93. Appetite Continues good; bowels normal. Is fairly well-behaved. Once in a while, he will get to quarrelling with the other patients, when he becomes quite noisy. Appears to have a mania for sewing any thing clothes & generally will be found at this kind of work. Habits are cleanly.

Jan 1/31 Jan 1/94. Wt 159 pounds. (a further gain in flesh). Pulse 72. Jan 31/94. Appetite good; bowels regular. No delusions noted, though he seems to have a mania for sewing, as he is always sewing at something. Talks apparently quite rationally. Works some in ward. Habits clean.

Feb 1/ Feb 1/94. Wt 159½ pds (still gaining in flesh). Pulse 84. Feb 22/94. Is well-behaved, though, [illegible]

Michael Ryan

for miss Mary
griffin from
Michael Ryan
Rushes 3 times
round Ride Rope
Bed from Bed
home with you But
it is the fault of
God that we
are Buried in
will Bee if Be
time mountain
Bee of some one
from you I have
Bee Buried in
the Burning Room
Five Nine Bed

Personal and Medical History of Michael Ryan #2

16 sheets

[illegible] talks incoherently at times - Habits are clean, but [illegible] on the ward. Physical condition good.

[illegible] under the "Law of 1893" recently declared illegal. [illegible] secured under "new Committment Papers" from [illegible] judicial change, at this date. —

[illegible] months in past month). Pulse 66. Mar 31/94. Appetite good; bowels regular. Is well behaved. Quite [illegible] delusions. Works in dining room. Physical [illegible] feels discontented at being kept here.

[illegible] months in the past month). Pulse 80. Apl 16/94. Keeps [illegible] April 16/94. Was taken out by Attendant Justice [illegible] unemployed, made his Escape, today.

[illegible] charged —

[illegible] Nelsen

[illegible] same, from month to month. Has "spells" when he will [illegible] July 1/95. Wt 128 pds. Pulse 90. July 31/95. Does not sleep well: [illegible] talks delusions. Memory very poor. Works in workhouse & in kitchen. [illegible] 129 pds. Pulse 84: Oct 1/95. Wt 131 pds. Pulse 82. Oct 31/95. A very quiet, well-behaved & agreeable [illegible] about 3 hours, every day, in main kitchen). Talks but little, [illegible] nuts. Habits very neat & clean. Nov 2/95. Wt 132½ pds. Pulse 80. [illegible] Wt 130½ pds. Pulse 78. Jan 2/96. Moved to B 2.

[illegible] 31/96. No improvement noticed, mentally: at times, talks very incoherently. Has many delusions. Memory very poor. Works in main kitchen. Health seems good.

Feby 1/29 Feb 1/96. Wt 133 pds. Pulse 66. Feb 5/96. Works in Main kitchen every day. Feb 29/96. Behavior good: very quiet: no trouble to anyone. Has delusions & talks very incoherently: memory poor: physical condition good: works in kitchen part of every day. Sleeps well. Appetite good: bowels regular. Mar 2/96. Wt 133 pds. Pulse. Mar 30/96. Mental Condition not improved. Works in kitchen every day. Apl 1/96. Wt 133½ pds. P 70. Apl 30/96. No change noticeable from month to month.

Mar 2/30 Apl 1/30 May 1/95 to Aug. 1/97 Summary Nurses Notes by Dr. Phelps. Quiet: a case of mild dementia: memory exceedingly poor. Physical condition uniformly good: somewhat incoherent. Nov 24 sent down to Infirmary, remained a few days: seemed to have a slight cold & fever. Remained upon sick ward during most of December Blanks. Dec. 21/96 to B 2. On Jan. 6 commenced to work in kitchen: Jan 16 had a spell as if fainting: was very weak during rest of day: said he felt pretty well the next day: No change noted from this time on, in physical condition: Wt. 134 at beginning & 138 at end of period.

Trans for Book A page 376

Personal and Medical History of Michael Ryan #2

EMERT, FOLAN & CHAMBERS, DAVENPORT, IOWA.

1893 I was brought here by Deputy Sheriff Haas, with the following history of case. No history of either consanguinity or hereditary. This is 1st attack; (has not previously been in Hospital); first symptoms appearing 6 weeks ago: disease seems increasing; but is variable & there are rational intervals if at regular intervals, unknown. Derangement no[ticed] and domestic relations. Is disposed to injure others [illegible] peculiarities & previously shown. Patient is a m[an] Has bee[n] treatme[nt] thought[s] - the abo[ve] Bible attemp[ted]

Oct 25 no injur[y] " 26 bowels [illegible] " 27 Am. Pul[se] " 28 kept w[ell] of his fellow-patients. Appears to be quite rational, [but] realize his condition. Considers himself perfectly sa[ne]

" 29 Oct 29/93. Restless 2 hours, sleeping 7 hours, last nig[ht]
" 30/31 Oct 30/93. Slept 6 hours, restless for 3 hours or so, las[t] night, about as the are preceding. Am. Pulse 70. T[emp]
Nov 1 Nov 1/93. Restless 4 hours, sleeping 5 hours, last nigh[t]
" 2 Weight today 154 pounds; a gain of 6 pounds, En[tered]
" 3 Nov 3/93. Am. Pulse 90 T[emp] 100·2 (when heated); T[emp]
" 4/5 Nov 4/93. Am. " 80 " 100 (taken when heated).
" 5/6 Nov 5/93. Am. " 86 " 98. Seems to be in a[n]
" 7 quite excited. Works in ward & writes quite often. [illegible]
" 8 Nov 8/93. Patient has been generally restless at nights, during past week, [illegible] has slept only 5 to 6 hours, each night. This Am. Pulse 76. T[emp] 99. Appetite has been uniformly good; bowels normal. He seems in a fairly quiet, yet Chronic, weakened mental State. Works in ward.
" 30 Nov 30/93. Appetite continues good; bowels regular. Behavior good. Seems to be rather nervous, at times. Shows incoherence of speech. Works some in ward. Habits are clean. (See Attached record of Pulses & Temperatures).
Dec 1/2 Dec 1/93. Wt 163 pds. Pulse 66. (Has gained 9 pounds, in weight in the past month). Dec 1/93. Is deluded; " 14 thinks himself a detective & that he was sent down here by the "Authorities of St Paul". Dec 14/93. Struck a fellow-patient (N. Spansberg) with a shoe this evening (after night-watch came on duty), inflicting a wound, " 31 on scalp. Dec 31/93. Appetite Continues good; bowels normal. Is fairly well-behaved. Once in a while, he will get to quarrelling with the other patients, when he becomes quite noisy. Appears to have a mania for sewing and liking clothes & generally will be found at this kind of work. Habits are cleany.
Jan 1/31 Jan 1/94. Wt 169 pounds. (a further gain in flesh). Pulse 72. Jan 31/94. Appetite good; bowels

Personal and Medical History of Michael Ryan #2

(1893 cont'd)
Jan 31 regular - no delusions noted, though he seems to have a mania for sewing, as he is always sewing at something. Talks apparently quite rationally. Works some in ward. Habits clean.
Feb 1/28 Feb 1/94. Wt 175½ pds (still gaining in flesh). Pulse 64. Feb 22/94. Is well-behaved, though, Talks incoherently at times. Habits are clean, but [illegible] in the ward. Physical condition good.
[illegible] under the "Law of 1893" recently declared illegal.
[illegible] returned under "new Committment Papers" from [illegible] (no special change) at this date. —
[illegible] (no sounds in past month). Pulse 66. Mar 31/94. Appa-petite good; bowels regular. Is well behaved. Quite [illegible] manifests delusions. Works in dining room. Physical [illegible] feels discontented at being kept here.
[illegible] (no sounds in the past month). Pulse 80. Apl 10/94. Keeps [illegible] April 16/94. Was taken out by Attendant Justice [illegible] to be employed, made his Escape, today.

[illegible] discharged —

Nelsen

[illegible] the same, from month to month. Has "spells" when he will [illegible] July/95. Wt 128 pds. Pulse 90. July 31/95. Does not sleep well: [illegible] still shows delusions. Memory very poor. Works in wardsman & in kitchen. [illegible] 129 pds. Pulse 84. Oct/95. Wt 131 pds. Pulse 84. Oct 31/95. Is very quiet, well-behaved & agreeable [illegible] about 3 hours, every day, in main kitchen). Talks but little, [illegible] nuts. Habits very neat & clean. Nov 2/95. Wt 132½ pds. P 80 [illegible] Wt 130½ pds. Pulse 78. Jan 2/96. Moved to B3.
[illegible] 31/96. No improvement noticed, mentally: at times, talks [illegible] incoherently. Is many delusions. Memory very poor. Works in main kitchen: health seems good.
Feb 1/29 Feb 1/96. Wt 133 pds. Pulse 60. Feb 15/96. Works in Main kitchen, every day. Feb 29/96. Behavior good: very quiet: no trouble [illegible] anyone. Has delusions & talks very incoherently: memory poor: physical condition good: works in kitchen, part of every day. Sleeps well. Appetite good: bowels regular. Mar 2/96. Wt 133 pds. Pulse. Mar 30/96. Mental Condition not improved. Works in kitchen every day. Apl 1/96. Wt 133½ pd. P 70. Apl 30/96. No change noticeable from month to month.
Apl 1/30 May 1/96 to Aug 1/97 Summary Nurses Notes by Dr. Phelps. Quiet: a case of mild dementia: memory exceedingly poor: Physical condition uniformly good: somewhat incoherent. Nov 22 sent down to Infirmary, remained a few days: seemed to have a slight cold & fever. Remained upon sick ward during most of December Exams. Dec. 21/96 to B2. On Jan. 6 commenced to work in kitchen: Jan 16 had a spell as if fainting: was very weak during rest of day: said he felt pretty well the next day: No change noted from this time on, in physical condition: Wt. 134 at beginning & 138 at end of period.

Trans for Book A page 376

Personal and Medical History of Michael Ryan #2

HERBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriff [illegible] from [illegible] Co. either consanguinity or heredity. This is 1st attack. Duration of symptoms appearing 6 weeks ago: disease seems [illegible] intervals [illegible] marriage [illegible] No [illegible] se ve. [illegible] edical [illegible] n, of [illegible] aid [illegible] book, [illegible] with [illegible] ity; [illegible] od; quiet. [illegible] and [illegible] any [illegible] t-tant. [illegible] ved. [illegible] last [illegible] ular. [illegible] ood.

Oct 25 " 26 " 27 " 28 " 29 " 30/31 Nov 1 " 2 " 3 " 4/5 " 6 " 7 " 8 " 30 Dec 14 " 24 " 31 Jan 1/31

bowels seem normal; no cough noticed. [illegible]

Am. Pulse 76 Tc. 98.6. Tried to [illegible] away. Slept well, last night. Am. Pulse 92. Tc 98.4 [illegible] of his fellow-patients. Appears to be quite [illegible] realize his condition. Considers himself perf[illegible] [illegible]t-tant.

Oct 29/93. Restless 2 hours, sleeping 7 hours, [illegible] ved.

Oct 30/93. Slept 6 hours, restless for 3 hours [illegible] last night, about as the preceding. Am. Pulse [illegible] ular.

Nov 1/93. Restless 4 hours, sleeping 5 hours, [illegible] [illegible]

Weight today 154 pounds; a gain of 6 po[illegible] [illegible]

Nov 3/93. Am. Pulse 90 Tc 100.2 (when heate[illegible] [illegible] ood.

Nov 4/93. Am. " 80 " 100 (taken when heated). Nov 5/93. Am. Pulse 80. Tc 98.8. (not heated).

Nov 6/93. Am. " 86 " 98.6. Seems to be in a bewildered state of mind & occasionally becomes quite excited. Works in ward & writes quite often. Nov 7/93. Am. Pulse 98. Tc 100. (heated). Tc 99.6 (not heated).

Nov 8/93. Patient has been generally restless at night, during past week, from 3 to 4 hours and has slept only 5 to 6 hours, each night. This Am. Pulse 76. Tc 99. Appetite has been uniformly good; bowels normal. He seems in a fairly quiet, yet Chronic, weakened Mental State. Works in ward.

Nov 30/93. Appetite continues good; bowels regular. Behavior good. Seems to be rather nervous, at times. Shows incoherence of speech. Works some in ward. Habits are clean. (See Attached record of Pulses & Temperatures).

Dec 1/93 Wt 163 pds. Pulse 66. (Has gained 9 pounds, in weight in the past month). Dec 18/93. Is deluded; "Thinks himself a detective & that he was sent down here by the Authorities of St Paul". Dec 24/93. Struck a fellow-patient (N Spansberg), with a shoe, this evening, (after night-watch came on duty), inflicting a wound, on scalp. Dec 31/93. Appetite Continues good; bowels normal. Is fairly well-behaved. Once in a while, he will get to quarrelling with the other patients, when he becomes quite noisy. Appears to have a mania for sewing and fixing clothes & generally will be found at this kind of work. Habits are cleany.

Jan 1/94 Wt 159 pounds. (a further gain in flesh). Pulse 72. Jan 31/94. Appetite good; bowels

Personal and Medical History of Michael Ryan #2

(1893 cont'd)

Jan 31 regular - no delusions noted, though he seems to have a mania for sewing, as he is always sewing at something. Talks apparently quite rationally. Works some in ward. Habits clean.

Feb 1/28 Feb 1/94. Wt 175½ pds (still gaining in flesh). Pulse 84. Feb 22/94. Is well-behaved, though, at times, somewhat of a "cranky" disposition. Talks incoherently at times. Habits are clean, but he is not very tidy about his clothes. Works some on the ward. Physical condition good.

" 23 Feb 23/94. This patient was committed here under the "Law of 1893" recently declared illegal. He was today Taken out and Returned under "new Commitment Papers" from Olmsted County. Feb 28/94. No material change, at this date. —

Mar 1/31 March 1/94. Wt 181½ pds (a gain of 6 pounds in past month). Pulse 66. Mar 31/94. Apparently rests and sleeps well, at night. Appetite good; bowels regular. Is well behaved. Quite irritable & "cranky" at times. Still manifests delusions. Works in dining room. Physical condition good. Habits clean. At times, feels discontented at being kept here.

Apl 2/10 " 15 April 2/94. Wt 187½ pds (a further gain of 6 pounds in the past month). Pulse 80. Apl 10/94. Keeps about as described in last general note. April 16/94. Was taken out by Attendant Justice to clean and scrub the ward Stairway & while so employed, made his Escape, today.

— Discharged —

Andreas Nelsen

1895 Trows 200.

June 30 July 1/31 Aug 1 Sep 1 Oct 1/31 Nov Dec 1 1894 Jan 2/31/95 Feby 1/28 Mar 2/30 Apl 1/30 May 1/92 to Aug 1/97

June 30/95. No special change. Keeps about the same, from month to month. Has "spells" when he will talk to himself, all day. Works some in ward. July 1/95. Wt 128 pds. Pulse 90. July 31/95. Does not sleep well: noisy & talking a great deal, during the night. Still shows delusions. Memory very poor. Works on ward some & in kitchen. Aug 1/95. Wt 126½ pds. Pulse 68. Sept 1/95. Wt 129 pds. Pulse 84. Oct 1/95. Wt 131 pds. Pulse 84. Oct 1/95. Works, every day, in main kitchen. Oct 31/95. A very quiet, well-behaved & agreeable patient: very willing to work (works 2 or 3 hours, every day, in main kitchen): talks but little, & then very incoherently: makes no Complaints. Habits very neat & clean. Nov 2/95. Wt 132½ pds. Pulse (on account of general change of ward). Dec 1/95. Wt 129½ pds. Pulse 84. Jany 2/96. Wt 130½ pds. Pulse 78. Jan 21/96. Moved to B2. Jany 31/96. No improvement noticed, mentally: at times, talks very incoherently: has many delusions: memory very poor. Works in main kitchen: health seems good. Feb 1/96. Wt 133 pds. Pulse 60. Feb 15/96. Works in Main kitchen, every day. Feby 29/96. Behavior good: very quiet: no trouble to anyone. Has delusions & talks very incoherently: memory poor: physical condition good: works in kitchen part of every day. Sleeps well. Appetite good: bowels regular. Mar 1/96. Wt 133 pds. Pulse. Mar 30/96. Mental Condition not improved. Works in kitchen every day. Apl 1/96. Wt 133½ pds. P 70. Apr 30/96. No change noticeable from month to month.

Summary Nurses Notes by Dr. Phelps. Quiet: a case of mild dementia: memory exceedingly poor: Physical condition uniformly good: somewhat incoherent. Nov 22 Sent down to Infirmary, remained a few days: Seemed to have a slight cold & fever. Remained upon sick ward during most of December Trans. Dec. 21/96 to B2. On Jan. 6 commenced to work in kitchen: Jan 16 Had a spell as if fainting: was very weak during rest of day: Said he felt pretty well the next day: No change noted from this time on, in physical condition: Wt. 134 at beginning & 138 at end of period.

Trans for Book A page 376

Personal and Medical History of Andrew (J) Thornberg

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3533.

Residence, 400 - 4th St. N.E. Mpls.

Date Admission, 25th October 1893.

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

How Sent, H. A. Kerr. Ct. Commr. Hennepin County

Sex, Male

Age, 39.

Civil Condition, Widower (or divorced)

Children, one

Age Youngest Child, —

Occupation, Blacksmith

Degree Education, Common School

Profession Religion, Not a church member

Habits, unknown

Nativity, Sweden (Parents also born there)

Physicians Committing, H. N. McDonald & W. A. Jones

Correspondents, Annie Lindstrom (sister) 400 - 4th St. N.E. Mpls.
(Cousin) Gustav Oslund (same address).

No. for Year, 103.

Insane Relatives, unknown

Cause Exciting, Spiritualism

Cause Predisposing, previous attack

Form, Acute Mania (recurrent)

Accompanying Bodily Disorder, Says "inherits a chronic disease"

Suicidal or Not, No X

Date of this Attack, 5 weeks ago.

Duration, 5 weeks

No. of Attack, 2nd (at State Hospital 5 years ago)

No. of Admissions, 1st (here)

Age First Attack, about 34.

Time of Leaving, Jan 8' 94

Time in Hospital, 2 mo. 14 da.

Result, Rec.

Crossed from Dreamwood, April 1st, 1931 because illegally committed.

EXAMINATION ON ADMISSION.

Evidently Dt. Ehg. Oct 25th 93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Quick

Quick or Sluggish, Clear

MEMORY:

Past Events, } Seems Good

Recent Events, }

Special Subjects, }

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, fairly good

Own Mental State, says he was not a hypochondriac since he was brought here

Special Subjects,

EMOTIONAL STATE:

Normal, Calm, Nearly normal

Indifferent,

Exalted,

Depressed,

DELUSIONS: None noted

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None detected

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, quite free

GENERAL DESCRIPTIVE REMARKS:

says he said something to a girl at the house where he was living - supposed she thought he was "not right" - absent from D. who came from the Court-house examined him. Was not brought down to Court first, as judge wanted patient to give bonds. Delay on this account. Bonds could not be given & patient was sent here.

Personal and Medical History of Andrew Thornberg

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7½ WEIGHT, 165 lbs. NUTRITION, Quite good

WOUNDS OR ABNORMALITIES, Injury to right eye; no abnormalities noted.

TONGUE, Tremors, some fine Coatings, not much Promptness Movement, Quite prompt

PUPILS, Equality, Equal Size, Quite dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good with left eye; right eye injured at 16; Can see but poorly with it.

HEARING,

COORDINATION, Arms, finger to nose, eyes shut, quite accurate

Legs, standing eyes shut, slight swaying.

TREMORS, Hands, None Tongue, some fine

Facial Muscles, None noted General, None noted

REFLEXES, Patellar, unequal; right about 7; left about 5 or 6.

Other Reflexes,

ARTICULATION, Hesitating, Good ~~Slurred,~~

FACIAL EXPRESSION, normal

SENSIBILITY, Normal

HEART, Sounds good

LUNGS, Sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Kept

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Yazoo Osk Hospital ONSET GRADUAL OR SUDDEN, 7 years ago

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

Mother or Mat. Relations, mother living; claims healthy.

Father or Pat. Relations, Don't know anything about his father.

Brothers or Sisters, no brothers: one sister living; healthy; one sister dead; consumption (supposed)

Personal and Medical History of Andrew Thornberg

EARLEY, FISCAR & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy Sheriff Uhlin, with following history. Unknown, as to consanguinity or heredity. This is 2nd attack. Was at State Hospital 5 years ago; recovered. First symptoms of this attack manifested 5 weeks ago: was incoherent; deluded &c. Disease appears increasing. Rational periods do not occur at regular intervals. Derangement known as Subject of Spiritualism; is incoherent; irrelevant, obscene &c. Is not suicidal. Was irritable, before the attack. Of intemperate, unknown. Not known, definitely, as to any severe disease &c but patient says "he inherits a chronic disease". He has not been restrained or confined. Supposed cause of the disease is Spiritualism. Has had no medical treatment. On personal examination, he talked of imaginary people; was incoherent in ideas; Talked & acted as if under some influence; expressed frequent delusions. Appearance and manner were excited. From other sources, we ascertain he is deluded; subject of Spiritualism; Hallucinations of hearing; irrelevancy; appetite is irregular; sleeps poorly.

Oct 25 Oct 25/93. On admission, was put on T3. Pulse 76. T. 98.8. Bodily condition clean. Has an injury to right eye; No abnormalities noticed. Oct 26/93. Restless 2 hours o/n, sleeping 6 hours, last night. AM. Pulse 74. T. 99. Appetite good. Bowels generally regular. No cough noticed. Quiet during " 26 day. Walk about hall; also goes walking with the rest. Talks freely; no delusions or hallucinations detected. No complaints or injuries to note. PM. Pulse 76. T. 98.8. Oct 27/93. Slept 7 hours, last " 27 night & was quiet. AM. Pulse 72. T. 98.6. Is quietly behaved. Makes no complaints. Talks freely. Reads some. Is in good bodily condition. PM. Pulse 74. T. 98.8. Oct 28/93. AM. Pulse 70 T. 99. " 28 PM. Pulses 74. T. 98.8. Oct 29/93 AM. Pulse 70. Went to Chapel today. Appetite Continues good. " 29 Talks freely. Spends a portion of his time in reading. Oct 30/93. Continues about the same from " 30 day to day. AM. Pulse 72. No delusions yet noted. When recently examined, in office, did not seem to realize his present state. Said "he was not a bit out of his mind, when brought here" — Oct 31/93. Always quiet & well-behaved. Pleasant in manner. Wants to go & work outside. — Nov 1 Nov 1/93. Has continued to rest & sleep well. Appetite has been good; bowels regular. Well-behaved. Nov 8/93. During this, the second week of his stay, pulse has become quite normal. Sleep has been good " 8 almost ever since his coming here. He has been uniformly quiet & well-behaved. No delusions have, as yet, been detected. Appetite Good. Bowels regular. Patient talks quite freely; reads a good deal of the time; plays games; attends services in Chapel; does not help with ward-work, but is desirous of working outside. Is in good physical health. Wt (on 1st Inst) 171 pds. Pulse 74. Has made some increase in flesh since coming. Nov 13/93. Has continued quiet and well-behaved. — " 13 Also has improved a good deal of late. Was today, transferred to T3. — Nov 19/93. Has sore eyes & says that " 19 they trouble him very much. Treatment given and they are now getting better. Nov 30/93. Patient is, at " 30 all times, quiet & well-behaved. Much inclined to be alone. Is on medicines.

Dec 2/93 Dec 2/93. Wt 185 pounds (still gaining considerably, each month); Pulse 75. Dec 31/93. A quiet patient, though inclined to be easily excited. Is somewhat hard to please. Appetite fair; bowels regular. Does not care to keep with the work on the hall. No special or distinct "spells" have been noted.

1894 Jany 1 Jan 1/94. Wt 185 pounds (a further gain in flesh); Pulse 80.

" 8 Jany 8/94. Patient has continued to improve & now seems to be all right.

Was today permitted leave for his home, in Minneapolis. On trial.

Crossed off the books — Illegally committed —

Personal and Medical History of Albert Kroeger.

— From 232 —

1894 Feb 18 but 2 hours, last night. Appetite good; bowels regular. Very restless today. Talks of going home. His physical condition is good. Since his return, has been restrained, by wristlets, at night 18 hours.

Mar 1 March 1/94. Was restless & noisy 5 hours during the night, slept only a couple of hours. Wt 115 pds. Pulse 72.

" 13 March 13/94. Since 1st Inst. has been, almost nightly, restless for from 3 to 5 hours, sleeping very poorly, as a rule, only from 4 to 6 hours. On only 2 nights has he slept well. Is restrained, by wristlets, each night

" 26 March 26/94. Sleep & rest at night do not improve much, if any. Still requires to be restrained, as above.

" 28/31 March 28/94. Has been very noisy, mostly & ugly, both Yesterday & today. March 31/94. Continues restless at night, sleeping poorly. Appetite very good; bowels seem normal. Is noisy, obstreperous & quarrelsome; restless by day also; his talk is mostly incoherent; habits are neat. Patient has required restraint each night (in all 279 hours) during month. Physical condition good; No improvement noticed.

Apl 1/12 April 1/94. Wt 122 pds. (a gain of 6 pounds, in past month). Pulse 76. April 12/94. Is still restrained, by

" 13 wristlets, in bed, each night. Is noisy & contrary, a good deal, in day time. April 13/94. No restraint

" 14/16 9 hours, last night. April 14/94. Restrained only for 4 hours, last night. April 16/94. Restrained 5

" 19 hours, during the night. April 19/94. Has a very restless, noisy "spell" today. April 21/94. Slept only

" 25/29 3 hours, last night. Is noisy & excited, today. April 25/94. Was vaccinated today. April 29/94. Was

" 30 restless 5 hours, during the night. April 30/94. Has been better behaved, at night, & has been in less such restraint (only 11½ hours during this month); No improvement to note in his condition, nor in his Conduct or behavior, by day. Received a cut on lip from blow given him by a fellow patient. Habits neat.

May 5/18 May 1/94. Wt 121 pds. Pulse 80. May 5/94. Has been stupid & drowsy for the last 5 days. May 18/94. At times,

" 31 noisy, disobedient & inclined to be ugly; very annoying to the other patients: quite often receives knocks in fights. May 31/94. Almost nightly restless; quite often noisy; sleeps poorly. Continues noisy & sometimes ugly & annoying, by day. Talks sometimes rationally & again incoherently. Habits neat: physical condition good.

June 1/30 June 1/94. Wt 121 pds. Pulse 96. June 30/94. Continues about as described in last note. Is very troublesome.

July 1/11 July 1/94. Wt 120 " 64. July 11/94. Had a "crying spell." Has these occasionally. —

" 31 July 31/94. During past 3 months, there is no improvement to note, mentally: behavior, the past month, has, however, been somewhat better. Appears stupid; does not talk much, but generally understands, when spoken to. Seems more restful, at night. Habits neat. Physical health is good.

Aug 1/25 Aug 1/94. Wt 121½ pds. Pulse 64. Aug 25/94. Visited by his brother. Aug 31/94. Does not improve any; Seems growing worse. Has been noisy, restless & excited at night, especially so since 19th Inst. Also extremely noisy by day, ugly & at times violent. Very stubborn & contrary. Talks quite rationally, when spoken to. Habits neat. Sep 1/94. Wt 124 pds. Pso. Sep 7/94. Visited by his sister.

Sep 1/ " 15 Seems stupid & dazed. Sep 15/94. Has been in a stupid & dazed condition the past week or so;

" 20 seems somewhat brighter, today. Complains of constipation; was given a cathartic. Sep 20/94. Has had Continuous "noisy spells" by day. Noisy restless & excited by night. Wants a new head. (Deluded).

" 26 Sep 24/94. Is so very bad today that it requires 2 attendants to hold him. "Want to go home". — " 25 Was given a hypodermic at 3 PM. Became more quiet afterward. Sep 26/94. Complains of being dizzy.

" 28 Sep 28/94. Complains, every day, of being pounded on the head & of being dogged. Of medicine being " 30 poured in his ears". — Sep 30/94. Behavior, during the whole month, has been of the worst kind. He has been noisy, restless & excited both by day & night. Has been given hypodermics quite often but these do not seem to have had much, if any, effect upon him. He has been very ugly, quar-

(carried to 384)

Personal and Medical History of Herman Smith #2

GIBERT, POLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3534.

Residence, Burns, Anoka County

Date Admission, 27th October 1893.

Admitted by, D. Eby — Hour, 2.10 P.M.

How Sent, J.C. Frost, Jof P, Anoka County.

Sex, Male

Age, 38 years

Civil Condition, married

Children, 3

Age Youngest Child,

Occupation, Farmer

Degree Education, Common School

Profession Religion, not a church member

Habits, Intemperate

Nativity, Germany (parents also born there).

Physicians Committing, Thos. J. Reid and D.C. Buckham

Correspondents, none given in papers

Family Physician N.K. Whittemore. Elk River, Minn

No. for Year, 104.

Insane Relatives, None

Cause Exciting, obscure; trouble in central Nervous System

Cause Predisposing, not given

Form, Acute Melancholia

Accompanying Bodily Disorder, Convulsive attacks

Suicidal or Not, Talked of cutting throat.

Date of this Attack, 2 months ago

Duration, 2 months

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 38.

Time of Leaving, Feb 28 '94

Time in Hospital, 3 mos. 24 ds.

Result, Imp.

Commd. to the Insane Hospital at Anoka, Dec. 1st 1893. Legally committed.

EXAMINATION ON ADMISSION.

Exd by Dr. Eby Oct 28/93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Quick

MEMORY:

Past Events, fairly good

Recent Events, not to good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, dull

Correct or Illusive, Illusive as to some things

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, poor

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Denies any drink habits; only takes a little beer. Tells a long and incoherent story of some old man building a large house for him on account of his having been in Jail for this old man saying that he (patient) told him to build this house - Says there was no reason whatever for sending him here —

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Slightly

DELUSIONS:

Systematized ~~or Not~~ of persecution &c.

Special Subjects,

Transitory or Not,

HALLUCINATIONS: ?

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, In some ways, incoherent; in others not. Incoherent as to subject of this building? —

Personal and Medical History of Herman Smith #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9½ WEIGHT, 141 pounds NUTRITION, only fair

WOUNDS OR ABNORMALITIES, none noted

TONGUE, Tremors, some coarse Coatings, quite heavy Promptness Movement, prompt

PUPILS, Equality, equal Size, slightly dilated

Response Light, Yes Accommodation, Yes

SIGHT, probably good

HEARING, seems good

COORDINATION, Arms, in usual test, some inaccuracy, especially with left hand.

Legs, standing, eyes shut, some slight swaying.

TREMORS, Hands, none special Tongue, some coarse

Facial Muscles, — General, none

REFLEXES, Patellar, equal; absent.

Other Reflexes,

ARTICULATION, ~~Hesitating~~, fairly good ~~Slurred~~, some foreign accent

FACIAL EXPRESSION, slightly depressed

SENSIBILITY, normal

HEART, Sounds, good

LUNGS, Sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Record kept

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 2 months ago ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, mother dead

Father or Pat. Relations, father died old age.

Brothers or Sisters, 2 brothers, farmers in this county - healthy. 2 sisters living - claim healthy —

No history of heredity obtained.

ABBOTT, FIGLAR & SWANDERS, DAVENPORT, IOWA

1893

Was brought here by Sheriff John Twomey attended by H.C. Souers, with following history. There is no history of consanguinity or heredity. This is 1st attack, first symptoms appearing 2 months ago, by repeated walking & fretting about living everything. Went to bed in day time; destroyed clothing. Disease seems increasing, but is variable; rational periods at irregular intervals. Derangement is now shown by his talking of dying & of leaving his family. Is not disposed to injure others. Has talked of cutting his throat, but propensity not now active. Is of filthy & destructive habits. — No peculiarities previously shown. Habits are intemperate; parents probably, also. Patient has convulsive attacks. Has also had sunstroke & was sick for 2 weeks. Has not been restrained or confined. Cause of disease obscure; trouble in central nervous system. Has had no medical treatment. On personal examination, at first was violent to Sheriff & Witnesses; later, in examination, was sullen & refusing to answer any & all questions; refused to talk; witnesses testified to his melancholy "Spells" & to violent attacks. ——

Oct 27 Oct 27/93. On admission, was quiet. Is in fair physical condition. Was put on C3 — Bodily condition dirty; no injuries or peculiarities observed. Pulse 72 R 16 — T. 99.4. Appetite very good. Claims to have had no movement of bowels for 48 hours. No cough noticed. Behavior is fairly quiet. Was a little excited & rugby in afternoon & struck a fellow patient with his fist. Is slightly bewildered but he
" 28 answers questions quite rationally. Oct 28/93. Was noisy & restless for 3 hours; but slept about 6 hours, last night. Am. Pulse 68. T. 99.2. R 20. Bowels not take medicine. Bowels still constipated and Complains of pain in knee & in chest. Is fairly well-behaved; sleeps considerably; has little to say. Seems stupid; bewildered; somewhat excited, at times. Was examined in office today. Showed Considerable mental confusion. Perception, dull & illusive. Conversation, at times, very incoherent. Also manifests
" 29 delusions of persecution &c. Oct 29/93. Was quiet, sleeping 7 hours, last night. AM. Pulse 66 R 21 T. 99.2. Appetite poor. Ate no breakfast or supper. Seems very stupid, dazed. Shows delusions; "Is dead; poisoned &c". At 8 PM, had a spell. Fell on floor; was very pale. Put to bed. Revived at
" 30 once. Said "he had been poisoned". Oct 30/93. Was noisy for 2 hours, last night, but slept 7 hours. — Bowels moved during the night. AM. Pulse 62. Ate no breakfast but took a good dinner & supper. Is quietly behaved. Walks the floor, Talks to room. Has been in a stupid condition nearly all day.
" 31 Bowels still constipated. Makes no Complaint. Oct 31/93. Slept but 5 hours last night, being restless for 4 hours. AM. Pulse 120. Appetite very good. Complains of pain in his stomach; probably from constipation. Talks very little; now stupid; very dull. Has delusions. Says "there is a hole in his abdomen".

— Nov 1/93 (Wt. 136 lbs. Pulse 72) —

Nov 1 Nov 1/93. Slept somewhat better, 7 hours, last night. Was restless for a while. AM. Pulse 90. Quietly behaved. Is very stupid & dull. Bewildered. Talks only when spoken to. Was taken out for a
" 2 walk twice today. Bowels have moved. Nov 2/93. Was quiet & slept 7 hours, last night. At 6 Am had another "Spell". Fell on the floor; was in a helpless state. Pulse & Respiration were normal. No symptoms of convulsions; apparently unconscious. Remained so for half an hour. Revived and called for something to eat. Went out walking again today, with the other patients —
" 3 still quietly behaved. Speaks only when addressed. Nov 3/93. At 5:30 AM. was found in a stupid, helpless condition. Pulse 72. R 19. Could not be roused from bed until 8 AM. Ate no breakfast. Was out walking, with the others, in afternoon. Answered questions in a rational

1893 (Cont'd)

Nov 3/4 manner. Appetite good. Bowels have moved. Nov 4/93. Apparently sleeps quite well, at night. Am. Pulse 72. Appetite continues good. Quietly behaved, though somewhat restless, walking the floor a good deal. When sitting on a bench, has a peculiar "wearing" motion;
" 5 seems stupid. Does not talk much. Nov 5/93. Quiet, sleeping 7 hours, last night.
" 6 No change in Conduct or behavior, by day. Nov 6/93. Was noisy & restless for 5 hours, and slept but 2 hours, last night. Am. Pulse 90. Appetite very good. Bowels are becoming more regular. Had 2 "Spells" similar to the previous ones, while out walking in forenoon and
" 7 afternoon. Is uniformly quietly behaved. Nov 7/93. Was extremely noisy for 3 hours, Sleeping but 5 hours, last night. Am. Pulse 82. Has little to say. Bowels are again Constipated.
" 8 Nov 8/93. Slept better, 7 hours, last night, was, however, restless 2 hours or so. Am. Pulse 70. Had a "Spell" at 7 Am: fell on the floor in a helpless condition & remained so for 2 hours. Also had a "Spell" of crying. Has "fears of remaining here, forever". Bowels still Constipated.
" 9 Nov 9/93. Quiet & slept well, last night. Am. Pulse 70. Appetite very good. Bowels are irregular. Is quietly behaved. Had a "Spell" at or on the grounds to day. Had to be carried in. Revived in ½ an hour. Has very little to say. Shows delusions "of fear &c". Had another
" 10 such "Spell" this afternoon. Nov 10/93. Was extremely noisy for 3 hours, during the night. —
" 15 Nov 15/93. Is noisy, for from 1 to 3 hours, each night. Recently has had 2 of his "Spells" (on on 10th & one on 14th). Still holds delusions. Believes he is dead & in "hell". Refuses food, occasionally. Had another of these "Spells" today, about rising hour; was put to bed at 7 AM. Pulse 68. R 16.
" 16 Remained in bed nearly all day. Has "fears of cats in his room". Nov 16/93. Slept well, last night. AM. Pulse 72. Remained in bed nearly all day; was up for a short time, but soon collapsed &
" 17 was put back to bed. Slept well during the night. Nov 17/93. Complains of being sick and
" 18 unable to get up. Appetite fair. Remained in bed all day. Nov 18/93. Had a "Spell of Crying" this morning. Claims to have died during the night. Also had severe "crying Spell" in Evening. Has been in bed all day. Appetite poor. Pulse 76. Nov 20/93. During past week,
" 25 patient has remained in bed; has slept well, at night. Pulse has been somewhat below normal. Appetite, for the 1st part of week, (when he took milk only), has somewhat improved. Bowels are badly constipated. Is on medicines. Is excited & restless, during the day & has frequent "Crying Spells". Still manifests delusions & hallucinations. Has "Spells" of fright. "Fears of being killed" &c. — Was today transferred to C2 (at 12 noon). Put to bed
" 26 Is sick. Seems to be in a stupor. Bowels have not moved today. Is not inclined to talk, at all. Nov 26/93. Has "Spells" when he says he is going to die". Will then close his eyes and not talk for some time.
" 27/28 Nov 27/93. Is continually getting out of bed & coming out on the hall. Nov 28/93. Patient has been
" 29/30 fairly quiet, today. Nov 29/93. Bowels have moved. Appetite not very good. Nov 30/93. Very restless and noisy. M. B. "Blistered". Does not want to stay in bed.

Dec 1 Dec 1/93. Continually getting out of bed. Says "he wants to get up". Is eating fairly well, today. —
" 2 Dec 2/93. Up, in ward, & dressed. Ate but little breakfast & dinner. Undressed himself. Soiled the floor.
" 3 Says "he wants to go back to bed". 5 PM. Transferred to B3rd. Dec 3/93. Slept well, last night. Is today, walking about ward a good deal; very restless, but quiet. Ate a little at each meal. Has kept
" 31 himself clean. "Wishes to go downstairs". Dec 31/93. Appetite medium; bowels regular. So

(carried to 115)

EBBERT, FICAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3536.
Residence, Minneapolis (1200 - 4th St. So).
Date Admission, 30th October 1893
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, John A. Steele Jail P., Hennepin County
Sex, Male
Age, 73 Years
Civil Condition, Widower
Children, Three
Age Youngest Child, ——
Occupation, Laborer
Degree Education, none
Profession Religion, Lutheran
Habits, unknown (probably intemperate)
Nativity, Norway (Parents also born there) —
Physicians Committing, Thos. F. Quinby and A. P. Williamson
Correspondents, Frederick Wettergren - 1200 - 4th St. So. (Son in law)

No. for Year, 106.
Insane Relatives, unknown
Cause Exciting, Senility —
Cause Predisposing, probably injuries in war of 1865
Form, Senile Dementia
Accompanying Bodily Disorder, none definitely stated
Suicidal or Not, has threatened suicide.
Date of this Attack, Several Years ago
Duration, Several years
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, not given
Time of Leaving, Apr. 11. 1898
Time in Hospital, 4 yrs. 5 mos. 12 d.
Result, Died - Apoplexy.
dc

EXAMINATION ON ADMISSION.

Exd by Drs Ely & Herzog Dec 8/93. MENTAL CHARACTERISTICS.

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

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

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

REASONING POWER:
Ordinary Subjects,
Own Mental State, does not know why he was sent here
Special Subjects, thinks he is in as good "mind" as he ever was

GENERAL DESCRIPTIVE REMARKS:
Speaks only "Norsk". Examination made under some difficulties. Says has had a dizziness some two hundred years. Also has some drink-habits Gait is spastic & ataxic also.

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

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

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent, at times; at others, incoherent
Voluble or Reticent, Inclined Voluble - very much so, at times -

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHA...

HEIGHT, ✓

NUTRITION, quite good for one of his age
d: last joint of rt. thumb & left forefinger some.
ptness Movement, prompt
nal
Good —
mt, Eyes Shut, Quite good.
s
e.
...clonus —
...nating, Yes Slurred, Yes
FACIAL EXPRESSION, blank
SENSIBILITY, ✓
HEART Dilat hetabi murmurs at abob. Pantic sound a little accentuated.

Case No. 3536. Frederick Anderson. Vol. 25.

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

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Several Years ONSET GRADUAL OR SUDDEN, Gradual

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

Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

No hereditary history attained —

Personal and Medical History of Frederick Andresen

HERBERT, PIELAN & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3536.

Residence, Minneapolis (1700 - 11th St So).

Date Admission, 30th October 1893

Admitted by, Dr. Phelps Hour, 7 PM.

How Sent, John H. Steele.

Sex, Male

Age, 73 years

Civil Condition, Widower

Children, Three

Age Youngest Child, —

Occupation, Laborer

Degree Education, No

Profession Religion, Luther

Habits, unknown

Nativity, Norway (Parents

Physicians Committing, Dr's C

Correspondents, Frederick Wetterquist (Son in law)

No. for Year, 106.

Insane Relatives, unknown

Cause Exciting, Senility -

Cause Predisposing, Probably injuries in war of 1860

Frederick Andresen
Jeg har lest Hjemmel
720 Aar

Fred Andresen
12/8/93

EXAMINATION ON ADMISSION.

Exd by Dr. Ely & Herzog Dec 8/93. MENTAL C

MENTAL ACTIVITY:

Clear or Confused, fairly Clear

Quick or Sluggish, sluggish

MEMORY:

Past Events,

Recent Events, Seems good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects,

Own Mental State, } does not know why he was sent here

Special Subjects, } thinks his mind as good "mind" as he ever was

GENERAL DESCRIPTIVE REMARKS:

Speaks only "Norsk". Examination made under some difficulties. Says has had a dizziness some years. Also has some drink-habits. Gait is spastic & ataxic also.

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None noted

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent, at times; at others, incoherent

Voluble or Reticent, Rational Voluble - voluminous, at times -

Personal and Medical History of Frederick Andresen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ WEIGHT, 143 pds. NUTRITION, quite good for one of his age

WOUNDS OR ABNORMALITIES, 2 scalp wounds on left side of head: last joint of rt. thumb & left forefinger gone.

TONGUE, Tremors, decided tremors Coatings, somewhat pale; yellow coated Promptness Movement, prompt

PUPILS, Equality, equal Size, normal

Response Light, not very good; slow Accommodation, good -

SIGHT, some impairment (slight).

HEARING, seems fairly good, for an old man.

COORDINATION, Arms, finger to nose, eyes shut, some inaccuracy.

Legs, Standing unfoot; (Can scarcely do this). Standing, Eyes Shut, quite good.

TREMORS, Hands, some Tongue, decided

Facial Muscles, quite marked General, some

REFLEXES, Patellar, Equal - about 4 - Dr. P's Scale

Other Reflexes, slight ankle clonus -

ARTICULATION, Hesitating, Yes Slurred, Yes

FACIAL EXPRESSION, blank

SENSIBILITY, ✓

HEART, slight systolic murmur at apex; 2 aortic sound a little accentuated.

LUNGS, Seem all right.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Very long ONSET GRADUAL OR SUDDEN, gradual

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

Mother or Mat. Relations, } No hereditary history attained —

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Frederick Andresen

LEBERT, FIGLER & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriff Uhlen, with the following history. As to consanguinity or heredity, unknown. This is 1st attack, dating back several years ago; disease seems increasing, no rational intervals. Derangement now manifested by mental weakness, accompanied by volubility of speech; inability to confine his answers to the questions asked him. Been in U.S. 10 years but does not speak English. Secret disposed to injure others. Has threatened suicide, with a needle; and propensity is now active. No filthy habits. As to previous peculiarities &c, unknown. Habits unknown, but probably are intemperate. Has "spells" of falling, when he cannot see. Was injured in war of 1866, in several places. He has not been restrained or confined. Supposed cause of the disease is senility. Has not been under treatment. On personal examination, is garrulous; speaks Norwegian only, but is irrelevant & talks too much in reply to questions. Talks freely & connectedly but wanders from the subject under discussion. Appearance & manner, untidy, dull, heavy & stupid. Policeman who arrested him told Jailor that he had his clothes off, when arrested; was also, at that time, very drunk.

Oct 30 Oct 30/93. On admission, is in quite good physical condition for a man of his years. Was put on 13th — Pulse 70. R 30. Body in good sound condition; fairly well nourished. No injuries or peculiarities noted.

" 31 Oct 31/93. Did not seem to sleep well, last night. A.M. Pulse 84. R 28. Appetite good. Bowels regular. Is well-behaved, but very restless. Talks feebly & demented[illegible]. Complains of stomach-ache and dizziness. No cough noticed. Patient quite paretic. Nov 2/93. Wt 146 lbs. Pulse 100. —

Nov 1st Nov 1/93. Slept, last night, only 5 hours. A.M. Pulse 90. R 20. Appetite fairly good. Bowels seem regular. Patient was very restless all day; also, last night. Pulls off his clothes & is constantly complaining

" 2 of pains in the head, stomach &c. Nov 2/93. Was very restless, last night; slept but 2 hours. A.M. Pulse. R 22. Appetite rather poor; can't eat any solid food. Bowels regular. No cough noticed. Is well-behaved though very

" 3 restless. Cleanly in habits. Weak-minded. Nov 3/93. Slept poorly, last night; only 3 hours. A.M. P 88. R 22.

" 4 Appetite slightly better. Can eat no meat or solid food. Still very restless. Nov 4/93. Continually restless, last night; slept only 2 hours. A.M. Pulse 94. R 18. Appetite continues rather poor, still.

" 5 Nov 5/93. Quiet, sleeping 9 hours, last night. A.M. Pulse 80. Appetite still poor. Bowels regular.

" 6 Is not so restless as he has been. Habits cleanly. Nov 6/93. Again slept well, last night. A.M. Pulse 110, irregular. Appetite fairly good. Patient is well-behaved. Talks unconnectedly.

" 7/13 Nov 7/93. Again rested & slept well, last night. Nov 13/93. During this, the 2nd week of his stay, patient has rested & slept uniformly well, at night. Pulse has become regular & nearly normal. He has been quiet & well-behaved & less restless; Eats fairly well. Complains, occasionally, of headache. Patient has improved some, since his admission. Is better bodily healthy; has a better

" 21 appetite & seems, also, to have more intelligence. Habits are cleanly. Nov 21/93. Is quiet and inoffensive; seems to be reconciled to his surroundings. Has no complaints. Is well-behaved & cleanly in his habits. Talks readily and responds promptly to questions put. By behavior, however, evidently feeble-minded.

" 30 Nov 30/93. Patient seems to be able to walk a little more firmly, than when first admitted. Is also, apparently, somewhat brighter in his intellect. Talks readily. Well-behaved. Appetite fairly good. Bowels regular; no cough noticed. Habits are clean. ——

Dec 1st Dec 2/93. Wt 147 pounds. Pulse 92. Dec 15/93. Was visited by a friend, this forenoon. Dec 31/93. No change.

1894 Jan 1st / 31 Jany 1/94. Wt 156 lbs (a gain of 9 pounds in past month.). Pulse 108. Jan 31/94. Appetite good; bowels regular; no cough noticed. Walks with some difficulty, but is in good bodily health —

Personal and Medical History of Frederick Andresen

1894 cont'd

Jan 31 Behavior is unexceptionable. Has no complaints to make. Talks readily but is evidently feeble-minded. Is cleanly in personal habits. ——

Feb 1/94 Feb 1/94. Wt 154 lbs. Pulse 84. Feb 22/94. Apparently rests and sleeps well, at night. Had quite a severe cough & cold from 5th to the 9th inst, but he has now recovered from them. Is quietly behaved; inoffensive. Talks quite freely, but in a childish manner. Weak minded; habits cleanly.

" 24 Feb 24/94. This patient was Committed here under the Law of 1892; Recently declared unconstitutional. He was, today, Taken out and Returned under "new Warrant" from Olmsted County. Feb 28/94. Continues quiet & well-behaved. Makes no complaints. Talks readily in the Norwegian language, but does not know English. Appears slightly childish. Habits clean (Vaccinated 26th)

Mar 1/31 March 1/94. Wt 132 lbs. Pulse 80. March 3/94. Was struck by a fellow patient (J.H. Rhodes) and slightly cut on right ear and neck. March 31/94. Patient continues to have a good appetite. Bowels free; no cough noticed. Complains of stiffness in the knees & ankle-joints, which are swollen, but he now walks a little on the ward; was able hitherto. Is in fairly good physical condition. Mental condition unchanged. —

Apl 1/26 April 1/94. Wt 155 lbs. Pulse 88. April 26/94. Was struck, this morning, on both temples and on

" 30 breast by patient Rhodes; appears to have suffered considerably from the shock. Apl 30/94. Patient is still sick in bed; appetite is poor; bowels regular. He has a slight cough. Appears to be very weak & to have suffered severely from the blows he has received; is hardly able to move in bed & complains of great pain in the right & left breast. He is childish & weak minded. Habits are cleanly. —

May 1/25 May 1/94. Wt 144 lbs. (has lost considerably during past month). Pulse 89. May 5/94. Was confined to bed for the 1st three Days of the month with Stomach trouble & also a swelling of right knee & ankle — but

" 31 was sufficiently recovered on the 4th inst as to be able to get up & walk about ward. May 31/94. Does not change much, if any. Is well-behaved. Makes no complaints, except of general stiffness of joints apparently from rheumatic trouble. Cleanly in habits. Talks freely. Is weak minded. Health quite fair —

June 1/30 June 1/94. Wt 149 lbs. Pulse 80. June 30/94. No change to report. Lifts dead weight physically.

July 2/31 July 2/94. Wt 151 lbs (has regained Considerable of his lost flesh). Pulse 88. July 31/94. No noticeable Change.

Aug 1/31 Aug 1/94. Wt 151 " Pulse 78. Aug 31/94. Unsteady in gait and stiff in lower limbs. Is quietly behaved. Complains of rheumatism, at times. Talks childishly. Weak minded. Cleanly in habits.

Sep 1/30 Sep 1/94. Wt 158 lbs. (some 7 pounds gain in flesh). Pulse 84. Sep 30/94. No change to note. (Patient is a Senile Paretic; D.P.). Oct 1/94. Wt 159½ lbs. Pulse 82. Oct 31/94. About the same.

Nov 1st/30 Nov 1/94. Keeps in quite good flesh & physical condition. Nov 30/94. No special Change noticeable. He behaves well. Talks rationally; shows no delusions. Is childish. Had some trouble in

Dec 14 morning about; legs both him & at times they will swell up considerably. Habits are clean. Dec 1/94. Was today, kicked by a patient (Baker Young), in the testicles, causing them to swell up. was also struck, at same time, in the back of the head. Patient was transferred to the "sick ward", at 8 P.M. Testicles and penis are found to be badly swollen & blackened; patient was put to bed,

" 15 & flax seed poultice applied to injured parts. Dec 15/94. Slept 6 hours; restless 3 hours, last night.

" 16 poultices applied 4 times, today; he passes urine without much trouble. Dec 16/94. Slept 7 hours, restless thirteen, last night. Lies steadily in bed. Does not appear to suffer a great

" 17 deal of pain from injuries. Poultices are still applied, daily. Dec 17/94. Injuries fast improving;

" 22 poultices discontinued. Dec 22/94. Patient has been sleeping 6 to 7 hours, nightly. He has

(carried to 28)

Personal and Medical History of Frank Reidel

Previously Committed as Frank Joseph (Joseph Riebel) "Holy Joe"

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3538.
Residence, near Pennsylvania Ave. St. Paul
Date Admission, 1st November 1893.
Admitted by, S. Phelps Hour, 7 PM
How Sent, John B. Oliver, Jct C. Lauren County
Sex, male
Age, about 40
Civil Condition, widr
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, 8 Years. Military School
Profession Religion, Roman Catholic
Habits, not intemperate: good, so far as known
Nativity, Germany (Parents also born there).
Physicians Committing, C.C. Miller & A.B. Ancker
Correspondents, (Brother) Joseph Reidel, near Pennsylvania Ave St Paul



No. for Year, 108.
Insane Relatives, not stated (brother said to be).
Cause Exciting, Religion
Cause Predisposing, Heredity & previous attacks
Form, Paranoia
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, not
Date of this Attack, a number of years ago
Duration, several years
No. of Attack, not 1st (has had them 9 years)
No. of Admissions, 2nd
Age First Attack, not given
Time of Leaving, March 14th '94
Time in Hospital, 4 ms 14 ds.
Result, Improved

EXAMINATION ON ADMISSION.

Exd by) Dr Ely, Nov 11/93. MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, } Quite good
Recent Events, }
Special Subjects, }

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

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

EMOTIONAL STATE:
Normal, Calm, Normal & Calm
Indifferent,
Exalted,
Depressed, Says "he grieves some here".

DELUSIONS:
Systematized ~~or Not~~, on religious topics.
Special Subjects,
Transitory or Not,

HALLUCINATIONS: ?

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, voluble at times.

GENERAL DESCRIPTIVE REMARKS:
Conversation is continually about the Gospel & religion. Inclined to get excited, when talking on these subjects. Keeps his lips moving as if in prayer, while in office. Says he acts as he does (walking barefoot &c) because he must do so. "It is the will of God."

Personal and Medical History of Frank Reidel

(Joseph Riebel)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, " WEIGHT, " NUTRITION, Good
WOUNDS OR ABNORMALITIES, probably none
TONGUE, Tremors, very steady Coatings, very slight Promptness Movement, Quite prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, probably good
HEARING, normal
COORDINATION. Arms. ?

Case No.3538. Frank Reidel. Vol. 25.

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, no Slurred, foreign accent
FACIAL EXPRESSION, Good
SENSIBILITY, normal
HEART, Sounds, normal
LUNGS, Sounds are normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Previous attack ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother died of Cholera
Father or Pat. Relations, father died of Jaundice, probably.
Brothers or Sisters, 1 brother in this country, healthy; but said to be insane like patient.
2 brothers in old country — healthy —
1 sister " " "

Personal and Medical History of Frank Rudel

Previously Committed as Frank Joseph (Joseph Riebel) "Holy Joe"

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 9538.
Residence, near Pennsylvania Ave. St. Paul
Date Admission, 1st November 1893.
Admitted by, D. Phelps Hour, 7 PM
How Sent, John B. Olivier, Jef'n Co. Ramsey County
Sex, male
Age, about 40
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, 8 Years. Military School
Profession Religion, Roman Catholic
Habits, not intemperate; good, so far as
Nativity, Germany (Parents also born there).
Physicians Committing, C.C. Miller & A.B. Ancker
Correspondents, (Brother) Joseph Riedel, near Pennsylvania Ave St. Paul

No. for Year, 108.
Insane Relatives, not stated (brother said to be).
Cause Exciting, Religion
Cause Predisposing, Heredity & previous attacks
Form, Paranoia
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, Not
Date of this Attack, a number of years ago
Duration, several years
Result,



EXAMINATION ON ADMISSION.

Exd by) Dr. Ely, Nov 11/93. MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm, Normal & calm
Indifferent,
Exalted,
Depressed, Says "he grieves some here".
DELUSIONS:
Systematized ~~or Not,~~ on religious topics.
Special Subjects,
Transitory or Not,
HALLUCINATIONS: ?
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, voluble at times.

GENERAL DESCRIPTIVE REMARKS:
Conversation is continually about the Gospel & religion. Inclined to get excited, when talking on these subjects. Keeps his lips moving as if in prayer, while in office. Says he acts as he does (walking barefoot &c) because he must do so "it is the will of God."

Personal and Medical History of Frank Rudel (Joseph Riebel)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ~ WEIGHT, ~ NUTRITION, Good
WOUNDS OR ABNORMALITIES, probably none
TONGUE, Tremors, very steady Coatings, very slight Promptness Movement, Quite prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, probably good
HEARING, normal
COORDINATION, Arms, } Good, Unusual tests.
Legs, }
TREMORS, Hands, none Tongue, very steady
Facial Muscles, ~ General, none
REFLEXES, Patellar, equal; diminished — 2 or 3.
Other Reflexes,
ARTICULATION, Hesitating, no Slurred, foreign accent
FACIAL EXPRESSION, Good
SENSIBILITY, normal
HEART, Sounds, normal
LUNGS, Sounds are normal
EXAM. URINE.

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

HISTORICAL.

LENGTH OF INVASION, Previous attack ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died of Cholera
Father or Pat. Relations, father died of Jaundice, probably.
Brothers or Sisters, 1 brother in this country; healthy; but said to be insane like patient.
2 brothers in old country — healthy —
1 Sister " " " "

Personal and Medical History of Frank Riedel (Joseph Riebel)

FARLEY, FIOLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Deputy Sheriff Staas, with the following history of case. No history of consanguinity. Attacks have probably been many during past 9 years. Not much change in his condition since he was in Rochester Hospital. First symptoms of this attack manifested a number of years ago. Walking barefooted & bare-headed through the streets; hands clasped in prayer. Disease seems stationary. Not variable. Derangement is now shown as religion. Wanders about as he does, he says, "to save man". Neighbors have lately complained that the women and children are afraid of him; that he has been chasing the latter. Is neither dis-posed to injure others, nor suicidal, nor filthy nor destructive. There is no history of intemperance & nor of any severe disease or injury to head. Religion is the supposed cause of the disease. On personal examination, the above facts brought out. He talked of religion and of his reasons for his eccentricities. When examiner came to Central Police Station, they found patient on his knees. During the interview, he sat & talked with them (Physicians) upon his favorite topics. Appearance good; manner composed. He was lodged in Police Station on complaints of some woman, who said they were afraid of him, in the neighborhood.

Note — Note. Patient was here before, from June 2/90 to Jany 2/91. Was familiarly known in St Paul, as "Holy Joe". Brother is also supposed to be insane. During his then stay, he had several "spells" of praying & during which also, he would quite often refuse food & medicine; would go to bed from 1 day & part of one. Was also subject to hysteroid attacks - had 2 of them while here. Physical health was very good. (See Vol 14 page 69. No 2409). Previously committed as "Frank Joseph". —

Nov 1 — Nov 1/93. On admission, is in fair condition. Arrived here, as on previous occasion, barefooted & without hat. Was put on B7. Pulse 76. T(o) 98.6. Bodily condition very dirty. No injuries or peculiarities noted. —

" 2 — Nov 2/93. Was quiet, last night, & slept 8 hours. AM. Pulse 72 T(o) 98.6. Appetite good. Bowels regular. No cough noticed. Works some in dining room. Quiet. Stays in room, most of the time, when not at work. Very religious. Prays a good deal of the time. Talks freely, but chiefly on religion

" 3 — and the benefit of prayer. No complaints or injuries to note. PM. Pulse 74. T(o) 98.8. Nov 3/93. Slept 8 hours, last night. Was quiet. AM. Pulse 72. T(o) 98.8. Quiet; well-behaved. Walks hall; in the attitude of prayer; hands uplifted. Works willingly. Is in good physical condition. PM. P(o). T(o) 99.

" 4 — Nov 4/93. Again slept well, last night. Conduct & behavior by day, about as usual. Habits good.

" 5 — Nov 5/93. Talks quite freely, especially on subject of religion. Works some. Appetite good. No complaints.

" 6 — Nov 6/93. Continues about the same, from day to day. Wears his shoes now. Is very neat, clean & tidy.

" 7/8 — Nov 7/93. No material change. Always quiet & well-behaved. Nov 8/93. Prays a good deal. Talks on no

" 15 — subject except the benefits of prayer. Helps with ward-work. Nov 15/93. Sleep & rest at night, since last noted, have been uniformly good. Pulse quite normal. Appetite good. Is always quiet & well-behaved. Talks only on his favorite theme & gets quite earnest when he finds a listener. Prays a great deal in a seemingly very earnest manner. Attends Chapel-services regularly. Goes out walking with the rest. (Does not now go barefoot) Is always neat & tidy. Makes no complaints. Is in good physical health.

" 19/20 — Nov 19/93. Praying all night; slept none at all. Nov 20/93. Was praying a good deal of the time,

" 30 — last night; slept but 5 hours. Nov 30/93. Conduct & behavior does not change much. Health good.

Dec 11 — Dec 11/93. Wt. 188½ pds. Pulse 74. Dec 11/93. Complained of being homesick; went to bed for a while, today.

" 15 — Dec 15/93. Complains, today, of tooth-ache; face is somewhat swollen. Appetite is good. (Extra diet) - Still walks the hall; praying in his usual way, a great deal of the time. Does no work. — Health good. -

Personal and Medical History of Frank Riedel (Joseph Riebel)

1893

Dec 19/24 — Dec 19/93. Visited by brother, today. Dec 31/93. Apparently rests & sleeps well, at night. By day, walks the hall slowly, a good deal of the time, with hands uplifted in prayer. Appetite is good. Is on extra diet. Seems quite contented here "as he thinks he can do good work by his prayers." —

1894

Jan 2 — Jan 2/94. Wt 191 pds. Is gaining some in flesh & is in very good physical health. Pulse 74.

" 15 — Jan 15/94. Patient's condition does not change much, if any, from month to month. Still shows delusions as the subject of religion &c, praying, while he walks, a good deal of the time. Seems content to remain here - In very good health - Jan 31/94. Keeps about the same.

Febr 2/28 — Feb 2/94. Wt 192 pds. Pulse 76. - Feb 28/94. Conduct & behavior, by day, do not seem to change any from month to month, or from day to day. Still prays a great deal & is deeply still holds to his delusions. Is clean & tidy & of good personal habits. Physical condition good.

" 23 — Feb 23/94. This patient was committed here under the "Laws of 1893" recently declared unconstitutional. He was today, Taken out and Returned under "new Commitment papers" from Olmsted County. Feb 28/94. Does not seem to change any from month to month

" 28 — March 2/94. Wt 198 pounds. Is in good physical health. Pulse 90. Mar 13/94. Was today

Mar 7/13 — struck with a cane in hands of James R. Hay, an Epileptic patient. March 14/94. No

" 14 — material change has been noticed in Patients' condition, almost since coming here. —

Was this evening taken home by a brother

— Discharged —

Peter Rondeau (Rondo)

From 336.

1895

Jan 2/31 — Jan 2/95. Wt 124 pds. Pulse 78. - Jan 31/95. Appetite good; bowels regular; behavior ugly and stubborn; fights every time he has an opportunity. On one occasion (Dec 8th) he attacked Attendant Kiefer. He talks incoherently - Habits clean but he is slouchy in appearance. Does no work.

Feb 1 — Feb 1/95. Wt 150 pds. P 84. He drank some turpentine, this morning; vomited some. Dr called & stomach-pump used - Patient put to bed; also vomited considerably since put to bed (Treated by hot fomentations over kidneys). Feb 28/95. Is still inclined to be pugnacious & destructive. Talks incoherently. Habits dirty & at times filthy. Is very troublesome. Does no work. (Dirty 1 day)

Mar 1/31 — March 1/95. Wt 145 pds. Pulse 104. March 31/95. No change noted. (6 Days dirty during this month)

Apl 1/24 — April 1/95. Wt 156 " " 102. Apl 24/95. Has been pugnacious on 2 occasions of late, attacking Patient J. Ryan. Today, he attacked Attendant C. F. Olson, when going out walking; also had trouble with some other patients, while going down stairs & struck patient J. Ella, on the neck.

" 30 — April 30/95. No change noticeable. He is a chronic maniac, with a very considerable dementia.

May 1/9 — May 1/95. Wt 152 pds. P 84. May 9/95. Attempted to stop a horse today, while out walking; had a struggle

" 31 — with attendants before he was got under control - May 31/95. No change in any way; is ugly, pugnacious & of a mean & treacherous disposition. Was 9 days dirty, during the month. Habits have also been destructive.

June 1/23 — June 1/95. Wt 154 pds. Pulse 72. June 23/95. Was struck on the head by some one with a weapon of

" 29 — some sort: scalp cut quite severely; not known who did it. June 29/95. No change: 8 Days dirty during month.

July 1/31 — July 1/95. Wt 154 pds. Pulse 76. July 31/95. Does not change in any way: was 10 days dirty during month.

Corrected to Transfer Book A
— page 226.

Personal and Medical History of Andrew A. Lindbjem

EBERT, PIXLEY & CHAMBERS, DAVENPORT, IOWA

Whole No. 3544.
Residence, Minneapolis, Minn
Date Admission, 4th November 1893.
Admitted by, D. Kilbourne Hour, 6 1/2 P.M.
How Sent, John A. Steele, Jof P. Hennepin County
Sex, Male
Age, 62
Civil Condition, Married
Children, 6
Age Youngest Child, —
Occupation, Carpenter
Degree Education, Reads & writes in own language.
Profession Religion, Lutheran
Habits, Has been intemperate
Nativity, Norway (parents also born there)
Physicians Committing, A.B. Ewert & Frank Burton
Correspondents, (friend) E.W. 28 14th Ave So. Minneapolis.
Family 5th Kunte Haugh.

No. for Year, 114.
Insane Relatives, (1 brother insane)
Cause Exciting, Probably religion
Cause Predisposing, Previous attack
Form, Acute Mania (recurrent)
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, Not
Date of this Attack, Probably recent
Duration, Probably Short
No. of Attack, 3rd
No. of Admissions, 3rd
Age First Attack, 59 years
Time of Leaving, March 6 '94
Time in Hospital, 4 mo 2 ds
Result, Rec.

Crossed off from Absconders list April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Cord by D. Ely = Nov 4/93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear at present
Quick or Sluggish, Quite quick now
MEMORY:
Past Events, Good
Recent Events, Seems good now
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Fairly alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Fairly Good
Own Mental State, Cannot say why he was sent here
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Remembers, quite accurately, when he left here before. Says he cannot remember things or what occurred 3 or 4 days before coming here, but considers himself all right now.

EMOTIONAL STATE:
Normal, Calm, About normal
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, Denies any now
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Fairly free

Personal and Medical History of Andrew A. Lindbjem

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet 1 in. WEIGHT, 162 lbs. NUTRITION, Quite good for a man of his age.
WOUNDS OR ABNORMALITIES, None noted
TONGUE, Tremors, Slight Coatings, Quite heavy white Promptness Movement, Quite prompt
PUPILS, Equality, Equal Size, widely dilated
Response Light, Yes Accommodation, Yes
SIGHT, Some impairment
HEARING, Somewhat impaired
COORDINATION, Arms, Finger to nose, eyes shut, fairly good
Legs, Standing eyes shut, quite unsteady.
TREMORS, Hands, Some Tongue, Slight
Facial Muscles, General, More or less
REFLEXES, Patellar, unequal; right normal; left 2 or 3
Other Reflexes,
ARTICULATION, Hesitating, Yes Slurred, Foreign accent
FACIAL EXPRESSION, About normal
SENSIBILITY, Normal
HEART, Quite rapid; somewhat hypertrophied
LUNGS, Dull—are good.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Recent kept
CRANIAL MEASUREMENTS, — Habits

Asp
Sk
I
Cir

~~HISTORICAL.~~

LENGTH OF INVASION, Previous attacks ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, ✓
Father or Pat. Relations, ✓
Brothers or Sisters, One brother Insane

Personal and Medical History of Andrew A. Lindkjem

1893

Nov 4 Was brought here by Deputy Sheriff Adolf Peterson, with following history. Is to consanguinity, not known. One brother said to be insane. This is probably 3rd attack: first occurring in 1890 till last of April 1891; second time, as mentioned below ⊛. The first symptoms of this present attack were manifested by religious delusions. Disease seems to be increasing. Attacks seem to occur about same time each year. Derangement is now shown by the belief that he must die to save the world. Has never shown disposition to injure others, before this attack. Is not suicidal, but is of filthy & destructive habits. Patient always had a bad temper. Has also been intemperate. There is no history of any severe disease or injury to head. Cause of disease not known; probably religion. On personal examination, is found to be full of religious delusions; restless; does not sleep. He said "he was to die today, to save the souls from sin and death". Appearance & manner was excited.

⊛ The records show that Patient was here, the second time, from Nov 12/91 to March 8/92; during early part of this then stay, was very dirty in his habits; also somewhat destructive; during latter part became quite clean in his habits, worked on the hall; greatly improved & was moved to B1. Was in good condition, when leaving them. (See Vol 18. page 103 No 2873).

Nov 4 Nov 4/93. On admission, was put on B7. Pulse 78. T(a) 99.2. Bodily condition clean; No injuries or peculiarities noted. Nov 5/93. Was noisy last night, but slept 6 hours. AM. Pulse 74. T(a) 99.6. Appetite fairly good. Bowels generally free. Has a slight cough, at times. Walked the hall a good deal; also sang and talked in morning. In afternoon, was quiet. Went to chapel. Talks quite freely "Is off on religion". No complaints or injuries to note. PM. Pulse 72. T(a) 99.4. " 6 Nov 6/93. Slept 6 hours, last night; was noisy for a while. AM. Pulse 74. T(a) 99. Appetite good. Sings & talks to himself. Reads Bible a good deal of the time. Does walking. Makes no complaints. PM. Pulse 76 T(a) 99.2. " 7 Nov 7/93. Was restless, but slept 6 hours, last night. AM. Pulse 76. T(a) 99.2. Has been quiet all the day. Reads a good deal of the time. Is very religious. Does walking regularly. According to his statements, he realized his condition, that he could not do his work; Kept talking & had better come down & "sober up", as he did before". PM. Pulse 78. T(a) 99.0. " 8 Nov 8/93. Restless & slept but 5 hours, last night. AM. Pulse 74. Appetite good. Is noisy, at times; talks quite freely with his fellow-patients. " 9 Nov 9/93. Slept 6 hours, last night; was restless for 2 or 3 hours. AM. Pulse 72. Talks freely. Still very religious — " 10 Helps some with hall-work. Nov 10/93. Restless, but slept 6 hours, last night. AM. Pulse 76. Is quiet during the day. Otherwise, does not change much. " 11 Nov 11/93. Quiet; slept 8 hours, last night. " 13 AM. Pulse 74. Nov 13/93. Though restless at night & not sleeping very well, has been quiet & well-behaved by day; Talking freely & helping with ward-work. Was to day transferred to B1. — " 18 Nov 18/93. Since last noted, rest & sleep at night have become good. He had no marked "Spells". Pulse has become about normal. Always quiet & well-conducted, now. Appetite is poor; and bowels irregular; occasionally complains of pain in stomach & is on medicine. Seems fond of reading. Plays checkers some, but shows an inclination to be alone. Has become rather reticent, now talking only when spoken to. Works some on ward. Appears to be quite contented. Habits clean. " 30 Nov 30/93. A quiet, well-conducted patient; about the same, all the while. Is very still: does some reading & works some on the ward. Occasionally Complains of stomach & bowels troubling him.

Dec 2 Dec 2/93. Wt 174½ pds. (Has gained 14½ pds since admission). Pulse 100. " 4 Dec 3/93. Complains, today, of pains in head & back. T(a) 103. Dec 4/93. Staid in bed on B2 (did not go to B1); Still

Personal and Medical History of Andrew A. Lindkjem

1893

Dec 8 complains of severe pains in back and head. Dec 8/93. Remained in bed until to day, when " 15 he was got up and moved to B1. Dec 15/93. A quiet and well behaved patient. Does not change much, if any. Occasionally Complains of pains in stomach. Appetite is poor. " 31 Patient has been fairly well, ever since the first few weeks. Dec 31/93. Keeps about the same from day today. Quiet; does not talk much; takes part in games. Helps with hall-work.

1894 Jan 2/94 Jan 15 Jan 2/94. Wt 175½ pds. Pulse 69. Jan 15/94. For past week, Patient has not been inclined to go out walking, Complaining of some ill-feeling. Has a dry cough. Appetite fair; bowels are regular. Is always quiet & well-behaved. Has no "spells". Fond of reading & playing Cards. " 31 Physical health is quite good for a man of his years. Jan 31/94. Continues quiet & well-behaved. Appetite quite good: Bowels regular. Sleeps on B2. Takes meals on A2. Seems much improved. —

Feb 2/18 Mar 3/6 Feb 2/94. Wt 182 pds (a gain of 6½ pds in last month). Pulse 68. Feby 28/94. No material Change. Mar 3/94. Wt 185 " Pulse 78. March 6/94. Patient was Committed here under the "Law of 1893" recently declared unconstitutional. He was, today, with several others from Hennepin County, sent home.

Crossed off the Records; was illegally Committed —

Pete Ole Marken

From 184.

1894 Dec 30 1895 Jan 3/95 Dec 31/94. Behavior good; wants to be alone; sits in his room, most of the time; reads a great deal; talks to himself. Appetite fair; bowels regular. Does not work any. Jan 3/95. Wt 191 pounds; Pulse 82. Jan 31/95. Keeps about the same. Spends most of the time in room. Physical health good.

Feb 2/95 " 28 Feb 2/95. Wt 194½ pds. Pulse 102. Feb 28/95. Is very obstinate, at times. Had to feed him in the hall, as he could not agree with other patients, at table. Feb 28/95. Behavior not good. He is very cranky. Wants to do as he pleases. Sits in his room, most of the time; will not associate with the other patients. Has delusions. March 2/95. Wt 189 pds. Pulse 106. March 31/95. Conduct & behavior do not change any. Sits in rocking-chair & rocks & sings, all day. Will not work. Is very untidy. No delusions noticed, of late. (he cannot talk English). April 1/95. Wt 186½ pds. Pulse 94. April 30/95. No change. He does not improve any.

May 1/95 May 31/95 May 1/95. Wt 185 pds. Pulse 90. May 31/95. Very obstinate & cranky, at times; very lazy & does no work: does not even care to keep himself neat. Sits about in ward & sings & whistles, all day; no delusions noticed.

June 1/95 July 1/95 " 31 June 1/95. Wt 184 pds. Pulse 76. June 30/95. Keeps about same, from month to month. July 1/95. Wt 182 pds. Pulse 80. July 31/95. Had a "Spell" & talked all day to himself: was very obstinate & cranky. July 31/95. No change: wants to be alone: does no work. Health is good.

Aug 1/95 Sept 1/95 Oct 1/95 Aug 1/95. Wt 180½ pds. Pulse 72. Sept 1/95. Wt 180 pds. Pulse 72. Oct 1/95. Wt 178 pds. Pulse 102. Oct 31/95. No change noted, during the past 2 months: a very lazy, indolent patient: will not take interest in anything: sits in a chair all day; while on ward: sings & whistles: will not talk with anyone. Cannot speak English: does not even care to keep himself neat. Physical Condition good.

Nov 2 Dec 1 " 26 Jan 31 Nov 1/95. Wt 174 pds. Pulse 90. Dec 1/95. Wt 170 pds. Pulse 88. Dec 26/95. No change noticable, in any way. Dec 28/95. Transferred to annex (East). Jany 31/96. No change to note. Quiet: inoffensive: seldom speaks. Does no work. Indolent & lazy. obstinate at times. Health apparently good.

(2 transfer Book A" page 280)

Personal and Medical History of James B. Gilman

HERBERT, FULLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3545.
Residence, 409 8th St. S.E. Minneapolis
Date Admission, 6th November 1893
Admitted by, Dr. Phelps, Hour, 7 PM.
How Sent, John A. Steele, Jail, Hennepin County
Sex, Male
Age, 62
Civil Condition, not given
Children, Two
Age Youngest Child, —
Occupation, Laborer
Degree Education, Common School
Profession Religion, In a Church member
Habits, unknown
Nativity, US (Maine) Parents also born there
Physicians Committing, Jno A. Steele & A.P. Williamson
Correspondents, (wife) Mrs Jas. B. Gilman, 409. 8th St. S.E. Npls
Family Physcn Jno A. Steele M.D. Npls

No. for Year, 115
Insane Relatives, unknown
Cause Exciting, Excitement at World's Fair
Cause Predisposing, Previous attacks
Form, Acute Mania (recurrent)
Accompanying Bodily Disorder (Rachitic Emaciation)
Suicidal or Not, Not
Date of this Attack, 5 days ago
Duration, 5 days —
No. of Attack, 4th
No. of Admissions, 1st time (was at St Peter, 3d attack)
Age First Attack, about 37.
Time of Leaving, Feb. 18' 94
Time in Hospital, 3 mos. 4 da.
Result, Imp.

Crossed off from Records 1st April 1894, because insane not committed.

EXAMINATION ON ADMISSION.

Exd by Dr. Phelps, Dec 2/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear, at present
Quick or Sluggish, Quite fairly quick, now.

MEMORY:
Past Events, Recent Events, Special Subjects, } Good except as to period of attack

PERCEPTIVITY:
Alert or Dull, Correct or Illusive, } about normal

REASONING POWER:
Ordinary Subjects, Own Mental State, Special Subjects, } Fair at present

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

DELUSIONS:
Systematized or Not, None noted
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Voluble or Reticent, } See notes (Remarks)

GENERAL DESCRIPTIVE REMARKS:

Says "had great trouble in walking, found 3 or 4 days before coming here"; "had all he could do to pull himself together" - Admits being at the St Peter Hospital - about 4 months - "had hallucinations while there recent, after beginning, then troubled him for same time. Present attack" seem to differ. This is not like his previous one (at St Peter). Does not remember what occurs during these attacks. He remembers less, this time, that at former before. The 4 attacks have probably differed chiefly in their severity; this one, hitherto, is most severe; so much so that he has no remembrance of things happening during it. Is, at present, fairly recovered but there is considerable Consequent tremor, weakness, sluggish reflexes, & other slight symptoms of nervous derangement. —

Personal and ... James B. Gilman

N ADMISSION.—(Continued.)

TERISTICS.

NUTRITION, Fairly good

Promptness Movement, Fairly prompt

Commodation, —

...asses. —

...y good.

Legs, not good.; Lunges some, eyes shut, some inaccuracy; Standing on foot, unsteady. Standing, eyes shut, sways considerably

...EMORS, Hands, some — Tongue, some

Facial Muscles, — — General, some slight

REFLEXES, Patellar, equal — 1 to 2 — Dr. P's scale —

Other Reflexes,

ARTICULATION, ~~Hesitating,~~ fairly good ~~Slurred,~~

FACIAL EXPRESSION, fair — some depression —

SENSIBILITY,

HEART, slight murmur at 1st sound.

LUNGS, fairly good.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good, Records lost	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 at 92 — mother's sister he thinks, was "somewhat out of her head."

Father or Pat. Relations, father died at 87 —

Brothers or Sisters,

Personal and Medical History of James B. Gilman

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3545.

No. for Year, 115

Residence, 409 8th St. S.E. Minneapolis

Date Admission, 6th November 1893

Admitted by, Dr Phelps, Hour, 7 PM

How Sent, John A. Steele, Jof P, Hennepin

Sex, Male

Age, 67

Civil Condition, not given

Children, Two

Age Youngest Child, —

Occupation, Laborer

Degree Education, Common School

Profession Religion, Ref Church member

Habits, unknown

Nativity, U.S. (Maine) Parents also born there

Physicians Committing, Jno A Steele & A.P. Williamson

Correspondents, (wife) Mrs Jas. B. Gilman, 409. 8th St. S.E. Minpls

Family Physician Jno A. Steele. M.D. Minpls

Time of Leaving, [illegible]

Time in Hospital, 3mos. 4ds.

Result, Impr.

James B Gilman

(Handwriting – Dec 1/93)

Crossed out by my discharge 1st April 1894 because [illegible] committed.

EXAMINATION ON ADMISSION.

Exd by Dr. Phelps, Dec 1/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear, at present

Quick or Sluggish, Quite fairly quick, now.

MEMORY:

Past Events, } Good except as to period of attack

Recent Events, }

Special Subjects, }

PERCEPTIVITY:

Alert or Dull, } about normal

Correct or Illusive, }

REASONING POWER:

Ordinary Subjects, }

Own Mental State, } Fair at present

Special Subjects, }

EMOTIONAL STATE:

Normal, Calm, yes

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, none noted

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, } See notes (Remarks) –

Voluble or Reticent, }

GENERAL DESCRIPTIVE REMARKS:

Says "had great trouble in walking some 3 or 4 days before coming here"; "had all he could do to pull himself together" – Admits being at the St Peter Hospital – about 11 months – Had hallucinations while there recent, afterwards, these troubled him for some time. These "attacks" seem to differ. This is not like his previous one (at St. Peter). Does not remember what occurs during these attacks. He remembers less this time, that at those before. The 11 attacks have probably differed chiefly in their severity; this one, he thinks, is most severe; enough so that he has no remembrance of things happening during it. Is, at present, fairly recovered, but there is considerable Consequent tremor, weakness, sluggish reflexes, & other slight symptoms of nervous derangement. –

Personal and Medical History of James B. Gilman

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7½ in. WEIGHT, 148 pds. NUTRITION, Fairly good

WOUNDS OR ABNORMALITIES, None noted

TONGUE, Tremors, Some Coatings, — Promptness Movement, fairly prompt

PUPILS, Equality, right slightly the larger Size, —

Response Light, quite ready Accommodation, —

SIGHT, Impaired; wears glasses. –

HEARING, Seems fairly good

COORDINATION, Arms, } not good; finger & nose, eyes shut, some inaccuracy; Standing, at foot,

Legs, } unsteady. Standing, eyes shut, sways considerably

TREMORS, Hands, Some Tongue, Some

Facial Muscles, — — General, Some slight

REFLEXES, Patellar, Equal – 1 w r – Dr P's Scale –

Other Reflexes,

ARTICULATION, ~~Hesitating;~~ fairly good ~~Slurred;~~

FACIAL EXPRESSION, fair – some depression –

SENSIBILITY,

HEART, Slight murmur at 1st sound.

LUNGS, Fairly good.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Records kept 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, Mother died at 92 – Mother's sister, he thinks, was somewhat out of her head.

Father or Pat. Relations, Father died at 87 –

Brothers or Sisters,

Personal and Medical History of James B. Gilman

EBERT, PUCKE & STAMBERS, DAVENPORT, IOWA.

1893

He brought here by Deputy Sheriff Lewis Mausch, with the following history. (Was brought here in wristlets). There is no history of consanguinity. As to heredity, unknown. (When patient was insane once stated that he had an uncle insane, but denied this, later). This is 4th attack. The first attack occurred 25 years ago; second, 14 years; third, 9 years; fourth, present. During 3rd attack, was treated at St. Peter Hospital; recovered. Symptoms of this present mania first manifested 5 days ago; while at World's Fair, became noisy & excitable. Disease seems increasing. No entirely rational intervals. Knows his family; but most of time, is noisy, restless & excitable. Derangement is now shown by screaming "Let her go, Gallagher"; "No Letter A"; Glory Hallelujah." Talks constantly about the World's Fair, but mixes what he saw, with present surroundings. No disposition to injure others, except in being rough. Not suicidal, nor filthy. Patient has been "odd", since his first attack. As to history of intemperance, severe disease or injury to head, unknown. Sunstroke caused 1st attack; the present attack caused from excitement of World's Fair. Has not been under medical treatment. On personal Examination, was found lying in bed, wrists fastened; restless, noisy, screaming, violent &c. At times, answered questions; at others, would not notice questions, but talked & screamed, all the time. From other sources, Examining Physicians ascertained that patient has been excitable & cranky for years. Went to World's Fair (as above stated) & while there, became noisy & violent.

Nov 6 Nov 6/93. On admission, is in quite good physical condition. Was brought in wristlets. Put on 6[3] East

" 7 Bodily Condition Clean. Clothing in good order. No peculiarities or injuries observed. Nov 7/93. Slept but 3 hours, last night. Was noisy & restless for 5 hours. AM. Pulse 134. R 20. T 99.2. Appetite is poor. Complains of being thirsty. Had no movement of bowels, since coming. Is excited, restless & noisy today, but not roughy.

" 8 Talk is incoherent. Shows delusions. No cough observed. No complaints or injuries to note. Nov 8/93. Was extremely noisy for 7 hours, slept but 1 hour, last night. Destroyed his bedding. AM. Pulse 104. R 19. T 99. Ate no solid food, today. Drank only milk. Is very excited & noisy. Talks incoherently. Still shows delusions. Went out walking, today. Nov 9/93. Slept only 5 hours last night; very noisy for 14 hours or so.

" 9 AM. Pulse 115. R 22. T 99.2. Appetite still poor. Takes milk only. Bowels still constipated. Has been excited & noisy today. Went out walking in both morning & afternoon. Nov 10/93. Noisy for 5 hours, last

" 10 night; sleeping but 4 hours. AM. Pulse 120. Appetite continues poor. He eats no solid food. Constipation persists. Is excited, restless & noisy by day. Talk, very incoherent. Nov 11/93. Slept but

" 11 4 hours; was noisy for 5 hours, last night. AM. Pulse 126. No movement of bowels, as yet. Still excited, restless & noisy by day. Talk incoherent most of the time. Was quiet during evening

" 12 and had a rational spell. Nov 12/93. Rested & slept better (7 hours) last night. Noisy for only 1 hour or so. AM. Pulse 112. Bowels moved but passage was hard. Has been excited, restless & noisy all the day.

" 13 Nov 13/93. Was restless & noisy nearly all last night; slept only 1 hour. AM. Pulse 126. Appetite has continued very poor; no solid food; has taken only milk. Has continued restless, noisy & excited today, & has been growing somewhat exhausted. Was put to bed, in restraint, at 12:30 PM. —

" 14 Nov 14/93. Slept 6 hours, last night; was noisy & restless for 3 hours or so. AM. Pulse 102. Is in bed, in restraint. Ate no breakfast. Has been very restless & noisy, all day. Refuses food & was fed by

" 15 the tube. No movement of bowels, for some days. Nov 15/93. Noisy & restless nearly all last night; slept only 1 hour. AM. Pulse 96. Drank a pint of milk for breakfast. Still in restraint, in bed.

Personal and Medical History of James B. Gilman

DETAILED HISTORY OF SICKNESS
DIAG

1893 Oct 2

TEMP	HOUR	PULSE		RESP.		TEMP	
	A.M.	P.M.	AM	PM	AM	PM	AM	PM
Nov 20								
21	7	5	84	28	19		100	
22	7	5	94	28				
23	7	5	72	28				
24					20			
25	7	5	78	68				
26	7	5	86	74				
27								
Dec 1								
	7							
	7							
	7	5	82	96				
	7		64					

Nov 1[5] cont'd

...y. Bowels badly constipated. Nov 16/93. Was noisy restless all ...otyet moved. Drank a pint of milk at noon. Has been noisy ...of milk & ate some fruit, at supper. Nov 17/93. Was restless for 5 ... AM. Pulse 86. Appetite poor. Takes milk only. Talks incoherently ... pints of milk, during the day. Is somewhat inclined to be ugly. ...ht, slept only 2 hours. AM. Pulse 75. Appetite still poor. Is very suspicious ... his food & water smell bad". Has been restless & noisy during the day. ... Nov 19/93. Was noisy & restless 7 hours, sleeping but 2 hours, last night. ...kfast. Took no dinner. Drank a pint of milk, at supper. Still ... Does not wish to stay in bed. "Wants to go away". Slept some during ...ipated. Nov 20/93. Slept only 3 hours, last night. AM. Pulse 76. — ...me quite rational at 12, noon & ate a very good dinner. (This is the ... suddenly rational; the first time (11th), the change was within 1 hour. ...ed to C[2] (the Sick-ward). 5 PM. Pulse 81. R 24. T 99. Appetite fair ...day. Nov 22/93. Patient remained in bed part of the day, today. ...wels in fairly good condition. Says "he is improving daily". — ...05; (a slight gain). Dec 9/93. Was remained up on ward, for several ...equal. Converses freely, conversation, at times, quite interesting. ...ng and is improving rapidly. Dec 16/93. Patient has been quite ...does not appear as well as usual. (This, after Dr. K. told him, this ... go now). Dec 17/93. In bed; complains of nervousness & headache.

" 18 Says "it is homesickness, mostly". Dec 18/93. In bed part of the day. Is decidedly nervous and

" 19 a little hysterical. (See attached record of pulses & temperature). Dec 19/93. 7 AM. Pulse 102. 5 PM. Pulse 80. Is very restless & nervous; continually washing his head with cold water; complains

" 20 of headache. Appetite good. Bowels fairly regular. Dec 20/93. 5 PM. Pulse 112. Has been in bed

" 21 part of the day. Dec 21/93. 5 PM. Pulse 95. Dec 29/93. Appetite good; bowels regular;

" 31 patient seems to be improving the last 3 or 4 days. Dec 31/93. Has been resting fairly well only, at night; sleeping on the average 6 hours, each night. Seems doing very well, of late.

1894 Jan 2/3 Jan 2/94. Out, today, 149½ pds. Jan 3/94. Was, today, visited by his Son. Continues to improve.

" 7 Jan 7/94. Appetite very good. Bowels regular. Converses freely & rationally, is, apparently,

" 10 fairly contented. Goes out walking occasionally. Jan 10/94. Continues to do nicely. —

" 15 Jan 15/94. Sleeps nightly, an average, of 6 hours. Talks freely & rationally. Says "that he feels better than he has for some time, and that he is well enough, now, to go home." —

" 30 Jan 30/94. Appetite good; bowels regular. Reads some. Plays games. Goes out walking. Is doing nicely. Habits are clean. —

Feb 2/3 Feb 2/94. Wt 149 pds. Pulse 112. Feb 3/94. Continually asking for something. Today, "a

" 4 feather pillow". Of late is always finding fault & is very cross & cranky. Feb 4/94. Very restless all day; continually walking the floor. "Does not sleep very well, because his pillow is so hard".

" 10 Feb 10/94. Had been committed under the law, recently declared unconstitutional. Was today Sent home — Crossed off the Records — Illegally committed —

Personal and Medical History of James. S.

EBERT, FULLER & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriff Lewis Mausch, with the following history. (Was brought in in restraints). There is no history of consanguinity. As to heredity, unknown. (When patient was insane once stated that he had an insane aunt, but denied this, later). This is 4th attack. The first attack occurred 25 years ago; second, 14 years; third, 9 years; fourth, present. During 3rd attack, was treated at St. Peter Hospital; recovered. Symptoms of this present and manifested 5 days ago; while at World's Fair, became noisy & excitable. Disease seems increasing. No entirely rational intervals. Knows his family; but most of time, is noisy, restless & excitable. Derangement is now shown by screaming "Let her go, Gallagher"; "The Letter A"; "Glory Hallelujah". Talks constantly about the World's Fair, but mixes what he saw, with present surroundings. No disposition to injure others, except in being rough. Is not suicidal, nor filthy. Patient has been "odd", since his first attack. As to history of intemperance, recent disease or injury to head, unknown. Sunstroke caused 1st attack; the present attack came from excitement of World's Fair. Has not been under medical treatment. On personal Examination, was found lying in bed, wrists fastened; restless, noisy, screaming, violent &c. At times, answered questions; at others, would not notice questions, but talked & screamed, all the time. From other sources, Examining Physician ascertained that patient has been excitable & cranky for years. Went to World's Fair (as above stated) & while there, became noisy & violent.

Nov 6 Nov 6/93. On admission, is in quite good Physical condition. Was brought in restrtets. Put on 6th East.

" 7 Bodily Condition Clean. Clothing in good order. No peculiarities or injuries observed. Nov 7/93. Slept but 3 hours, last night. Was noisy & restless for 5 hours. AM. Pulse 134. R 22. T 99.2. Appetite is poor. Complains of being thirsty. Had no movement of bowels, since coming. Is excited, restless & noisy today, but not roughly.

" 8 Talk is incoherent. Shows delusions. No cough observed. No complaints or injuries to note. Nov 8/93. Was extremely noisy for 7 hours, slept but 1 hour, last night. Destroyed his bedding. AM. Pulse 104. R 19. T 99. Ate no solid food, today. Drank only milk. Is very excited & noisy. Talks incoherently. Still shows delusions. Went out walking, today. Nov 9/93. Slept only 5 hours last night; very noisy for 14 hours or so.

" 9 AM. Pulse 115. R 22. T 99.2. Appetite still poor. Takes milk only. Bowels still constipated. Has been

" 10 excited & noisy today. Went out walking in both morning & afternoon. Nov 10/93. Noisy for 5 hours, last night; sleeping but 4 hours. AM. Pulse 120. Appetite continues poor. He eats no solid food. Constipation persists. Is excited, restless & noisy, by day. Talk very incoherent. Nov 11/93. Slept but

" 11 4 hours; was noisy for 5 hours, last night. AM. Pulse 128. No movement of bowels, as yet. Still excited, restless & noisy by day. Talk incoherent most of the time. Was quiet during evening

" 12 and had a rational spell. Nov 12/93. Rested & slept better (7 hours) last night. Noisy for only 1 hour or so. AM. Pulse 120. Bowels moved but passage was hard. Has been excited, restless & noisy all the day.

" 13 Nov 13/93. Was restless & noisy nearly all last night; slept only 1 hour. AM. Pulse 126. Appetite has Continued very poor; no solid food; has taken only milk. Has continued restless, noisy & excited today, & has been growing somewhat exhausted. Was put to bed, in restraints, at 12:30 PM. —

" 14 Nov 14/93. Slept 6 hours, last night; was noisy & restless for 3 hours or so. AM. Pulse 102. Is in bed, in restraints. Ate no breakfast. Has been very restless & noisy, all day. Refuses food & was fed by

" 15 the tube. No movement of bowels, for some days. Nov 15/93. Noisy & restless nearly all last night; slept only 1 hour. AM. Pulse 96. Drank a pint of milk for breakfast. Still in restraints, in bed.

Personal and Medical History of James. B. Gilman

1893

Nov 15/16 Has been noisy & very restless, all day. Bowels badly constipated. Nov 16/93. Was noisy restless all

" 17 last night; slept none. AM. Pulse 90. Was taken out of restraints at 4 AM. & put back at 10 AM. Ate a fair breakfast. Bowels have not yet moved. Drank a pint of milk at noon. Has been noisy and restless all day. Drank a pint of milk & ate some fruit, at supper. Nov 17/93. Was restless for 5 hours & slept but 4 hours, last night. AM. Pulse 85. Appetite poor. Takes milk only. Talks incoherently "Tears poison". Drank about 2½ pints of milk, during the day. Is somewhat inclined to be surly.

" 18 Nov 18/93. Rest poor, last night; slept only 10 hours. AM. Pulse 75. Appetite still poor. Is very suspicious about food & water. Complains "his food & water smell bad". Has been restless & noisy, during the day.

" 19 No movement of bowels yet. Nov 19/93. Was noisy & restless 7 hours, Sleeping but 2 hours, last night. AM. Pulse 78. Ate a fair breakfast. Took no dinner. Drank a pint of milk, at supper. Still suspicious, as above noted. Does not wish to stay in bed. "Wants to go away". Slept some during

" 20 the day. Bowels still Constipated. Nov 20/93. Slept only 3 hours, last night. AM. Pulse 76. — Ate a fair breakfast. Became quite rational at 12, noon & ate a very good dinner. (This is the 2nd time he has become quite suddenly rational; the first time (11th), the change was within 1 hour. at 4 PM, Patient was moved to C2 (the Sick-ward). 5 PM. Pulse 81. R 24. T 99. Appetite fair.

" 21/22 Nov 21/93. Is up, in the ward, today. Nov 22/93. Patient remained in bed part of the day, today.

" 30 Nov 30/93. Appetite good. Bowels in fairly good condition. Says "he is improving daily". —

Dec 1/9 Dec 1/93. Wt. today, 151 pounds; (a slight gain). Dec 9/93. Has remained up in ward, for several days. Appetite good. Bowels regular. Converses freely, conversation, at times, quite interesting.

" 16 Sleeps well. Goes out walking and is improving rapidly. Dec 16/93. Patient has been quite nervous and restless, all day. Does not appear as well as usual. (This, after Dr. K. told him, this morning, he could not go now). Dec 17/93. In bed; complains of nervousness & headache.

" 18 Says "it is homesickness, mostly". Dec 18/93. In bed part of the day. Is evidently nervous and

" 19 a little hysterical. (See attached record of pulses & temperature). Dec 19/93. 7 AM. P 102. 5 PM. Pulse 80. Is very restless & nervous; Continually washing his head with cold water; Complains

" 20 of headache. Appetite good. Bowels fairly regular. Dec 20/93. 5 PM. Pulse 112. Has been in bed

" 21/29 part of the day. Dec 21/93. 5 PM. Pulse 95. Dec 29/93. Appetite good; bowels regular;

" 31 patient seems to be improving the last 3 or 4 Days. Dec 31/93. Has been resting fairly well, only, at night; Sleeping on the average 6 hours, each night. Seems doing very well, of late.

1894 Jan 2/3 Jan 2/94. Wt. today, 149½ pds. Jan 3/94. Has, today, visited by his Son. Continues to improve.

" 7 Jan 7/94. Appetite very good. Bowels regular. Converses freely & rationally, is, apparently,

" 10 fairly contented. Goes out walking occasionally. Jan 10/94. Continues to do nicely. —

" 15 Jan 15/94. Sleeps nightly, an average, of 6 hours. Talks freely & rationally. Says "that he feels better than he has for some time, and that he is well enough, now, to go home." —

" 30 Jan 30/94. Appetite good; bowels regular. Reads some. Plays games. Goes out walking. Is doing nicely. Habits are clean. —

Feb 2/3 Feb 2/94. Wt 149 pds. Pulse 112. Feb 3/94. Continually asking for something. Today, "a

" 4 feather pillow". Of late is always finding fault & is very cross & cranky. Feb 4/94. Very restless all day; continually walking the floor. "Does not sleep very well, because his pillow is so hard".

" 10 Feb 10/94. Had been committed under the law, recently declared unconstitutional. Was today Sent home — Crossed off the Records — Illegally committed —

Personal and Medical History of Albert Kroeger alias Kreuger

HERBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3547.
Residence, St. Paul. Minn
Date Admission, 7th November 1893.
Admitted by, Dr Phelps Hour, 7 PM
How Sent, John B. Olivier, Jof C, Ramsey County
Sex, Male
Age, 19 years
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Works in Shoe-factory.
Degree Education, Common School
Profession Religion, Lutheran
Habits, not intemperate
Nativity, St Paul (Parents born in Germany)
Physicians Committing, J.M.A. Gravel. A. Shimonek. A.B. Ancker.
Correspondents, (Mother) Mrs Louise A. Kreuger, St Paul. Minn #20 E. 8 St.
Family Physician Dr Shimonek. St Paul. Minn

No. for Year, 117.
Insane Relatives, None
Cause Exciting, not known
Cause Predisposing, not known
Form, Pubescent Insanity
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, No.
Date of this Attack, December 1892
Duration, about 11 months
No. of Attack, 3rd probably
No. of Admissions, 1st
Age First Attack, about 18.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exd by Dr Phelps, Nov 29/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, ✓
MEMORY:
Past Events, } Poor
Recent Events, }
Special Subjects, }
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive, Incorrect
REASONING POWER: } Poor
Ordinary Subjects, }
Own Mental State, }
Special Subjects, }
GENERAL DESCRIPTIVE REMARKS:
Patient, on first coming here, very quiet for first 2 or 3 days. then suddenly became excitable & has been kept on lower ward since. After first "excited spell" gradually became more quiet. Is now becoming excited again — Manner is quite silly.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Yes
Depressed,
DELUSIONS:
Systematized or Not, unsystematized
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Incoherent, at times.
Voluble or Reticent,

Personal and Medical History of Albert Kroeger

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5¼ in. WEIGHT, 114½ lbs. NUTRITION, Somewhat poor.
WOUNDS OR ABNORMALITIES, End of 2d finger, (right hand), cut off. Scratch over left Eye.
TONGUE, Tremors, ✓ Coatings, normal Promptness Movement, prompt
PUPILS, Equality, Equal Size, ✓
Response Light, Yes Accommodation,
SIGHT, Probably good
HEARING, Good.

Case No. 3547. Albert J. Kroeger. 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, about normal
Other Reflexes,
ARTICULATION, Hesitating, — Slurred, Lisps
FACIAL EXPRESSION, ✓
SENSIBILITY,
HEART, Palpitating & irregular.
LUNGS, Seem all right
EXAM. URINE.

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

Records kept

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") } No history of heredity thought out
Mother or Mat. Relations, Mother living
Father or Pat. Relations, father dead
Brothers or Sisters,

Personal and Medical History of Albert Kroeger alias Krueger

HERBERT, PIOLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3547.
Residence, St. Paul. Minn
Date Admission, 7th November 1893.
Admitted by, Dr Okelps Hour, 7 PM
How Sent, John. B. Olivier, Jof P, Ramsey County
Sex, Male
Age, 19 years
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Works in Shoe-factory.
Degree Education, Common School
Profession Religion, Lutheran
Habits, not intemperate
Nativity, St Paul (Parents born in Germany)
Physicians Committing, JM A. Gruel. A. Shimonek. A.B. Arndt.
Correspondents, (Mother) Mrs Louise A. Krueger, St Paul. Minn 1100 E. 8 St.
Family Physician Dr. Shimonek. St Paul. Minn

No. for Year, 117.
Insane Relatives, None
Cause Exciting, not known
Cause Predisposing, not known
Form, Pubescent Insanity
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, No.
Date of this Attack, December 1892
Duration. about 11 months

Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exd by Dr Okelps Nov 29/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, ✓
MEMORY:
Past Events, } Poor
Recent Events, }
Special Subjects, }
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive, Incorrect
REASONING POWER: }
Ordinary Subjects, }
Own Mental State, } Poor
Special Subjects, }

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Yes
Depressed,
DELUSIONS:
Systematized or Not, unsystematized
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Incoherent at times.
Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:
Patient, on first coming here, very quiet for first 2 or 3 days: then, suddenly, became excitable & has been kept on lower wards since. After first "excited spell" gradually became more quiet. Is now becoming excitable again - Manner is quite silly.

Personal and Medical History of Albert Kroeger

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5¼ in. WEIGHT, 111½ lbs. NUTRITION, Somewhat poor.
WOUNDS OR ABNORMALITIES, End of 2d finger (right hand), cut off. Scratch over left Eye.
TONGUE, Tremors, ✓ Coatings, Normal Promptness Movement, prompt
PUPILS, Equality, Equal Size, ✓
Response Light, Yes Accommodation,
SIGHT, Probably good
HEARING, Good.
COORDINATION, Arms, } Fair, by usual tests.
Legs, }
TREMORS, Hands, None Tongue, Steady
Facial Muscles, General, ✓
REFLEXES, Patellar, about normal
Other Reflexes,
ARTICULATION, Hesitating, — Slurred, Lisps
FACIAL EXPRESSION, ✓
SENSIBILITY,
HEART, Palpitating & irregular.
LUNGS, Seem all right
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Records kept 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 heredity brought out
Mother or Mat. Relations, Mother living —
Father or Pat. Relations, father dead —
Brothers or Sisters,

Personal and Medical History of Albert Kroeger.

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893 Was brought here by Wm Quint, Sheriff's Deputy, with the following history. There is no history of consanguinity or heredity. This is probably 3rd attack; duration of each, a few days. First symptoms of this attack manifested December 1892; quarrelsome tendency. Decaice seems increasing (?), but is variable & there are rational intervals at irregular periods. Derangement now manifested on no particular subjects. Has shown a disposition to injure others, but is not suicidal, nor filthy, nor destructive. No peculiarities as were previously shown. There is no history of intemperance nor of any severe disease &c. Cause of disease not known. Has been confined to the house; used baths, bromides & chloral. On personal examination, there are found to be a general irresponsibility & attacks of violence. During examination, was making speeches. Did nothing in particular. — Manner violent, followed by quietness.

Nov 7 Nov 7/93. On admission, is in fair physical condition. Was brought here in wristlets and strapped. Put on B3. Pulse 70. T 98.8. Was dressed well & was clean. No injuries or peculiarities noted. —

" 8 Nov 8/93. Slept 7 hours, last night, & was quiet. AM. Pulse 76. T 99.2. Appetite fairly good. Bowels, as a rule, have regular. No cough noticed. Sits out all quietly, most of the time. Talks quite freely; answers questions promptly. No delusions noted. No complaints or injuries to note. PM. Pulse 74. T 99. —

" 9 Was at the dance this evening; toward close of it, became somewhat excited. Nov 9/93. Rested quite well last night, sleeping 8 hours. AM. Pulse 74. T 98.6. Answers questions, but is not very communicative.

" 10 Goes out walking. Works on B2 & takes his meals there, also. PM. Pulse 74. T 99. Nov 10/93. Restless a couple of hours, but sleeping 6 hours, last night. AM. Pulse 72. T 98.8. Has been quiet during the day. Answers questions quite freely, but does not talk much, unless addressed. Walks. Works some. Says "he feels

" 11 all right". PM. Pulse 74. T 99. Nov 11/93. Slept 8 hours, last night; Was quiet. AM. Pulse 72. Appetite good. Quiet & well-behaved. Makes no complaints. Goes walking. Works on ward. Is somewhat morose.

" 12 Nov 12/93. Rested and slept fairly quietly & well, last night. AM. Pulse 74. Sits about, very quietly, most of the day. Was at Chapel services this afternoon; says he has a pain about his heart. Began crying &

" 13/15 had to be brought back to ward. Nov 13/93. Remains on B2 during the day. Nov 15/93. Has been sleeping quite well, the past 2 nights. Has continued quiet & well-behaved. Pulse has been normal. Became suddenly excited, today, & was put in at B2. Was very troublesome, noisy & violent. Physical

" 16 restraint used for 5 hours. At 8 PM was taken to C4 & put in a single room. Nov 16/93. Slept 8 hours, last night. Is excedingly restless, excited & destructive, running all over the two wards, pulling the settees, chairs & spittoons about & generally creating great disturbance. Had to be forced to eat. —

" 17 Nov 17/93. Slept 9 hours, last night. Not so excited or restless as yesterday, although hostile runs around

" 18 the wards, when left alone. Pulse 82. Bowels regular. Talks freely. Nov 18/93. Appetite is much improved. He is also much quieter. Must be forced to take his medicine. Pulse 78. Talks freely.

" 19 Nov 19/93. Appetite fairly good. Quieter & more easily managed. Pulse 74. Bowels regular. Takes

" 20 his medicine now, without any trouble. Talks freely, but in a silly way. Nov 20/93. Not so noisy now.

" 21 Refuses his medicine, at times. Nov 21/93. Since last noted, patient has continued to rest and sleep well, at night. Pulse, today, 84. Appetite fair; bowels regular. Talks quite freely. Is noisy

" 22 and frolicsome. Appears to be mischievous & perverse. Nov 22/93. Quite noisy, & inclined to be

" 23 quarrelsome; needs watching most of the time. Nov 23/93. Is a little quieter today. Complains of not feeling well.

" 24/30 Nov 24/93. Patient seems to be growing "worse". Is very noisy, at times. Nov 30/93. Was very noisy all last

Personal and Medical History of Albert Kroeger

1893 Contd

Nov 30 night; destructive; tore up his underclothes & bedding. Is very troublesome today; inclined to strike the other patients & make trouble, if not watched all the time. Habits are becoming dirty.

Dec 1 Dec 7/93. Patient continues very noisy & troublesome; also destructive & dirty in habits. Struck a fellow patient, today, in the eye & mouth, bruising them quite badly. Was transferred to C3 — (on coming to this ward, Attendants note a few scratches on his face: behavior, however, was quiet).

" 3/6 Dec 3/93. Has been very restless & noisy, during the day. Dec 4/93. Wt 110 lbs. (has lost 4½ pounds)

" 5/6 Pulse 70. Dec 6/93. Very noisy for an hour or so, last night. Dec 6/93. Today, struck one of

" 11 the Attendants near him, causing his nose to bleed. Dec 11/93. For the last 4 days, patient has been

" 15/16 quiet. He has also been sleeping well, at night. Dec 16/93. Is still on medicine. Dec 18/93. Appetite good; bowels regular. Is now very well behaved, though slightly restless. Talks very little, but understands what is said to him and answers rationally. Sleeps well at night. Physical

" 31 condition is apparently good. Is on medicine. Dec 31/93. Apparently rests & sleeps well, at night. Appetite very good. Bowels irregular. Physical condition fair. Is very restless; has "noisy spells" and is inclined to be ugly; will strike without any provocation; has to be closely watched. Talk is sometimes rational & again is very unreasonable. "Wanting to go home" is the general subject of his conversation. Is very disobedient. Recently got his face slightly scratched in a fight with another patient. Has not, however, been in seclusion this month. A couple of days ago, was visited by a friend. Was on medicine up to 29th inst, when he refused to take any more of it. No improvement can be noticed in this patient's condition.

1894

Jan 2 Jan 2/94. Weight 112 lbs. — Pulse 86. Ugly & noisy today. Struck a fellow patient (Wm McBride) in

" 8/14 the face. Jan 8/94. Conduct, for past 5 days, much improved. Jan 14/94. Is noisy, during the day. Does not seem to realize what is said to him, & is very slow to comprehend. —

" 15 Jan 15/94. Patient is inclined to be ugly, at times. He eats well, sleeps well & keeps himself fairly neat. Has not been in seclusion, while on this ward, but has been very closely watched. —

" 31 Jan 31/94. Appetite good; bowels regular. Is in good physical condition. Has noisy & ugly "spells" quite often, when he will strike other patients without any cause or provocation. Is contrary; objects to sitting on a bench — wants to be lying down. Seems to have lost memory. Talks very little; hesitates; seems bewildered. Habits fair. Is very noticeable improvement made.

Feb 1/5 Feb 1/94. Wt 114 lbs. Pulse 82. Feb 5/94. Patient was extremely noisy, all of last night.

" 7 Feb 7/94. Is very noisy & excited today. Struck one of attendants in the face, with his fist. —

" 14 Feb 14/94. Noisy & very contrary. Stole a knife and fork from dining-room and secreted them

" 17/19 in his mattress. Feb 17/94. Noisy & contrary, again, today. Feb 19/94. Appetite continues good; bowels normal. Still continues to have noisy, excited & ugly "spells" quite often; very contrary & stubborn, at times. Is considered a very troublesome patient on ward. No particular improvement noticed. Physical health is quite good.

Was today visited by a friend and, this evening, taken home by him — (this patient was committed here under the "Law of 1893" recently declared illegal.) —

" 27 Feb 27/94. Was Returned, this evening, under "new commitment papers" from Ramsey &

" 28 was put on Ward C3. Is badly behaved; very noisy & contrary. Bodily condition clean. He was put in restraint, at bed time, to prevent self-abuse. Feb 28/94. Was restless for 7 hours; slept

(carried to 208)

Personal and Medical History of Michael Brazil Jr

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3578.
Residence, Wells, Minn (Town of)
Date Admission, 8th November 1893.
Admitted by, Dr. Phelps Hour, 4 PM.
How Sent, R.A. Mott, Jof P, Rice County.
Sex, Male.
Age, 29
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Farmer
Degree Education, limited to reading & writing
Profession Religion, Roman Catholic
Habits, Intemperate
Nativity, Minnesota (parents born in Ireland).
Physicians Committing, G. H. Wood M.D. F. M. Rose
Correspondents, none given in papers
Family Physcn F.M. Rose, Faribault Minn

No. for Year, 118.
Insane Relatives, none
Cause Exciting, Skull fractured in 1874.
Cause Predisposing, previous attack
Form, epileptic dementia
Accompanying Bodily Disorder, Skull fracture
Suicidal or Not, not
Date of this Attack, not stated —
Duration, not given
No. of Attack, 2nd
No. of Admissions, 2nd
Age First Attack, 9 years (Epilepsy began then)
Time of Leaving, Dec, 20 '93
Time in Hospital, 1 mo. 12 ds.
Result, Imp.

Crossed off 7 M Transferred to N.H. Jan 1894 because likely to be Committed

EXAMINATION ON ADMISSION.

Exd by Dr Eby Jan 11/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Quite quick
MEMORY:
Past Events, Very good
Recent Events, Says not so good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Good
Own Mental State, Good
Special Subjects, Good
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Yes
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None noted
Special Subjects,
Transitory or Not,
HALLUCINATIONS: ✓
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Quite free

Personal and Medical History of Michael Brazil Jr

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 10½ WEIGHT, 169 lbs NUTRITION, Fairly good.
WOUNDS OR ABNORMALITIES, old fracture of skull in 1874 (see history).
TONGUE, Tremors, Coarse Coatings, Some Promptness Movement, quite prompt
PUPILS, Equality, Equal Size, about normal
Response Light, Yes Accommodation, Yes
SIGHT, Seems good
HEARING, normal
COORDINATION, Arms, finger to nose, eyes shut, Some incoordination; inaccuracy.
Legs, Staggering, eyes shut, Considerable unsteadiness.
TREMORS, Hands, Slight Tongue, Coarse
Facial Muscles, General, none
REFLEXES, Patellar, unequal; right 2 or 3; left 6 (about).
Other Reflexes,
ARTICULATION, Hesitating, No Slurred, good
FACIAL EXPRESSION, normal
SENSIBILITY, normal
HEART, Action irregular; beat very forcible.
LUNGS, Sounds are good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Records kept Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, previous attack ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") no history of heredity obtained.
Mother or Mat. Relations, Mother living; healthy
Father or Pat. Relations, Father living; Healthy.
Brothers or Sisters, 3 brothers; 4 sisters;

Personal and Medical History of Michael Brazil Jr.

ROBERT, FISLAR & OHAMBERS, DAVENPORT, IOWA

1893

He brought here by Sheriff Stewart, with the following history of case. There is no history of consanguinity or heredity, (but previous commitment shows sound history of long standing Epilepsy). This is 2nd attack; was in this hospital before (see below); It is not stated when this present attack occurred; first symptoms of it were manifested by tendency to "Poto-Mania" & a desire to injure others. — Disease seems increasing, but is variable & there are rational intervals, but at irregular periods. Derangement is now shown by a desire "to lick somebody". Is not suicidal; but is of filthy & destructive habits. Patient is of intemperate habits. Had his skull fractured in 1874, and this is the supposed cause of the disease. Has treated by removal of bone, rest & confinement. On personal examination, it is found that, when he gets intoxicated or excited from any cause he becomes violent & dangerous. Talked incoherently. Appearance & manner excited. Is notorious & unquestioned by all his friends.

Note — Note. The records here show that patient was here before from December 30/85 to Feby 4/86. Before this then coming he was subject to Epileptic fits, for some years; was quiet & peaceable while here; well behaved. No fits were reported. Was improved on leaving. (See Vol. 6. p 167. No. 1067.)

Nov 8 — Nov 8/93. On admission, is in fair physical condition. Has sutures in B^{r}. Bodily condition clean. no injury or peculiarity, except fracture of skull, above mentioned. PM. Pulse 80. T 98.8. Appetite good. Bowels seem regular. No cough noticed. Behavior is good; Walks about hall quietly; reads some. Talks freely; no delusions noted. To go out walking with the rest. Nov 9/93. Was restless, only slept 5 hours, last night. AM. Pulse 78. T 98.6. Appetite good. Quiet & well behaved during the day. Talks freely. Plays billiards. Makes no complaints. PM. Pulse 76. T 98.8. Nov 10/93. Again restless, last night, and sleeping only 5 hours or so. AM. Pulse 72. T 98.8. Conduct & behavior, by day, continue about the same. PM. Pulse 76 T 98.6. Nov 11/93. Passed last night about as the preceding ones. AM. Pulse 74. — Is quietly behaved, but has a somewhat restless air about him. Plays games. Talks freely. No delusions have yet been noted. Nov 12/93. Quite restless, sleeping only 4 hours, last night. AM. Pulse 72. Nov 13/93. About the same, as usual, by day. AM. Pulse 72. Transferred to B^{1} today. — Nov 14/93. AM. Pulse 114. R 18. Has been going about the ward acting in a silly way & telling silly stories. Is good natured & appears happy & contented. Nov 15/93. About the same. Talks freely. Is a good & willing worker in ward. Pulse 104. R 18. Nov 16/93. Pulse 96. R 16. Has been somewhat restless today. Talks about going home, a great deal. Nov 17/93. A quiet & well-behaved patient. Fond of games. Pulse 100. R 17. Today, Commenced to work with the barpenter. Nov 18/93. Pulse ranges quite high. Has some delusions. Says "that people put him in Hospital so as to get his money away from him." Nov 19/93. AM. Pulse 98. R 17. Restless today, wanting to go out walking. Curious; asking many questions. Nov 20/93. AM. " 112. Still restless; walking the floor a good deal. Is a good and very willing worker. Nov 21/93. Apparently rests & sleeps well, at night. AM. Pulse 84. R 16. Does not seem to have any "spells". Is silly in some of his ways. Quiet & well behaved. Plays games, billiards &c. Attends services in chapel; also dances, participating in them. Is clean, tidy & of good personal habits. PM. Pulse 100. R 17. Appetite good. Bowels seem natural. Nov 27/93. Was struck on forehead with a broom handle, by a patient on B^{r}; forehead is somewhat bruised and swollen. Nov 30/93. Apparently restful at night. A quiet and well-behaved patient; always seems happy & good natured. Attends chapel services regularly; also participates in the weekly dances, at which he finds great pleasure. Plays games. Quite free in conversation. Is willing & assist

Personal and Medical History of Michael Brazil Jr.

1893

Cont'd Nov 30. with work whenever asked to do so. Is in good physical health.

Dec 2/93. Wt 147½ pds. (a gain of 8½ pds, since admission). Pulse 80. Dec 15/93. Appetite good & bowels normal. Does not seem to change much. Is a little silly, at times. Talks foolishly and tells silly stories. Works well on hall. Physical condition good. Habits clean.

" 20 Dec 20/93. Was called home, by death of a relative. Left today, alone.

Crossed off the records; was illegally committed —

Harley Harrison

From 172.

1894

Oct 2/94. Wt 161 pds. Pulse 100. (has lost 6 pounds in weight in past month without any known cause).

Oct 31 — Oct 31/94. No special change noted. Is much inclined to be alone. Has a bad temper; is easily agitated & confused.

Nov 1 / Dec 3 — Nov 1/94. Wt 164½ pds. Pulse 68. Dec 3/94 Wt 157 pds. Pulse 68. Jan 3/95. Wt 170 pds. Pulse 90. Jan 31/95. Is a quiet patient; much inclined to be alone. Has a habit, still, of jerking his head to one side, with much force. Still holds some delusions. Works some on ward. Appears contented.

Jan 31 / Feby 4 — Feby 1/95. Wt 170½ pds. Pulse 80. Feb 3/95. Has been quiet & well-behaved. Talks but little. Still shows delusions. Works some on the ward. March 2/95. Wt 176 pds. P 82. March 3/95 No change to note.

Mar 4/5 - 31 — March 31/95. Seems to be improving some, of late; talks more freely, but still holds delusions. Works on ward.

Apr 1 - 30 — April 1/95. Wt 174 pds. P 82. (Patient has been gaining in flesh, the past few months). — April 7/95. Had some trouble with another patient (Chas. Reichardt), today. April 30/95. No special change.

May 1/31 — May 1/95. Wt 174 pds. Pulse 80. May 31/95. Very quiet: does not talk much; goes through some peculiar motions, jerking head &c: seems very nervous: neat & clean: Health seems good.

June 1 / July 31 — June 1/95. Wt 176 pds. Pulse 74. June 30/95. No change noticeable, in patient's condition. July 1/95. Wt 175 " " 74. July 31/95. Is a very nervous patient: has many peculiar motions & actions about him: never causes any trouble on ward. Talks but little: sits on a seat by himself & smiles & laughs to himself: has many delusions. Goes out walking. Health very good.

Aug 1/31 — Aug 1/95. Wt 176 pds. P 90. Aug 29/95. While out walking, tried to run away: Was brought back.

Aug 28/31 — Aug 28/95. Transferred to B^{2} East. Aug 31/95. Last general note still good, at this date.

Sep 2 / Oct 31 — Sep 1/95. Wt 173 pds. P 96. Sep 30/95. Quiet, but cranky & rebellious at times. Habits untidy: otherwise, about same mentally. Oct 1/95. Wt 177 pds. P 88. Oct 31/95: Above general notes, for several months back, still hold good. Nov 2/95: Wt 174 " " 92. Dec 1/95. Wt 173 pds. Pulse 88.

Nov 2 / Dec 31 — Dec 31/95: No change noticeable: Goes walking: works on ward in dining-room: Habits fair, neat & clean.

Jan 1/96 - 31 — Jan 1/96 Wt 166 pds. Pulse 86. Jan 31/96. Transferred to B^{3} (on account of general change of ward).

Feby 1 / Mar 31 — Jan 31/96. Keeps about the same, all the time. Improved. Appetite good: bowels in good condition. Feby 1/96. Wt 169 pds. Pulse 88. Mar 1/96. Wt 170 pds. P 80. April 1/96. Wt 175 pds. P 84. April 30/96. Quiet and well-behaved, during the period. Works on ward & in dining-room: no delusions or hallucinations noticed. Will answer questions, but will not enter into a conversation. Physically is in fairly good condition: Makes no complaints. Appetite good: bowels in good condition.

May 1/96 - Aug 1/97 — Summary Nurses Notes by Dr. Phelps. Patient rather dull & stupid in manner: Speaks very rarely. Appears rather stupid: Has varied none during period: No physical illness noted: Wt. 157 to 179 lbs.

See Folio 374 Transfer Book A.

Personal and Medical History of Edward Froehlich
Fraley (3)

GIBERT, FISCAL & CHAMBERS, DAVENPORT, IOWA

Whole No. 3550.
Residence (in year of) 755 Rice St. St Paul
Date Admission, 10th November 1893
Admitted by, Dr Phelps Hour, 7 PM.
How Sent, John. B. Olivier, Jeff'l, Ramsey County
Sex, Male.
Age, 36 Years
Civil Condition, married
Children, Two
Age Youngest Child, —
Occupation, Musician
Degree Education, 13 years schooling
Profession Religion, R. Catholic
Habits, Has used liquor w excess.
Nativity, Germany (Parents also born there).
Physicians Committing, A.B. Ancker and C. J. Holway
Correspondents, Wm Edward Froehlich
in rear of 755 Rice St St Paul

No. for Year, 126.
Insane Relatives, None
Cause Exciting, probably alcoholism, poor nutrition, bad hygiene, religion
Cause Predisposing, previous attacks
Form, alcoholic Dementia
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, not; but will bear watching.
Date of this Attack, about 2 weeks ago
Duration, about 2 weeks.
No. of Attack, not 1st
No. of Admissions, 1st
Age First Attack, not given
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exd by Dr Phelps - Nov 7/93 - 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,

Very little disposition to converse. Answers questions in a few words. Not inclined to converse with others spontaneously. Has difficulty in understanding questions asked him only German

EMOTIONAL STATE:
Normal, Calm, ✓
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, Shows Delusions.
Special Subjects,
Transitory or Not,
HALLUCINATIONS: ✓
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, ✓
Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:
Talks only German. Yet understands to make the required "tests". —

Personal and Medical History of Edward Froehlich

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2½ WEIGHT, 135 lbs. NUTRITION, Fairly Good.
WOUNDS OR ABNORMALITIES, Probably none. —
TONGUE, ~~Tremors~~, is steady Coatings, Normal Promptness Movement, Quite prompt
PUPILS, Equality, ✓ Size, somewhat dilated
Response Light, Yes Accommodation, ✓
SIGHT, Seems good —
HEARING, Seems good.
COORDINATION, Arms) not tested Gait, station, general bodily; muscles affected —

Case No. 3550 Edward Froelich 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, Stammering, probably very fairly good Slurred,
FACIAL EXPRESSION, probably slight impairment
SENSIBILITY, ✓
HEART, Palpitates; beats rapidly
LUNGS, Do not seem good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Records lost
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,

Cannot obtain any information as he talks only German

Personal and Medical History of Edward Froehlich
Fraley (2)

GIBERT, FULLAM & CHAMBERS, DAVENPORT, IOWA

Whole No. 3550.
Residence (in year of) 750 Rice St. St. Paul
Date Admission, 10th November 1893.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John B. Olivier, Jo. P. Ramsey County
Sex, Male.
Age, 36 Years
Civil Condition, Married
Children, Two
Age Youngest Child, —
Occupation, Musician
Degree Education, 13 years schooling
Profession Religion, R. Catholic
Habits, Formerly liquor to excess.
Nativity, Germany (Parents also born there).
Physicians Committing, A.B. Ancker and C. J. Holloway
Correspondents, Mrs Edward Froehlich
in care of 750 Rice St. St. Paul

No. for Year, 126.
Insane Relatives, None
Cause Exciting, Probably alcoholism, poor nutrition, bad hygiene
Cause Predisposing, previous attacks
Form, alcoholic Dementia
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, not; but will bear watching.
Date of this Attack, about 11 weeks ago
— last 11 week.

Result,

EXAMINATION ON ADMISSION.

Exd by Dr Phelps - Nov 10/93 -

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,

Appears little depressed on account of his present circumstances - Seems quite rational - Speaks only German

GENERAL DESCRIPTIVE REMARKS:
Talks only German, Yet understands to make the required "tests". —

EMOTIONAL STATE:
Normal, Calm, ✓
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, Shows Delusions.
Special Subjects,
Transitory or Not,
HALLUCINATIONS: ✓
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent, ✓

Personal and Medical History of Edward Froehlich

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2½ WEIGHT, 135 lbs. NUTRITION, Fairly Good.
WOUNDS OR ABNORMALITIES, Probably none. —
TONGUE, ~~Tremors~~, is steady Coatings, Normal Promptness Movement, Quite prompt
PUPILS, Equality, ✓ Size, somewhat dilated
Response Light, Yes Accommodation, ✓
SIGHT, Seems good —
HEARING, Seems good.
COORDINATION, Arms, } not good. Shows a tremor of leg & whole body; reflexes applied —
Legs, }
TREMORS, Hands, A steady rythmical tremor of head; less of } Tongue, is steady.
Facial Muscles, — General, Yes.
REFLEXES, Patellar, Equal; about normal.
Other Reflexes,
ARTICULATION, Hesitating, probably fairly Good ~~Slurred~~,
FACIAL EXPRESSION, probably slight Impairment
SENSIBILITY,
HEART, Palpitates; beats rapidly
LUNGS, Appear seem good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, ~~Clean~~, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, Records kept 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,

Cannot obtain any information as he talks only German

Personal and Medical History of Edward Froehlich

ROBERT, PICLAR & STAMBERG, DAVENPORT, IOWA.

1893

Was brought here by Deputy-Sheriff Staas, with the following history. There is no history of Consanguinity or hereditity. This is not 1st attack. (Others not Stated, ads to date). First symptoms of this attack were manifested about 4 weeks ago, by delusions regarding wealth; Enemies throwing pooks, and Strange Conduct & talk generally. Disease seems increasing. Is alternately melancholy & excited. Derangement now shown by his saying he is accused of immoral acts with dogs; that God has given him money; that people are pursuing him with the intention of killing him. that he is condemned to die, because he has not been to Confession &c. Has shown a disposition to injure others. Threatened to kill his wife. Has not attempted suicide, but it is thought he will bear watching. No filthy or destructive habits. No peculiarities were previously shown. Patient has used liquia to excess. Has had no severe disease or injury to head. Has not been restrained or confined. Cause of disease is probably Alcoholism, poor nutrition, bad hygiene, religion. He has had no medical treatment. On Personal Examination, is found to be apparently well nourished, very nervous & talkative. Said "he had $1500.00 deposited with the Sheriff, that God had given him that he was condemned to die; that people were trying to murder him; that he had been accused of intercourse with a dog." Says "he will be killed & wake up again". Appearance and manner were very nervous. Patient has been living in a shanty where the surroundings are bad from a moral & sanitary standpoint. He claims to have constant headache & suffers from insomnia.

Nov 10 Nov 10/93. On admission, is in fair physical condition. Has pulse on R. Pulse 98. T. 100. Bodily Condition rather dirty. No injuries or peculiarities noted. Nov 11/93. Was restless last night, but slept 6 hours. AM. Pulse 98. T. 99.6. Appetite fairly good. No cough noticed. Is rather restless; walks some about hall; also goes out walking with the rest. Talks but very little. PM. Pulse 100. T. 99.6. Nov 12/93. Was again restless, last night, sleeping but 5 hours. AM. Pulse 96. T. 99.4. Appetite only medium. Has been " 11 quiet during the day. No complaints. PM. Pulse 94. T. 99.6. Nov 13/93. Again passed a poor night, " 12 sleeping only 5 hours, last night. AM. Pulse 96. T. 99.2. Appetite fairly good. Quiet. Walks about " 13 hall. Talks but little. No complaints to note. PM. Pulse 92. T. 99.4. Nov 14/93. Was quiet & slept 8 " 14 hours, last night. AM. Pulse 90. Nov 15/93. Passed a quiet & restful night last night. AM. Pulse 92. " 15 Nov 16/93. Slept only 6 hours last night, but was quiet. AM. Pulse 90. Nov 17/93. Was very restless last " 16 night, sleeping but 4 hours. AM. Pulse 86. Conduct & behavior by day do not change much. Reads " 17 none. Takes no part in games. Nov 24/93. With the exception of the night of the 18th inst (when he was quite restless & slept only 5 hours) patient has, during this, the 2d week, been resting & sleeping " 24 quite well 7 or 8 hours each night. Pulse has ranged from 74 to 88, but during past 2 days, has become more nearly normal. Appetite, at best time, very good. On 2 or 3 day, during past week, he has been quite restless by day, trying the doors & wanting to get out. Talks but little; makes no complaints. Works some in ward. His behavior is clearly indicated by past 2 weeks' " 30 record. His mental State is that of Quiet dementia. Nov 30/93. No material change. Appetite good. Makes no complaints; restless at times; talks but little. In quite good physical condition.

Dec 1 Dec 1/93 Wt 141½ pds (a gain of 6½ lbs, since coming). Pulse 74. Rests & sleeps well, at night. His " 15 appetite is fairly good. Is quiet & well-behaved. Talks but little. Works some in ward. Dec 15/93. Continues " 31 in about the same condition, as last noted. Dec 31/93. No perceptible change, to note.

1894
Jan 15 Jan 2/94. Wt 147½ pds. Pulse 86. Jan 15/94. Sits about in a bench, most of the time, while on the hall.

Personal and Medical History of Edward Froehlich

1894
Cont'd
Jan 15/31 Does not read or play any games. Talks but little. Is depressed. Works some in the ward. Jan 31/94. Patient does not seem to change any from what is above noted.

Feb 1/28 Feb 1/94. Wt 145 lbs. Pulse 74. Feb 22/94. Apparently rests & sleeps well, at night. Appetite generally good. Talks some; answers questions quite readily, but is not very communicative. Makes no complaints. Seems depressed. Works some in the ward. Habits are clean.

" 23 Feb 23/94 This patient had been committed here under "Law of 1893" recently declared unconstitutional. He was, today, Taken out and Returned under new Commitment papers from Olmsted County. Feb 28/94. Does not change much, if any. Appetite is good. Sits about in a bench, most of the time. Talks but very little. Seems in good physical condition.

" 28 Mar 2/31 Mar 2/94. Wt 139½ lbs (shows some loss, though without apparent cause). Pulse 80. Mar 31/94. Probably rests well, at night. Works in ward. Always willing to do what is asked of him. Talks when addressed.

Apl 2/30 Apl 2/94. Wt 144½ lbs (has about recovered his lost flesh); Pulse 84. April 30/94. Always quiet & well-behaved. Talks freely, when questioned: makes no complaints. Is willing to work, and has been working, outside, with the painters, the past few days. Physical condition is good.

May 1/25 May 1/94. Wt 145 lbs. Pulse 80. May 15/94. Continues as described in last general note. To-day, " 18/94 Transferred to B! — May 18/94. Transferred to A! — May 24/94. Visited, today, by a friend.

" 31 May 31/94. No noticeable Change for several months past. A good & willing worker in the ward.

June 1/30 June 1/94. Wt 142½ lbs. Pulse 88. June 30/94. Keeps about the same, from month to month. Is very quiet; does not talk without being spoken to. Still manifests delusions. Health seems good.

July 1/31 July 1/94. Wt 142½ lbs. Pulse 81. July 31/94. No noticeable change. Appears melancholic, at times.

Aug 2/31 Aug 1/94 Wt 140½ " " 84. Aug 22/94. Quietly behaved, but becomes very cranky, if objects to. Had trouble with him, while out on the road, today. He left gang to the rear - patch & when stopped " 23/31 tried to fight the attendant. Aug 23/94. Transferred to B. Aug 31/94. Behaves well; is quiet. Works some in the ward. Still somewhat inclined to be cranky, at times; habits are cleanly.

Sep 1/30 Sep 1/94 Wt 146 lbs. Pulse 114. Sep 7/94. Transferred to B! — Sep 10/94 Behavior good. Talks but little. Reads a great deal. Works some in the ward, when asked. Also helps sometimes, in the kitchen.

" 30 Sep 30/94 Shows a mean disposition, at times. Inclined to be contrary and even ugly. Always by himself. Seldom speaks. Appetite fair; bowels regular. Habits are cleanly.

Oct 2/31 Oct 2/94. Wt 140 lbs. Pulse 94. Oct 31/94. Keeps about the same, from month to month.

Nov 2/30 Nov 2/94. Wt 140½ " " 74. Nov 30/94. Quiet & well-behaved, though, at times, inclined to

Dec 3 (Rec'd Jan 3/31) be somewhat contrary & stubborn. Does some work in ward. Dec 3/94. Wt 142 lbs. Pulse 71. Jan 3/95. Wt 141 lbs. Pulse 88. Jan 31/95. Has been behaving well. Talks but little. Inclined to be alone; Shows delusions. Appetite & sleep good. Does not do any work in ward, of late.

Febr Feb 2/95. Wt 141½ lbs. Pulse 78: March 2/95. Wt 143 lbs. — 88: Apl 1/95. Wt 143½ lbs. — Pulse 84.
Mar
Apl 1/30 Apl 30/95. No special change. Very quiet & likes to be by himself. Behaves well. Talks but little; makes
May 1/31 no complaints. Has delusions. Does not improve mentally. Works in ward & some in Ketchen.
June 1/30 (Physical condition Good. May 1/95. Wt 143 lbs. Pulse 88. May 31/95: No change noticeable. —
June 1/95. Wt 145 lbs. Pulse 70. June 30/95. The same quiet & orderly patient. Talks rationally,
July 1/31 and cannot detect any delusions. Works well. Is very neat in dress & appearance.
Physical condition is good. July 1/95. Wt 147 lbs. Pulse 76. July 31/95. Quiet & undemonstrative.

(carried to 112)

Personal and Medical History of Stephan Hammerschmidt

ABBOTT, PICKAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3551.
Residence, 442 Lafond St. St Paul
Date Admission, 10th November 1893.
Admitted by, Dr Phelps Hour, 7 PM
How Sent, John B. Olivier, Jof C, Ramsey County
Sex, Male
Age, 45 (about).
Civil Condition, married
Children, x
Age Youngest Child, x
Occupation, Teamster
Degree Education, Common School
Profession Religion, Catholic
Habits, not intemperate
Nativity, Austria (Parents also born there).
Physicians Committing, Edgar J. Schmidt + Jas. C. Markoe
Correspondents, Leopolena Hammerschmidt
Family Physician Dr Edgar J. Schmidt 442 Lafond.

No. for Year, 121.
Insane Relatives, one brother was insane. Recovered
Cause Exciting, mental Strain
Cause Predisposing, possibly some heredity
Form, acute melancholia
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, No X
Date of this Attack, about 2 weeks ago
Duration, about 2 weeks
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 45
Time of Leaving, Febry 8 94
Time in Hospital, 2 mo. 29 d.
Result, Rec'd.

Crossed from the recent list, April 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Exd by Dr Phelps Nov 14/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, fairly clear.
Quick or Sluggish, fairly quick
MEMORY:
Past Events,
Recent Events, } Quite fair
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Fairly alert
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State, somewhat defective
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
"Does not know why he was sent down here" Admits, however, he was sick "a little bit" — "not much" —

EMOTIONAL STATE:
Normal, Calm, Yes
Indifferent,
Exalted,
Depressed, somewhat
DELUSIONS:
Systematized or Not, ?
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, fairly Coherent
Voluble or Reticent, fairly free

Personal and Medical History of Stephan Hammerschmidt

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11½ WEIGHT, 138½ lbs. NUTRITION, Seems fairly good.
WOUNDS OR ABNORMALITIES, ✓
TONGUE, Tremors, none Coatings, normal Promptness Movement, normal
PUPILS, Equality, Equal Size, Slightly above normal
Response Light, ready Accommodation, ✓
SIGHT, Seems good
HEARING, Seems good
COORDINATION, Arms, } Seems fairly good, by usual tests.
Legs, }
TREMORS, Hands, (Tongue, none
Facial Muscles, General,
REFLEXES, Patellar, Equal; about 8; (Dr P's scale).
Other Reflexes,
ARTICULATION, Hesitating, No. fairly good Slurred, —
FACIAL EXPRESSION, Good
SENSIBILITY, ✓
HEART, Sounds seem good
LUNGS, — very good. —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother dead
Father or Pat. Relations, father dead — about 75 - 1 year sick.
Brothers or Sisters, —

EBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA

1893

Has brought here by Deputy Sheriff Haas, with the following history. There is no history of consanguinity. One brother was insane, 20 years ago; he recovered after 4 months. This is 1st attack; symptoms appearing about 2 weeks ago; had a morbid fear of being injured. The disease seems stationary & not variable; no rational intervals. He now imagines some one is watching him to injure him; and also certain parties, with whom he has had Real-Estate transactions, are trying to cheat him. He is neither disposed to injure others, nor suicidal, nor filthy nor destructive. No peculiarities &c above previously shown. There is no history of intemperance & no of any severe disease or head-injury. He has not been restrained or confined, nor under medical treatment. Supposed cause of the disease is mental strain. On personal examination, he is much agitated when discussing his hallucinations. He said "that he was accused of being responsible for the failure of a certain St Paul Bank & that certain parties now watching him to injure him". Appearance & manner excited & suspicious. His wife says he is very wakeful at nights & insists upon drawing the blinds at night & keeping out imaginary intruders.

Nov 10 Nov 10/93. Patient, on admission, is in fair physical condition. Wasp. temp 98°. Pulse 100. Resp 99.4

" 11 Bodily condition, quite clean; no injuries or peculiarities noted. Nov 11/93. Was restless last night & slept only 5 hours. AM. Pulse 96. Temp 99. Somewhat restless today, walking the hall. Also went out walking with the rest. Talks quite freely, but shows delusions; thinks "some one is after him". No complaints

" 12 or injuries to note. No cough observed. PM. Pulse 98. Temp 99.2. Nov 12/93. Was very restless & noisy, nearly all last night; slept but 1 hour. AM. " 90 " 98.8. Appetite is fairly good. Seems to be of a very quiet nature, today; Complains of pain in shoulder; says he does not know how he got hurt; (probably from knocking against something during his "spell", last night.). PM Pulse 92 Temp 99.2.

" 13 Attended Chapel-services today. Nov 13/93. Slept only 1 hour, last night: was yield, noisy and pugnacious. AM. Pulse 90. Temp 99.4. Appetite now good. Is quietly behaved during the day. Talks some when addressed. Still thinks "some one is trying to kill him". Goes out walking. Works none. Reads none.

" 14 PM Pulse 92. Temp 99.6. Nov 14/93. Slept poorly, only 3 hours, last night. AM. Pulse 94. Had another

" 15 "spell" during the night, noisy &c. Is quiet during the day. Nov 15/93. Was restless & noisy, last night, sleeping only 4 hours. AM. Pulse 96. Somewhat restless today, stamping the floor, at times.

" 16 Nov 16/93. Slept 6 hours last; restless 2 hours or so. AM. Pulse 94. Appetite medium. Has

" 17 been excited & restless during the day. Still deluded. Nov 17/93. Restless, but sleeping 6 hours, last night. AM. Pulse 90. Quietly behaved today. Talks some with his fellow patients. No Complaints.

" 24 Nov 24/93. Since last noted, patient has continued more or less restless at night and sleep has been much disturbed; though he has slept, on 6 nights of the past week, from 5 to 7 hours, each night but on one night was very restless & slept only 3 hours. Appetite has been good. Pulse, during past few days, has become more nearly normal. Is quietly behaved by day. Talks quite freely. Works some on ward. Makes no complaints. Goes out walking with the rest. Habits are clean.

" 30 Nov 30/93. Quiet & well-behaved; seems improving. —

Dec 1/5 Dec 1/93. Wt 144½ pds. (a gain of 6 pounds since coming); Pulse 70. Dec 1/93. Apparently rests and

" 31 sleeps well, at night. Appetite good. Continues quiet & well-behaved. Reads some. Talks freely. No delusions noted. Works on ward. Is in good physical condition. Dec 31/93. Quiet & well-behaved-makes no complaints. Bowels generally free. Talks freely. No delusions noted. Works on ward.

1894

Jan 2/15 Jan 2/94. Wt 149½ pds (a further gain of 5 pds). Pulse 76. Jan 15/94. Talks quite freely: no

" 16 delusions noted. Makes no complaints. Seems to be in good spirits. Works willingly on the wards;

" 31 Is in good physical condition. Jan 16/94. Was out working with Painter ½ day, today.

Jan 31/94. Is always quiet & well behaved. Talks freely; reads some; Makes no complaints.

Feb 1 Works in dining-room. Has also been working outside some, with the Painters.

" 8 Feb 1/94. Wt 151 pds. Pulse 76. Continues quiet & well-behaved. Personal habits good.

Feb 8/94. Went home, in fair condition to-day, with a friend. —

— Crossed off the Records. Was illegally committed —

Charles A. Johnson

1894 From 392.

Aug 1/31 Aug 1/94. Wt 137 pds. Pulse 98. Aug 31/94. Appetite good; bowels regular; no cough noticed; patient appears to be in good bodily health. He is quarrelsome & very noisy; talks almost continuously and shouts at the top of his voice. Speech is incoherent - no complaints or injuries to report. Is cleanly in his person & habits. Patient is blind. Sept 1/94. Wt 140 pds. P 98. Sept 29/94. Visited by brother.

Sept 27 Sept 30/94. No change to report. Is continuously noisy, singing & shouting aloud. Health good.

" 30 Oct 1/94. Wt 144 pds. Pulse 82. Oct 31/94. Patient's condition remains unchanged, since

Oct 1/31 last report, with the exception that he is not now so noisy. Retains as much, but not in the loud tone of voice as before.

Nov 1 Nov 1/94. Wt 149 pds. Pulse 74. Dec 1/94. Wt 150 pds. Pulse 93. Dec 30/94. Patient was slightly cut on the

Dec 1/30 forehead, in 3 places, at 3:30 am - Night-Watch (nurse) thinks it was patient Alex Henderson, who

1895 struck the blows, but not sure, as he did not witness the attack - Jan 1/95. Wt 145 pds. - Pulse 82 -

Jan 1 Jan 2/95. Patient was struck on the right eye-brow, during night, causing slight abrasion of skin - Supposed

" 27 to have been done by a fellow-patient (John Scanlon 83) - Jan 31/95. Behavior has much improved. Talks,

" 31 however, almost constantly, but without sense or coherence. Has habit of rubbing head with both hands, nearly all the time. Talk is much more subdued than formerly. Makes no complaints. Habits are cleanly. (Patient is quite paretic; ideas halted; general self-satisfied condition. Dr H.) Feb 1/95. Wt 138 pds.

Feb 1 Pulse 68. Feb 25/95. Was found, this morning, marked about the face & head. Injuries had, apparently,

" 25 been inflicted during the night. Feb 28/95: Behavior much improved; is not so noisy, of late,

" 28 nor so pugnacious, as formerly; still he is easily roused & will fight readily. Makes no complaints.

Talks constantly, in an incoherent manner. Habits are cleanly. Appears in good bodily health.

Mar 1/31 March 1/95. Wt 140 pds. Pulse 80. March 29/95: Patient Scanlan struck Johnson with some

" 31 hard substance, during the night, cutting the latter slightly across the nose & right cheek.

March 31/95. No change noticeable. April 1/95. Wt 138 pds. Pulse 92. April 30/95: Patient

April 1/30 still remains in same condition as reported on 28th February last. Habits are cleanly. -

May 1/15 May 1/95. Wt 137 pds. Pulse 92. May 15/95. Patient is troubled with varicose ulcers in both Legs,

which break out & heal up - He has ulcers on his lower limbs now, which might be healed up, by

his being put to bed, but he refuses to remain in bed. Behavior is now much quieter - He is of a most

irascible temperament & must be let alone & interfered with. Talks to himself almost constantly - Is incoherent.

" 15/31 May 21/95. He had a slight attack of diarrhoea this morning. May 31/95. No change mentally or physically

Carried to Dunfee Book A page 96 6.

Personal and Medical History of John Stifter

HERBERT, PUELICHER & SCHAEFERS, DAVENPORT, IOWA



Whole No. 3552
Residence, St Bonifacio, Minn
Date Admission, 11th November 1892
Admitted by, Dr Eby Hour, 6.40 PM
How Sent, John H. Steele, Jof P, Hennepin County
Sex, male
Age, 35 years
Civil Condition, single
Children,
Age Youngest Child,
Occupation, Laborer
Degree Education, Common School
Profession Religion, Catholic
Habits, not intemperate
Nativity, Hungary (Parents also born there).
Physicians Committing, Chas E. Rogers MD Edw S. Hart
Correspondents, C. M. Groschen, St Bonifacio, Minn
Family Physcn Dr Koch, Waconia, Minn

No. for Year, 122.
Insane Relatives, None
Cause Exciting, unknown
Cause Predisposing, unknown
Form, chronic mania
Accompanying Bodily Disorder, great nervousness.
Suicidal or Not, not.
Date of this Attack, 1 year ago
Duration, one year
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 34 years
Time of Leaving,
Time in Hospital,
Result,

Seen: Summers, at Ludden & Hughes

EXAMINATION ON ADMISSION.

Eddy Dr Phelps (Dr Eby Herzog Present) Dec 14 93

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, } Fair, as far as can tell.
Recent Events, }
Special Subjects, }

PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,

REASONING POWER:
Ordinary Subjects, } rather poor.
Own Mental State, }
Special Subjects, }

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Ans
Exalted,
Depressed, somewhat.

DELUSIONS:
Systematized or Not, of persecution &c.
Special Subjects,
Transitory or Not,

HALLUCINATIONS: None noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Slow.

GENERAL DESCRIPTIVE REMARKS:

About 2 or 3 years ago had operation performed on jaw, (right). for necrosis of bone. Claims his left ankle was sprained about 2 months ago. Says he had a fall of about 30 feet in to a railroad cut, striking his chin, and voice has been shaky ever since. This happened about 6 months ago. Has not been to Catholic Church for over a year. Wanted to join the Freemasons because "thought their ways were good". Dr is noticed a sluggishness of speech & thought. Denies ever having had syphilis or any disease of this nature. —

Personal and Medical History of John Stifter

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11 in WEIGHT, 153 lbs NUTRITION, Fair
WOUNDS OR ABNORMALITIES, Scar on chin (r side); Follow up check from operations for necrosis of bone, starting from toothache
TONGUE, Tremors, Some Coatings, ✓ Promptness Movement, Prompt
PUPILS, Equality, Size, left a trifle large
Response Light, ready Accommodation, ✓
SIGHT, Fairly Good
HEARING, ✓

Case No. 3552 John Stifter. 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.

...mustrady. Standing, Eyes shut,

REFLEXES, Patellar, equal, worn y —
Other Reflexes, ankle-clonus —
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, ✓
SENSIBILITY,
HEART, Sounds palpitating & accentuated — no murmurs
LUNGS,
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Records kept

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, See history ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died of inflammation of lungs
Father or Pat. Relations, Father living
Brothers or Sisters, he says are healthy, so far as he knows".

no history of heredity throughout.

Personal and Medical History of John Stifter

HERBERT, PIGLER & CHAMBERS, DAVENPORT, IOWA



Whole No. 3552
Residence, St Bonifacio, Minn
Date Admission, 11th November 1893
Admitted by, Dr. Eby Hour, 6.40 PM
How Sent, John H. Steele, Jof P, Hennepin County
Sex, male
Age, 35 Years
Civil Condition, single
Children,
Age Youngest Child,
Occupation, Laborer
Degree Education, Common School
Profession Religion, Catholic
Habits, not intemperate
Nativity, Hungary (Parents also born there).
Physicians Committing, Chas E. Rogers and Edw S. Hart
Correspondents, C. M. Groschen, St Bonifacio, Minn
Family Physician Dr. Koch, Waconia, Minn

No. for Year, 122.
Insane Relatives, None
Cause Exciting, unknown
Cause Predisposing, unknown
Form, chronic mania
Accompanying Bodily Disorder, great nervousness.
Suicidal or Not, not.
Date of this Attack, 1 year ago
Duration, one year

Result,

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Eby & Dr. Shelp (Dr. Eby Absent) Dec 1893

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

MEMORY:
Past Events,
Recent Events,
Special Subjects, } Fair, as far as can test.

PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,

REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects, } rather poor.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, And
Exalted,
Depressed, somewhat.

DELUSIONS:
Systematized or Not, of persecution &c.
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Slow.

GENERAL DESCRIPTIVE REMARKS:

About 5 or 6 years ago had operation performed on Jaw, (right). For necrosis of bone. Claims his left Ankle was sprained about 2 months ago. Says he had a fall of about 20 feet into a trachway tc, striking his chin, and voice has been shaky ever since. This happened about 6 months ago. Has not been to Catholic Church for over a year. Wanted to join the Freemasons because "thought their ways were good". Dr is noticed a sluggishness of speech & thought. Denies ever having had syphilis or any disease of this nature. —

Personal and Medical History of John Stifter

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11 in WEIGHT, 153 lbs NUTRITION, Fair
WOUNDS OR ABNORMALITIES, Scar on chin (r side); Follow wrt check from operations for necrosis of bone, starting from tooth socket
TONGUE, Tremors, Some Coatings, ✓ Promptness Movement, Prompt
PUPILS, Equality, Size, left a trifle larger
Response Light, ready Accommodation, ✓
SIGHT, Fairly Good
HEARING, ✓
COORDINATION, Arms, } somewhat impaired. Standing a foot, unsteady. Standing, Eyes shut,
Legs, } sways some.
TREMORS, Hands, Some Tongue, some
Facial Muscles, ✓ General, ✓
REFLEXES, Patellar, Equal, about q —
Other Reflexes, Ankle-Clonus —
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, ✓
SENSIBILITY,
HEART, Sounds palpitating + accentuated — no murmurs
LUNGS,
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Records kept Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, See history ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died of inflammation of lungs
Father or Pat. Relations, Father living
Brothers or Sisters, he says "are healthy, so far as he knows".

} no history of heredity brought out.

Personal and Medical History of John Stifter

COBURT, FOSLER & OHAUSER, DAVENPORT, IOWA.

1893

Was brought here by Sheriff's Deputy, John. M. Nelson. with the following history. There is no history of consanguinity or heredity. This is 1st attack, symptoms manifested one year ago. The disease appears to be stationary, but there are rational intervals. Derangement is now shown by thinking somebody is after him. Thought Freemasons, at first; since, not; but desires to become a Member. Is neither disposed to injure others, nor suicidal, nor filthy nor destructive. No peculiarities &c were previously shown. There is no history of intemperance, nor of any severe disease or injury to the head. He has not been restrained or confined. Has had no medical treatment. Supposed Cause of the disease is unknown. On personal examination, there is no abnormal appearance, but his thoughts seem slow and speech tame. He talks rationally. Claims that flour contained acetate of lead; fired a revolver in the flour box, which would be fired upon opening lid; expecting to catch man trying to poison him. Left the Country, and his brother was shot by revolver in box, striking left thigh. - Nothing to indicate insanity, except he seems to be excitable & his talk somewhat rambling. He thinks he is being pursued by enemies, trying to poison him. Appearance & manner, nervous. (C. M. Groschen, and Andrew Stifter say he has been a Catholic, but now, desires to become a Mason; says "Grocery man is trying to poison him".

Nov 11 — Nov 11/93. On admission, is in fair physical condition. Was put on B3. Bodily condition, dirty. Burn on one Elbow & full of pimples. Patient seems to be quite weak. Clothing partially burned, when brought in; he does not remember how it happened. Nov 12/93. Slept but 5 hours, last night; being somewhat restless. AM. Pulse 70. R 20. T 98.8. Appetite very good; bowels seem regular; has some cough. Is quiet; sits in one place, mostly all the time. Says "he has 'spells' when he cannot either see or
" 13 hear". Nov 13/93. Was restless for 5 hours; Sleeping but 4 hours, last night. AM. Pulse 80. T 98.6. Appe-
" 14 -tite good. Bowels regular. Nov 14/93. Again, passed a poor night, last night; Slept only 4 hours; was
" 15 restless for 5 hours. AM. Pulse 72. T 98.6. Nov 15/93. Restless 4 hours, Sleeping only 5 hours, last night. AM. Pulse 82. T 98.6. Appetite Continues good; bowels normal. Is inclined to be contrary, and, at
" 16 times, stupid & dull. Nov 16/93. Slept 4 hours last night; was restless for 5 hours or so. Conduct and
" 19 behavior by day, about as usual. Nov 19/93. Rest & sleep at night, the past 3 nights, have been much
" 26 broken and disturbed. Since admission, this has been the general rule. Nov 26/93. Rest & sleep, during each night of past week, has continued very poor: he has been very restless and has slept only from 2 to 4 or 5 hours, each night; on only one night 6 hours. Appetite, as a rule, has been good, and bowels normal. Recently, he was observed to go through peculiar motions, at times. Has hallucinations "of hearing"; has been noticed in a kind of stupor, during the day time.
" 30 Lies around on the benches; very reticent. Habits are clean. Nov 30/93. Slept but 5 hours, last night. Was restless for 4 hours or so. Appetite continues good. Bowels regular. Does not sleep very well during the night. Is quiet and well-behaved. Hardly ever speaks to any one. Habits are clean.

Dec 1/93 — Dec 1/93. Wt 170½ pds; (has gained markedly, 17½ pds, in flesh, since coming). Pulse 74. Dec 1/93. Appetite good. Bowels normal. Behavior good; he is very quiet. Talk apparently rational. Walks around inward. Good personal habits.
" 31 Dec 31/93. There is no change in patients' condition to report since last note.

1894
Jan 1 — Jan 1/94. Wt 183 pds (again at 17½ pounds in past month). Pulse 76. In good physical condition -
" 14 Jan 14/94. Appears to be growing worse, in the last few days; inclined to be stubborn and contrary; also
" 16 somewhat ugly. Jan 16/94. Apparently rests & sleeps well, at night. Appetite good; bowels regular.

Personal and Medical History of John Stifter

1894 Cont'd

Jan 16 Cont'd — Is now quietly behaved; hardly ever speaks to any one; still inclined to be contrary and
" 31 stubborn. Habits are clean. He does no work. Jan 31/94. Appetite fairly good. Is dull and stupid; never speaking to any one: some days, is very restless. Physical condition good. -

Feb 1/94 — Feb 1/94. Wt 193 pds. (a further gain; 10 pounds in the past month). Pulse 80. Feb 8/94. Was
" 11 restless for 6 hours, last night; slept 4 only. Engaged in a fight with a fellow-patient (Alois Fait) today & received some slight bruises &c. Struck several times on the neck. Feb 22/94. His
" 24 habits are filthy, & his untidy about his clothing. Otherwise no material change, in his condition.
" 28 Feb 24/94. This patient was Committed here under the "Law of 1893" recently declared insane - Institutional. He was, today, Taken out and Returned under "new Warrant" from Olmsted County. Feby 28/94. No special change to note. — " —

Mar 1/31 — March 1/94. Wt 194 pds. Pulse 80. March 31/94. Appetite good; bowels regular; is quietly behaved never speaks to any one; contrary and stubborn in his manner & actions. Does no work. Is slouchy in appearance & inclined to be filthy in his habits. — Health is good. —

Apl 2/30 — April 2/94. Wt 197½ pds. Pulse 76. April 30/94. No noticeable change in his condition. —

May 1/18 — May 1/94. Wt 198½ pds. Pulse 92. May 18/94. No special change, except that, of late, he has been more quietly - behaved and habits have become cleanly. - Health is good. Was transferred to the Annex, today: -

June 30 — June 30/94. Keeps about as usual. Works in farm; physical condition is good. —

July 31 — July 31/94. No material change in patient's condition. Continues to work on farm. Habits clean.

Aug 31 / Sept 30 / Oct 31 — During these 3 months, patient has been quietly-behaved; inoffensive - Works out in the farm - When inward, sits in one place most of the time, with head bowed in his hands. He seldom speaks. Habit clean. He is neat & tidy in Dress & appearance - Health is apparently good. -

Nov 30 / Dec 31 / 1895 Jan 31 — During this period, there has been no change to note, in either his mental or physical condition. He is quietly - behaved - Works outside on the farm - Seldom speaks unless addressed - Is cleanly in his habits - Tidy in dress & appearance - Health is apparently good. —

-to- Apl 30 — During this quarter, patient has been quiet; worked on farm; seldom speaks; habits clean; health good. On March 3rd (multo) he started to go to town in Ann, but was apprehended & brought back. Said that Sound one has deprived him of his blood & thereby changed the color of his beard, and he wanted to go to the Court - house & see about it". At present (Apl 30) does no work. —

May 1 / June / To July 31 — During this quarter, no change specially noticeable. For quite a while, declined to do any work, but, during June, he re commenced working outside. His quietly - behaved. Talks a little, but irrationally: shows delusions: Habits clean. Dress neat: Health is good. — " — " —

Aug 1 / Sept / Oct 31 — During this period, patient has been quiet & well-behaved: has worked quite steadily on the farm: has delusions: Speech irrational: Habits clean: Health good (recently working in Engine - room).

Nov 4 / Dec / Jan 31 1896 — Nov 4/95. Wt 186 pds. Pulse 76. Nov. Dec & to Jany 31/96. No special change, during the period: deluded & talks to himself a good deal. Health seems good. Patient is always watching for an opportunity to escape & yesterday (Jan 30th). found the outside door open & walked down the road, quite a distance, before he was noticed. He has lately been working only on the wards. Habits clean. Physically health is good.

Feby / March / To Apl 30 — Febys/96. Wt 191 pds. P 86. Feb. March & to Apl 30/96. Has been quiet & well-behaved, during the period: works on the wards. Quite deluded: Speech rather incoherent: attempts to escape at every opportunity (tried to escape while out walking Apl 7th): habits clean. Health apparently good.

Transfer Book "F" page 300

Personal and Medical History of Alois Fait

EBERT, FICAN & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3554.

Residence, Steele County.

Date Admission, 14th November 1893.

Admitted by, Dr Phelps Hour, 7.45 PM.

How Sent, M.B. Chadwick. Jof P., Steele County.

Sex, Male

Age, 25 Years

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Laborer

Degree Education, Limited to reading & writ

Profession Religion, Catholic

Habits, not stated

Nativity, Bohemia. (Parents also born there).

Physicians Committing, A B Stewart & W.C. Eustis

Correspondents, none given in papers - Relatives in Bohemia shipped $ sent to this Country.



No. for Year, 124.

Insane Relatives, none

Cause Exciting, Injury to head when 12 years old.

Cause Predisposing, Head injury

Form, Epileptic dementia

Accompanying Bodily Disorder, Epilepsy

Not, not.

s Attack, at age of 12 years

12 Years.

ck, many (since 12 years of age).

nissions, 1st

Attack, about 13 years.

aving, July 19th 1900

ospital, 6 yr. 8 m. 12 Days

Result, Discharged Aug 8 1900

Improved

Went out with Parent July 18 1900 JK pm

EXAMINATION ON ADMISSION.

Exdy Dr Ely + Herzog, Dec 8 93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Very Quick

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:

Cannot understand or speak English. Unable to procure an Interpreter of this language, Consequently it is difficult to make examination. —

EMOTIONAL STATE:

Normal, Calm, Yes + inclined to be

Indifferent,

Exalted, Slightly

Depressed,

DELUSIONS:

Systematized or Not, ?

Special Subjects,

Transitory or Not,

HALLUCINATIONS: ?

ILLUSIONS:

CONVERSATION: Cannot talk.

Coherent or Incoherent,

Voluble or Reticent,

Personal and Medical History of Alois Fait

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 in WEIGHT, 169 lbs. NUTRITION, Good

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Slight fine Coatings, Slight Promptness Movement, quite prompt

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation, Slight

SIGHT, very good

HEARING, seems good.

COORDINATION, Arms, Fair, by usual tests.

Legs, Standing, Eyes shut, a little unsteady

TREMORS, Hands, some Tongue, Slight fine

Facial Muscles, ✓ General, none.

REFLEXES, Patellar, Equal — about + — Dr. Phelps to do.

Case No. 3554. Alois Fait. Vol. 25.
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, Extremely rapid. Sounds quite good.

LUNGS, are good —

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

Records kept

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,

Cannot get this information.

Personal and Medical History of Alois Fait

LIBRARY, FICKAS & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3554.

Residence, Steele County.

Date Admission, 14th November 1893.

Admitted by, Dr Phelps Hour, 7.45 P.M.

How Sent, M.B. Chadwick Jof P., Steele County.

Sex, male

Age, 25 Years

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Labourer

Degree Education, Limited to reading & writ

Profession Religion, Catholic

Habits, not stated

Nativity, Bohemia, (Parents also born there

Physicians Committing, A. B. Stewart & W.C. E

Correspondents, none given in "Papers" - Relatives in Bohemia shipped him to this Country

No. for Year, 124.

Insane Relatives, none

Cause Exciting, Injury to head when 12 years old.

Cause Predisposing, Head injury

Form, Epileptic dementia

Accompanying Bodily Disorder, Epilepsy

Not, not.

s Attack, at age of 12 years

12 Years.

ick, many (since 12 years of age).

nissions, 1st

Attack, about 13 years.

aving. July 14. 1890, Oates



EXAMINATION ON ADMISSION.

Early Dr Elyt Norwood, Dec 6/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, very quick

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, Yes inclined to be

Indifferent,

Exalted, slightly

Depressed,

DELUSIONS:

Systematized or Not, ?

Special Subjects,

Transitory or Not,

HALLUCINATIONS: ?

ILLUSIONS:

CONVERSATION: Cannot test.

Coherent or Incoherent,

Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:

Cannot understand or speak English. Unable to procure an Interpreter of his language, Consequently it is difficult to make Examination.

Personal and Medical History of Alois Fait

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7 in. WEIGHT, 169 pds. NUTRITION, Good

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Slight fine Coatings, Slight Promptness Movement, quite prompt

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation, Slight

SIGHT, very good

HEARING, seems good.

COORDINATION, Arms, Fair, by usual tests.

Legs, Standing, Eyes shut, a little unsteady.

TREMORS, Hands, Some Tongue, Slight fine

Facial Muscles, ✓ General, none.

REFLEXES, Patellar, Equal — about 8 — D. O's Scale.

Other Reflexes,

ARTICULATION, Hesitating, not Slurred, foreign accent

FACIAL EXPRESSION, Normal

SENSIBILITY, ✓

HEART, Etherely taps. Sounds quite good.

LUNGS, are good -

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

Records kept

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,

Cannot get this information.

Personal and Medical History of Alois Fait

EGBERT, FIDLER & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Sheriff Barnicard, with the following history. There is no history of consanguinity or heredity. Patient is an epileptic, since age of 12 years. These attacks have been numerous; each fit lasting from 5 to 30 minutes. First symptoms manifested 12 years ago. Disease seems increasing; it is variable and there are rational intervals, but these, at irregular periods. Derangement now manifested only in fits. He is neither disposed to injure others, nor suicidal, nor filthy nor destructive; uses tobacco, probably to excess. Has hit ahead with stone at above age (12); he has not been restrained or confined. This injury to head is the supposed Cause of the disease. Has taken bromides for 3 days, with good result. On personal examination, there is observed only condition of epilepsy. Appearance unanimous, quiet. Patient has had from 3 to 8 fits, a day, for several months. (History obtained from patient himself).

Note. Relatives in Bohemia shipped him to this Country.

Nov 14 — Nov 14/93. On admission, is in fair physical condition. Was put on B[3]. Bodily condition dirty; no
" 15 — injuries or peculiarities noted. Nov 15/93. Slept 7 hours last night and was quiet. AM. Pulse 92 R 18 T 98.6. Appetite good. Bowels apparently regular. No cough noticed. Is restless to day; walks the
" 16 — floor a good deal. Cannot talk English & cannot be therefore understood. Nov 16/93. Was restless for 3 hours, but slept 6 hours, last night. AM. Pulse 75. T 98[4]. Appetite good. Bowels have moved.
" 17/18 — Nov 17/93. Restless for 2 hours, but sleeping 7 hours, last night. AM. Pulse 96. T 98.6. Nov 18/93. Fairly quiet & restful last night; slept 7 hours. AM. Pulse 96. T 99.2. Has some peculiar actions & behaves,
at times, as if he was afraid. Is inclined to be cranky towards some of his fellow-patients.
" 19 — Nov 19/93. Has been sleeping 6 to 7 hours, each of last few nights: is occasionally restless, &
somewhat noisy. Pulse & Temperature, the past 3 days has been as follows: (19th) Pulse 78 T 99.2
(20th) P 90 T 99. (21st) P 90 T 99 and, to day, P. 82 T 98.6. Appetite Continues good; bowels regular.
" 23 — Nov 23/93. Slept 7 hours, last night; restless 2 hours or so. AM. Pulse 95. T 99. Engaged in a fight
to day with a fellow-patient (Jo Stees), by whom he was struck & received a mark on the
forehead. Took a "spell" this afternoon, in which he was very noisy & throwing himself about
the bed. Was given a hypodermic, which did not seem to have any effect upon him. —
" 24 — Nov 24/93. Was noisy for an hour or so last night, but afterward slept nearly all night. AM. Pulse 90.
Seems to be in a kind of stupor; will not speak to any one; appears as if in a sleep; will
occasionally throw himself all around; cannot keep him on a bed, as he will throw himself
off. Has not taken any food since Yesterday Morning. Bowels are somewhat constipated.
" 25 — Nov 25/93. Slept 8 hours last night, but was restless. Has not partaken of any food, now, for 6 meals.
Bowels constipated. He appears to be in a kind of stupor. AM. Pulse 114. Bowels have moved.
" 26 — Nov 26/93. Was restless for 2 hours or so, but slept 7 hours, last night. AM. Pulse 86. T 99.8. Appears to be
some better today. Took some food last evening & also this morning. Seems, however, unable to walk.
" 27 — Bowels have moved. Nov 27/93. Slept 6 hours, being restless 3 hours, last night. Somewhat better today.
AM. Pulse 92. T 98.6. Appetite good. Bowels move regular. Is very cranky & appears to have a bad
temper. Last evening, he threw a stool at a fellow patient (C. H. Carli) without any cause
" 28 — at all. Nov 28/93. Again, passed a poor night, last night; quite restless for 3 hours but sleeping 6
" 30 — hours. AM. Pulse 92. T 98.6. Appetite fairly good. Bowels move regular. Nov 30/93. No change to note.
Patient has been in bed a few days. Habits are clean.

Dec 1/11 — Dec 1/93. Wt 160 pounds. (Has lost some in flesh, since coming). Pulse 82. Dec 11/93. Engaged, today,

Personal and Medical History of Alois Fait

1893

Dec 11 — in a fight with a fellow-patient (Frank Lee), throwing him against a seat & inflicting quite a severe
" 16 — bruise over the eye. Dec 16/93. Is quarrelsome, at times. Has another fight today with a fellow-patient
(Thomas Grady) who struck patient in the eye, causing it to become black & swollen up. He jumped on to
this grady again, after a while & got his other eye blacked. Grady received a few scratches in the face.
" 18 — Dec 18/93. Patient does not change much, if any. No fits have been reported since patient has
" 26 — been on this ward: and, upon enquiry further, find that he has had none. Dec 26/93. Is complaining
" 27 — of headache, this afternoon, and is lying in bed. Dec 27/93. Appetite poor. Says "he is sick"; complains
" 31 — a good deal of his head; remained in bed all day. Dec 31/93. Appetite is now good; bowels regular.
Behavior "cranky". Is occasionally ugly towards patients & employes. Will take a "spell" when
he will lie in one place and not move. Does not talk English & therefore cannot be understood.

1894
Jan 1 — Does not work any. Habits are clean. —

Jan 1/94. Wt 154 pds. (Has lost 6 pounds in flesh, the past month, without apparent cause). Patient
started to run away, today, while out walking; made a good attempt for his liberty, as he
ran down College Street quite a distance before he was overtaken, when he ran into a barn
and hid behind the door. When found that he was caught, he made quite a struggle & would
not go back; was too tired to resist much; would not walk home & had to be brought home in a vehicle.
" 5 — Jan 5/94. Eloped, today, by opening screen & window & sliding down on blankets (being left
" 6 — in room when doors were locked before supper, he having crawled under the bed). Jan 6/94. Was
" 13 — returned, today. Jan 13/94. Had convulsion in each of nights of 8th 10th 11th and 12th inst.
" 15 — Jan 15/94. Appetite good. Bowels regular. Behavior quite good, of late. Still subject to "spasms".
" 17 — Does not work any, at present. Habits are clean. Jan 17/94. 3 convulsions reported, last night.
" 26/28 — Jan 26/94. Has had 2 nocturnal convulsions in the past 7 nights; none nights 2; in others 1.
Jan 28/94. Engaged in a fight with another patient (O. Weekstrom) received a slight bruise on
" 31 — the forehead. Was taken to C[4] to sleep. Jan 31/94. Does not change much. Is "cranky"; at
times ugly & quarrelsome: frequently gets into fights with other patients. Habits are clean.
Feb 1/11 — Feb 1/94. Wt 163½ pds. (a gain of 9½ lbs, in last month). Pulse 70. Feb 11/94. Was engaged in a
" 12 — fight with a fellow-patient on the 8th & in another to day. Was taken to C[3]. Feb 12/94. In another
" 23 — fight, today. Feb 23/94. Got quite badly marked up & bruised in a fight with R. Haus to day.
" 28 — Feb 28/94. Conduct & behavior do not change any. Is irritable & quarrelsome quite frequently.
Mar — Mar 2/94. Wt 160 pds. Continues about the same. Fits have not been reported so frequent, of late.
Patient was committed here under the "Law of 1893" recently declared unconstitutional. He
was, today, Taken out & Returned under "new warrant" from Olmsted County —
" 31 — March 31/94. Conduct & behavior do not change any. Fits are not so frequent now. —
Apl 2 — April 2/94. Wt 153½ pds. (Has lost some, though he has not complained of any ill-feeling).
" 5/7 — Pulse 76. April 5/94. Two convulsions reported, last night. April 7/94. Had one convulsion,
" 8/11 — last night. April 8/94. Two convulsions, last night. April 11/94. Complains of not feeling well,
" 12 — remained in bed, this morning. Was pounding at his door, last night, & wanted to get out. The
night-watch opened the door & when out, patient refused to go back to bed & had to be carried
back, by force: was quite noisy for 5 hours, sleeping but 3 hours. April 12/94. Was extremely
noisy for 8 hours, last night, pounding the door & keeping the other patients awake. So ordered

(carried to 304)

Personal and Medical History of Ernest Kiese

HERBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3555.
Residence, Lewiston, Winona Co. Minn
Date Admission, 15th November 1893.
Admitted by, Dr. Phelps Hour, 12 P.M.
How Sent, H.S. Buck, Jof P. Winona County.
Sex, Male
Age, 31
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Shoe-maker
Degree Education, Common School
Profession Religion, Not a Church member
Habits, Intemperate
Nativity, Wisconsin; (Parents born in Russia).
Physicians Committing, J.B. McGaughey & J.A. Pierce
Correspondents, none given in "papers"
Has no family physician.

No. for Year, 125.
Insane Relatives, Mother's brother & sister
Cause Exciting, Epilepsy
Cause Predisposing, Heredity -
Form, Epileptic dementia
Accompanying Bodily Disorder, Epilepsy
Suicidal or Not, Not
Date of this Attack, at 14 years of age
Duration, about 17 years
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 14.
Time of Leaving, June 4. 1897
Time in Hospital, 3 yr. 6 mos. 20 da
Result, Discharged Nov. 3-1897
Improved.

EXAMINATION ON ADMISSION.

Exby Dr Phelps. Nov 29/93. MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events,
Recent Events, Sluggish
Special Subjects,

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

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

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

DELUSIONS:
Systematized ~~or Not~~ of being Chloroformed &c
Special Subjects,
Transitory or Not,

HALLUCINATIONS: None noted; Denies any
ILLUSIONS:

CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:
Mental Condition shows rather symetrical impairment; considerable dullness like the nature of those of Epileptics. Claims he has had a bad cough the past 2 or 3 days. Has had Epileptic fits but only one since he came here, he says. Is greatly troubled with headaches, he says. Fits, he claims are more troublesome when weather changes - "Stormy weather" - Has had them 15 years. "Caused by eating wild plums" -

Personal and Medical History of Ernest Kiese

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ WEIGHT, 146 lbs. NUTRITION, quite good.
WOUNDS OR ABNORMALITIES, Probably none
TONGUE, Tremors, none Coatings, ✓ Promptness Movement, prompt, deviates, tright
PUPILS, Equality, Equal Size, slightly dilated
Response Light, slow Accommodation,
SIGHT, Probably good -
HEARING, Good -
COORDINATION, Arms,

Case No. 3555. Ernest Kiese. Vol. 25.
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, Fairly good. Continued Speech.
SENSIBILITY, ✓
HEART, Sounds good
LUNGS, Sounds good.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living; suffers some from Age - Troubled with headache.
Father or Pat. Relations, Father living "
Brothers or Sisters, Claims family healthy, tho' brothers were somewhat troubled with headaches.

Personal and Medical History of Ernest Kiese

SEBERT, FICLAN & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3555

Residence, Lewiston, Winona Co. Minn

Date Admission, 15th November 1893.

Admitted by, Dr. Phelps Hour, 12 P.M.

How Sent, H.L.S. Buck, Jo P. Winona County

Sex, Male

Age, 31

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Shoe-maker

Degree Education, Common School

Profession Religion, Not a Church Mem

Habits, Intemperate

Nativity, Wisconsin; (Parents born in Prussia).

Physicians Committing, J. B. McGaughey & J. A. Pierce

Correspondents, none given in papers

Has no family physician.

No. for Year, 125

Insane Relatives, Mother's brother & sister

Cause Exciting, Epilepsy

Cause Predisposing, Heredity —

Form, epileptic dementia

Accompanying Bodily Disorder, Epilepsy

Suicidal or Not, Not

Date of this Attack, at 14 years of age

Duration, about 17 years

Result, Improved.

EXAMINATION ON ADMISSION.

Exby Dr. Phelps, Nov 29/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, Somewhat sluggish

MEMORY:

Past Events,

Recent Events, Sluggish

Special Subjects,

PERCEPTIVITY:

Alert or Dull, rather dull

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State, Poor

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Yes

Exalted,

Depressed,

DELUSIONS:

Systematized ~~or Not~~, of being Chloroformed &c

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None noted; denies any

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:

Mental Condition shows rather symetrical impairment considerable dullness like the nature of those of Epileptics. Claims he has had a cough the past 2 or 3 days. Has had Epileptic fits but only one since he came here he says. Is greatly troubled with headaches, he says. Fits, he claims are more troublesome when weather changes — "Stormy weather" — Has had them 16 years. "Caused by eating wild plums" —

Personal and Medical History of Ernest Kiese

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ WEIGHT, 146 pds. NUTRITION, quite good

WOUNDS OR ABNORMALITIES, Probably none

TONGUE, Tremors, none Coatings, ✓ Promptness Movement, prompt; deviates slightly

PUPILS, Equality, Equal Size, Slightly dilated

Response Light, Slow Accommodation, ✓

SIGHT, Probably good —

HEARING, Good —

COORDINATION, Arms, } Fair, by usual tests.
Legs, }

TREMORS, Hands, none marked Tongue, None

Facial Muscles, ✓ General,

REFLEXES, Patellar, Equal — 3 —

Other Reflexes,

ARTICULATION, Hesitating, fair, though slight Stammering in continued speech.

FACIAL EXPRESSION, Fairly good.

SENSIBILITY, ✓

HEART, Sounds good

LUNGS, Sounds good.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother living; suffers some from Age — Troubled with headache.

Father or Pat. Relations, Father living "

Brothers or Sisters, Claims family healthy, tho' brothers were somewhat troubled with headaches

Personal and Medical History of Ernest Kiese

EARLEY, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893

I was brought here by Sheriff Day, with the following history of case. There is no history of Consanguinity; but mothers brother & sister are insane. This is 1st attack; has never been sent to Hospital. First symptoms of this attack manifested at 14 years of age; he became Epileptic and morose. Disease seems increasing; is variable, with rational intervals but these do not occur at regular periods. Now, he is morose, Suspicious, especially of father; thinks charges are being made against him. Is disposed to injure others; but is not suicidal, nor filthy, nor destructive. He was always cross & irritable, even before epilepsy appeared. Is intemperate in use of alcoholic drinks. Epileptic "Seizures", on an average, twice each week. Has been confined in Jail, about 3 weeks. Cause of the disease is Epilepsy. Can give no history of any treatment. On Personal Examination, he was uneasy, morose, evasive & untruthful. He said others were writing in a book about him until late in the night, making charges against him. He tried to prevent father from making statement. Exhibited fears received during epileptic "Seizures". Appearance & manner, sullen, angry. On ascertained he grows more & more morose and quarrelsome as he grows older; this results from Epilepsy.

Nov 15 — Nov 15/93. On patient, on admission, is in fair Physical Condition. Wt as per B'd. Bodily Condition dirty; no injuries or peculiarities noted. Pulse 100. T. @ 99.6. Appetite good. Bowels Seem free. No Cough noticed. Is quietly behaved. Answers questions but is not very communicative. No Complaints or injuries to note. Pm. Pulse 102. T. @ 99.8. Nov 16/93. Was restless & slept but 2 hours last night. Had a number of light convulsions and tried to vomit. AM. Pulse 100. T. 99.8. Appetite good. Has been quiet during the day. Complained of being weak; had no "spells". — " 16 — " 17 — Talks freely when addressed. No delusions noted. Pm. Pulse 106. T. 100. Nov 17/93. Slept somewhat better (6 hours) last night, but was restless & knees sore. AM. " 102 " 99.6. Appetite good. " 18 — Walks quietly about the hall. Talks freely. On no medicine. Pm. Pulse 100. " 99.8. Nov 18/93. Slept 7 hours last night. Had 2 fits. AM. Pulse 98. " 19 — Nov 19/93. AM. " 100 " 99.8. Appetite good. " 20 — Takes bromides. Makes no complaints. Is clean, tidy & of good personal habits. Nov 20/93. AM. Pulse 96. " 21 — Nov 22/93. Has been quiet & restful the past 4 nights, sleeping 7 hours in each. Has continued quiet & well-behaved by day. Appetite good. Causes no trouble in the hall; makes no complaints. " 29 — Pulse still ranges quite high. Nov 29/93. During this, the second week of his stay, patient has continued quiet & restful, at night, sleeping 7 to 8 hours, in each. Has been quiet & well-behaved by day. Neat, clean, tidy & of good personal habits. Talks quite freely. Has attended Chapel service regularly since coming here. Only one convulsion reported during past week; occasionally Complains of some headache & of not feeling well. Works some on ward. Manner indicates considerable dullness and lack of judgment, such as is peculiar to Epilepsy.

Dec 3 — Dec 3/93. Had one convulsion during the night. Conduct & behavior by day, about as usual. Works some on hall. Dec 4/93. Wt 157 pds (a gain of 9 pounds in past 19 days) Pulse 82. Dec 10/93. Had one " 4/10 — Convulsion yesterday; another today. " 15 — Dec 15/93. Appetite good; bowels probably normal. Talks freely; reads some. Makes no complaints. Helps with ward-work. On no medicine. " 17 — Dec 17/93. Had one convulsion today. " 24/30 — Dec 24/93. One convulsion, today. Dec 30/93. Had a convulsion, last night " 31 — Dec 31/93. Apparently rests & sleeps well, at night. Appetite good; bowels regular. Talks quite freely. Reads some. Does not participate in any games &c. Works some on ward; & makes no

Personal and Medical History of Ernest Kiese

1893

Cause

Dec 31 — complaints. Is on medicine. Habits are clean & neat. —

1894

Jan 7/11 — Jan 7/94. Wt 159 pds. Pulse 80. Jan 11/94. Had one Convulsion during last night.

" 15 — Jan 15/94. No material Change in patients' condition. Works quite well at ward. Habits clean.

" 31 — Jan 31/94. Had one convulsion during the morning. Appetite good. Behaves well; makes no Complaints. Reads some. Works well and willingly at the ward. Habits are clean.

Feb 5 — Feb 1/94. Wt 158 pds. Pulse 74. Feb 5/94. Had a convulsion (about 8.30) at the entertainment, this evening. Feb 10/94. One convulsion during the day. Feb 11/94. One convulsion to day, also. —

" 10/14 — " 15/19 — Feb 15/94. Had a convulsion, during the night. Feb 19/94. Had a fight with a fellow-patient (A. McDonald) today. Feb 28/94. Behavior is generally good. Works some on ward. On no medicines.

" 28 — March 1/94. Wt 157 pds. Pulse 80. Is in good physical health. Somewhat "cranky", at times.

March — March 12/94. Patient was committed here under the "Law of 1893" recently declared unconstitutional. He was, today, Taken Out and Returned under "new Warrant" from Chester County.

" 13/19 — March 13/94. One convulsion reported today. April 19/94. Was helping at outside work, today.

" 24/31 — March 24/94. Had one convulsion yesterday & another, today. Mar 31/94. Behavior is good. Appetite also good. Seems contented here; makes no complaints. Works willingly, when asked.

April 2/9 — April 2/94. Wt 155 pds. Pulse 96. — April 9/94. Had a Convulsion during the day; fell on to

" 14/21 — the floor and cut his lip. April 14/94. Had a convulsion this evening (8 P.M.). April 21/94. Had

" 26 — a Convulsion last evening & one this morning. April 26/94. Worked with painters ½ of today. —

" 30 — April 30/94. Is well-behaved. Talks quite freely; makes no complaints. Works. On no medicine.

May 5/31 — May 5/94. Wt 157½ pds. Pulse 78. May 31/94. The following Convulsions are reported as occurring during day; 1 on 2nd; 1 on 6th; 1 on 11th; 2 on 18th; 1 on 19th when he fell & bruised his face; 1 on 31st — Out whole, does not seem to change any from month to month. Read; works some. Habits cleanly.

June 2/30 — June 2/94. Wt 147 pds. Pulse 80. June 5/94. 1 Convulsion, today. June 16/94. One convulsion, last night.

" 19/21 — June 19/94. One Convulsion, today. June 21/94. Has commenced work with Norman delivering washing &c.

" 30 — June 30/94. Mind Continues somewhat dulled — He works daily with laundryman; Health quite good; is on medicine.

July 5/26 — July 5/94. Wt. 148 pds; One convulsion occured, last night. July 5/94. He had one Convulsion, today.

" 20/31 — July 20/94. One convulsion on night of 9th & one on night of 18th — July 31/94. No special Change. Works at laundry.

Aug 5/28 — Aug 1/94. Wt 145½ pds; Pulse 104 — Aug 10/94. Had a Convulsion at 8.30 Am. Aug 28/94. A Convulsion

" 31 — at 9 Pm. Aug 31/94. Had 2 convulsions today; one at 8 am. & another at 3 Pm. He behaves well. Appetite good — Bowels apparently regular — Works well & intelligently in the Laundry.

Sep 1/9 — Sep 1/94. Wt 141 pds. Pulse 92. Sep 16/94. Had a Convulsion at 9.30 Am. Sep 23/94. A Convulsion at 8.45 Pm.

" 30 — Sep 30/94. Two convulsions noted, today. He is a very quiet & orderly patient. Works every day in laundry. On no medicine — appetite is good; bowels regular. Patient in good health, for one of his class.

Oct 1/3 — Oct 1/94. Pulse 68. Oct 3/94. 6 convulsions reported as occurring during the day, since, this Month. Conduct & behavior, about as usual. Makes no complaints. Works daily with Laundryman —

Nov 5/30 — Nov 1/94. Wt 142 pds. Pulse 76. Nov 5/94. Had a convulsion today; fell & cut his head; same dressed —

" 30 — Nov 30/94. 3 (by day) Convulsions reported for the month. Appetite good; bowels regular. He is on medicine —

Dec 3 — Behaves well. Works outside about the laundry, carrying clothes &c. Dec 3/94. Keeps in good flesh

" 31 — & physical condition. Dec 31/94. 3 convulsions, occurred by day, during month. Still works at laundry.

Jan 95 — Jan 1/95. Wt 143 pds. P 76. Jan 15/95. Has trouble with a fellow-patient (Wm Thompson). Jany 30/95. Had

30 — a fit out-doors, today: complained of being sick at stomach. Behaves generally well. Works out. Fit about once a week.

Personal and Medical History of Norman McDonald

SEBERT, PICLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3557.
Residence, Municapolis.
Date Admission, 17th November 1893.
Admitted by, Dr Kilbourne Hour, 7 PM.
How Sent, John A. Steele, Jof P. Hennepin County
Sex, Male.
Age, 47 years
Civil Condition, widowed
Children, none
Age Youngest Child, —
Occupation, Laborer
Degree Education, limited to reading & writing
Profession Religion, not a church member
Habits, not intemperate
Nativity, Ohio (father's U.S. ; mother's not known)
Physicians Committing, J.H.W.cDonald & H. A. Hall.
Correspondents, Cannot ascertain relatives



No. for Year, 127.
Insane Relatives, None
Cause Exciting, not known
Cause Predisposing, possibly Epilepsy
Form, dementia
Accompanying Bodily Disorder, Had Epilepsy in Childhood
Suicidal or Not, not
Date of this Attack, 6 years ago
Duration, 6 years —
No. of Attack, 1st (so far as known)
No. of Admissions, 1st
Age First Attack, about 41
Time of Leaving, June 29. 1897
Time in Hospital, 3 yr. 7 mo. 12 da
Result, Transfered to Fergus Falls

JC. PM

EXAMINATION ON ADMISSION.

Evely P. Phelps, Nov 29/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Erratic
Quick or Sluggish, Quick
MEMORY:
Past Events,
Recent Events, Somewhat impaired
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive, Incorrect
REASONING POWER:
Ordinary Subjects,
Own Mental State, Poor.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Has drunk some & thinks this probably some of the cause of this attack. Does not remember getting excited &c before being brought here.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Yes
Exalted,
Depressed,
DELUSIONS: None brought out in Conversation.
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: ✓
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Answers questions quite freely.

Personal and Medical History of Norman McDonald

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 4½ WEIGHT, 146 lbs. NUTRITION, Seems good.
WOUNDS OR ABNORMALITIES, right ankle lame since Newark army
TONGUE, Tremors, none noticed Coatings, Normal Promptness Movement, prompt; curves to left
PUPILS, Equality, Equal Size, about normal
Response Light, yes Accommodation, ✓
SIGHT, probably good
HEARING, Seems normal
COORDINATION, Arms, } Fairly good, by usual tests
Legs, }
TREMORS, Hands Tongue. none noticed

Case No. 3557. Norman McDonald. Vol. 25.

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, beats rapidly, at present
LUNGS, Sounds are good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good, Records kept	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 100	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living, when he last heard } No history of
Father or Pat. Relations, Father died sometime ago. Was not very strong. } hereditary taint.
Brothers or Sisters,

Personal and Medical History of Norman McDonald

EBBERT, PICLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3557.
Residence, Minneapolis
Date Admission, 17th November 1893.
Admitted by, Kilbourne Hour, 7 PM
How Sent, John A. Steele, Jail Hennepin County
Sex, Male
Age, 47 years
Civil Condition, widowed
Children, none
Age Youngest Child, —
Occupation, Laborer
Degree Education, limited to reading & writing
Profession Religion, not a church member
Habits, not intemperate
Nativity, Ohio (father's U.S.; mother's not known)
Physicians Committing, J. W. McDonald & W. A. Hall.
Correspondents, Cannot ascertain relatives

No. for Year, 127.
Insane Relatives, None
Cause Exciting, not known
Cause Predisposing, possibly Epilepsy
Form, dementia
Accompanying Bodily Disorder, Had Epilepsy in childhood
Suicidal or Not, not
Date of this Attack, 6 years ago
Duration, 6 years —
Date of Attack, 1st (so far as known)
Result, [illegible]



EXAMINATION ON ADMISSION.

Evelyn D. Phelps, Nov 29/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Erratic
Quick or Sluggish, Quick
MEMORY:
Past Events, } somewhat impaired
Recent Events, }
Special Subjects, }
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive, Incorrect
REASONING POWER:
Ordinary Subjects, } Poor.
Own Mental State, }
Special Subjects, }
GENERAL DESCRIPTIVE REMARKS:
Has drunk some & thinks this probably one of the causes of this attack. Does not remember getting excited &c before being brought here.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Yes
Exalted,
Depressed,
DELUSIONS: None brought out, in Conversation
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: ✓
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Answers questions quite freely.

Personal and Medical History of Norman McDonald

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7½ WEIGHT, 146 lbs. NUTRITION, Seems good.
WOUNDS OR ABNORMALITIES, right ankle lame, since he was in army
TONGUE, Tremors, none noticed Coatings, Normal Promptness Movement, prompt; curves to left
PUPILS, Equality, Equal Size, about normal
Response Light, yes Accommodation, ✓
SIGHT, probably good
HEARING, Seems normal
COORDINATION, Arms, } Fairly good, by usual tests
Legs, }
TREMORS, Hands, Tongue, none noticed
Facial Muscles, General,
REFLEXES, Patellar, equal — about 9 — Dr. Pt's Scale.
Other Reflexes,
ARTICULATION, Hesitating, ✓ Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, beats rapidly, at present
LUNGS, Sounds are good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good, Records kept	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 100	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") } No history of heredity insanity.
Mother or Mat. Relations, Mother living, when he last heard
Father or Pat. Relations, Father died sometime ago. Was not very strong.
Brothers or Sisters,

Personal and Medical History of Norman Mc Donald

ROBERT, FISHER & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriff H. S. Uhlir, with the following history. As to consanguinity, don't know. No insane relations. This is 1st attack so far as known. Has not been in hospital before. First symptoms of this attack were manifested 6 years ago, by periods of excitement. Disease seems stationary. At times, he has apparent rational intervals, and then has periods of excitement. Derangement is now shown by excitement; singing and talking incoherently. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. There is no history of intemperance. He had Epilepsy in childhood. Has been sent to the Workhouse for vagrancy, on several occasions. Cause of the disease is not known. He has had no medical treatment. On personal examination, he has confused ideas; is unable to recollect his whereabouts for the past few days. Says he has been misrepresented by others & does not know why he has been singing on the streets. His conduct is quiet, at the present time. Appearance & manner confused; mutters to himself. From others, we learn that he has been in the habit of walking excitedly for hours, at a time; talking to himself and tearing up pieces of paper, wanting others to strike him &c.

Nov 17 — Nov 17/93. On admission, was pulse on B3d. Pulse 100. T(o) 100°. Bodily condition dirty; no injuries or peculiarities noted. Nov 18/93. Slept 8 hours last night & was quiet. AM. Pulse 96. To) 99.8. Appetite is medium; bowels seem regular. Is restless today; walks about hall; talks but very little. PM. Pulse 100.

" 19 — T(o) 100. No complaints or injuries to note. Nov 19/93. Rested & slept well (7 hours) last night; was quiet. AM. Pulse 94. T(o) 100. Appetite medium; still very reticent; PM. Pulse 98. T(o) 100.6. Has been extremely restless today; walking the floor a good deal of the time.

" 20 — Nov 20/93. Was restless & slept but 5 hours, last night. AM. Pulse 90. T(o) 99.6. Restless; talking a good deal to himself. Complains of a heavy feeling in his stomach. PM. Pulse 92. T(o) 99.8.

" 21 — Nov 21/93. Again, passed a poor night, last night. AM. Pulse 90. Had a pain in stomach during night; was given medicine. Still restless, by day.

" 22 — Nov 22/93. Restless for 3 hours, sleeping but 5 hours, last night. AM. Pulse 88. Restless today; talking & singing, at times; walks & shakes head; seems mildly demented.

" 23 — Nov 23/93. Was very restless, last night; and slept only 5 hours. AM. Pulse 88. Is very restless today; walking the hall, nearly all the time; talking to himself & singing.

" 24 — Nov 24/93. Slept 6 hours; restless 2 hours or so, last night. Conduct & behavior, by day, do not change any. Pulse 86. — Shows delusions. — —

Dec 1 — Dec 1/93. During this, the second week of his stay, patient has not seemed to change much, if any. Rest & sleep at night have continued very poor (3 to 5 hours each night); he has been quite restless, every night, and noisy about every other night. Appetite has now become good. Pulse, the past week, about normal. By day, continues restless; walks the hall a great deal of the time, singing and talking to self. Talks fairly freely, at times, with his fellow-patients. Read some. Is deluded.

" 4 — Occasionally complains of pain in stomach. Personal habits are good. Dec 4/93. Wt 157 pds (a gain of 11 pounds, since coming). Pulse 90. Dec 17/93. For the past 8 nights, has been, nightly restless & noisy, for from 4 to 5 hours, sleeping only 4 or 5 hours at each.

" 19 — Dec 19/93. Very noisy at each of past 2 nights, sleeping only from 3 to 4 hours, at each.

" 26 — Dec 26/93. Noisy for 6 hours at each of past 2 nights, sleeping only about 2 hours at each.

" 31 — Is also restless by day, walking the hall a good deal of the time, talking to himself and laughing. Dec 31/93. Very noisy for 4 hours, sleeping but 2 hours, last night. Appetite is only medium. Continues very restless & noisy, at times, by day; walking the hall a good deal. Talks to himself & laughs. Answers questions seemingly correct. Works some.

1894
Jan 2/31 — Jan 1/94. Wt 155 pds. Pulse 80. Jan 31/94. During most of the nights this month, patient has

Personal and Medical History of Norman Mc Donald

1894 Cont'd

Jan 31 — been restless and noisy from 4 to 6 hours each night & has slept very poorly the balance of night. Appetite is good. By day, is restless, walking about hall, talking & swearing. Shows delusions. Makes no complaints. Works some on the ward. —

Feb 1/9 — Feb 1/94. Wt 152½ pds. Pulse 88. Feb 9/94. Noisy 6 hours, last night, sleeping but 2 hours. —

" 11/18 — Feb 11/94. Restless, today; walking the hall & swearing. Feb 18/94. Has been noisy all night, as also of the past 2 nights and has slept none at all.

" 19 — Feb 19/94. Had some trouble with a fellow-patient (Ed. Klein) today.

" 23 — Feb 23/94. Noisy four hours at each of last 3 night, sleeping but 4 hours at each. Is restless & excited, at times. Walks the floor a good deal. Talks & laughs to himself; occasionally sings; makes no complaints. Physical condition good. Works some.

" 24 — Feb 24/94. This patient was committed here under the "Law of 1893" recently declared illegal. He was, today, Taken out and Returned under "New Warrant" from Olmsted County. —

" 28 — Feby 28/94. No change from Feby 23rd note (above). — " —

Mar 2/14 — March 2/94. Wt 151 pds. Pulse 90. March 14/94. Restless, today; walking the hall; talking & swearing.

" 31 — March 31/94. About almost every other night, patient is noisy, 4 or 5 hours, sleeping only 3 or 4 hours, at each. Conduct & behavior, by day, do not improve any; restless; paces the floor; talks loudly; laughs a good deal; uses very obscene language. Helps some with the ward-work. —

Apr 1/7 — April 1/94. Restless & noisy nearly all last night; slept only 1 hour. April 2/94. Wt 148 pds. Pulse 86.

" 5/28 — April 5/94. Slept 2 hours; restless & noisy about 5 hours. April 28/94. Has been restless & noisy, for about 5 hours at each of past few nights and has slept very poorly.

" 30 — April 30/94. Does not improve any.

May 1/8 — May 1/94. Wt 146½ pds. Pulse 86. May 18/94. During past 10 nights, patient has been noisy, the greater part of each & sleeping only from 1 to 3 or 4 hours: one night, none at all; was noisy all night.

" 31 — May 31/94. Appetite good; bowels free; quite often, restless & excited by day; walking the hall, swearing and talking loudly. Works some on the ward. Health is good. — Habits are cleanly. —

June 2/7 — June 2/94. Wt 145 pds. Pulse 84. — June 7/94. Engaged in a fight with fellow patient (Herling) today. —

" 30 — June 30/94. No noticeable change; patient does not seem to improve in any respect. Makes no complaints.

July 2/11 — July 2/94. Wt 141 pds. Pulse about normal. July 11/94. Fainted away at breakfast table, today.

" 31 — July 31/94. Does not make any noticeable improvement. Is restless, noisy, swearing frequently. Talks to himself.

Aug 2 — Aug 2/94. Wt 134 pds. Pulse 90. Patient has been losing in flesh, the past few months. Does not complain of any nervous ill-feeling. Aug 10/94. Noisy, singing restless; walking the hall, all day.

" 15/31 — Aug 15/94. Very noisy, all day. Aug 16/94. Transferred to B3. — Aug 31/94. Has been, almost nightly, noisy & restless, for about 5 hours; has slept poorly. Conduct & behavior (not change) any. Works some.

Sep 3/28 — Sep 3/94. Wt 137 pds. Pulse 78. Sep 30/94. During the latter part of this month, patient has been very restless & noisy for 5 to 8 hours nightly; has slept very poorly. Nervous; about the same.

Oct 1/31 — Oct 1/94. Wt 138½ pds. Pulse 70. — Oct 31/94. On 11 nights, during this month, he is reported as noisy & restless, 5 to 6 hours, nightly. Physical condition improving: Mentally, no change —

Nov 1 — Nov 1/94. Wt 142 pds. Pulse 91. Dec 1/94. Wt 144 pds. Pulse 84. — Jan 2/95. Wt 144 pds. Pulse 86.

Dec 1 1895 Jan 31 — Jan 31/95. Appetite good; bowels regular. Is frequently noisy & restless, the greater part of each night. Also, noisy & restless, by day; always walking about in ward; talking to himself & becoming very excited; & if requested to keep quiet, says "It is not him making the noise, but someone else". Habits clean. Works in ward.

— Carried to Transfer Book "A" page 172. —

Personal and Medical History of William Sweytzer

HERBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3558.
Residence, 320 Hennepin Ave. Mpls.
Date Admission, 20th November 1893.
Admitted by, Dr Kiefferune Hour, 1 PM
How Sent, John H. Steele, Jof P, Hennepin County.
Sex, Male
Age, 30 (about)
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Carpenter
Degree Education, Common School
Profession Religion, not a Church member
Habits, not known
Nativity, England (Parents also born there).
Physicians Committing, Chas E. Rogers & E.S. Nark.
Correspondents, (Friend) E.R. Foster, 220 Hennepin Ave Mpls.

No. for Year, 128.
Insane Relatives, Cannot be learned
Cause Exciting, not known
Cause Predisposing, not known
Form, chronic mania
Accompanying Bodily Disorder, none given in history
Suicidal or Not, Said "he intended to kill himself".
Date of this Attack, Few weeks back, Saturday last
Duration, A few weeks
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 30
Time of Leaving, June 29. 1897
Time in Hospital, 3 yr. 7 mo. 9 da
Result, Transferred to Fergus Falls

EXAMINATION ON ADMISSION.

Exd by Dr Phelps Nov 27/93.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, } not very good
Recent Events, }
Special Subjects, }

PERCEPTIVITY:
Alert or Dull, } somewhat impaired
Correct or Illusive, }

REASONING POWER:
Ordinary Subjects, Poor
Own Mental State, "Does not think anything wrong with him"
Special Subjects,

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

DELUSIONS:
Systematized or Not, "made sick by tobacco, paint &c"
Special Subjects,
Transitory or Not,

HALLUCINATIONS: —

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, } Quite vague & evasive, tho'
Voluble or Reticent, } not incoherent.

GENERAL DESCRIPTIVE REMARKS:
Says he was hit on the head, with a fork, when very young; was laid up for a while, but got over it; Denies acting wildly, while at jail; Denies ever having Syphilis; Denies any attempt at suicide. After considerable questioning, admits being sick, caused, he thinks, by smoking, & being sick onward, caused by paint inflow; according to history, was wild & hysterical in behavior (denies this). Present mental state is evidently not much impaired, in a careless, unsymetrical way & he has many vague & erroneous ideas.

Personal and Medical History of William Sweytzer

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in WEIGHT, 153 lbs. NUTRITION, Good
WOUNDS OR ABNORMALITIES, none noted.
TONGUE, Tremors, Steady Coatings, none Special Promptness Movement, Quite prompt
PUPILS, Equality, equal Size, a little above normal
Response Light, fairly well Accommodation,
SIGHT, Seems good
HEARING, Normal
COORDINATION, Arms, Finger Nose, eyes shut, Some inaccuracy.
Legs, Standing foot fairly good. Standing, Eyes shut, Sways Some.
TREMORS, Hands, Very slight Tongue, Steady

Case No. 3558. William Sweytzer. Vol. 25.

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, Palpitating
LUNGS, Sounds are good
EXAM. URINE.

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

Record Kept

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, an uncle Insane
Father or Pat. Relations, Father, he thinks, is living; "always taking medicine"
Brothers or Sisters,

Personal and Medical History of William Sweytzer

GIBERT, FIZLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3558.

Residence, 320 Hennepin Ave. Mpls.

Date Admission, 20th November 1893.

Admitted by, D. Kilbourne Hour, 7 PM.

How Sent, John A. Steele, Jof P, Hennepin County

Sex, Male

Age, 30 (about)

Civil Condition, single

Children, —

Age Youngest Child, —

Occupation, Carpenter

Degree Education, Common School

Profession Religion, not a Church member

Habits, not known

Nativity, England (Parents also born there)

Physicians Committing, Chas. E. Rogers & E.S.

Correspondents, (friend) E.R. Foster, 220 Hennepin

No. for Year, 128.

Insane Relatives, cannot be learned

Cause Exciting, not known

Cause Predisposing, not known

Form, chronic mania

Accompanying Bodily Disorder, none given in history

Suicidal or Not, Said "he intended to kill himself."

Date of this Attack, Few weeks back, Saturday last

Duration, A few weeks

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 30

Time of Leaving, June 29. 1897

Time in Hospital, 3 m 4

Exd by D. Phelps Nov 27/93.

EXAMINATIO... MENTAL

MENTAL ACTIVITY:

Clear or Confused, slightly Confused

Quick or Sluggish, Fairly Quick

MEMORY:

Past Events, }
Recent Events, } not very good
Special Subjects, }

PERCEPTIVITY:

Alert or Dull, }
Correct or Illusive, } somewhat impaired

REASONING POWER:

Ordinary Subjects, Poor

Own Mental State, "Does not think anything wrong with him"

Special Subjects,

EMOTIONAL STATE:

Normal, Calm, Normal

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, "made sick by tobacco, paint etc"

Special Subjects,

Transitory or Not,

HALLUCINATIONS: —

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, } Quite vague & evasive, tho'
Voluble or Reticent, } not incoherent.

GENERAL DESCRIPTIVE REMARKS:

Says he was hit at the head, with a fork, when very young; was laid up for a while, but got over it; Denies acting wildly, while at Jail; Denies ever having Syphilis; denies any attempt at suicide. After considerable questioning, admits being sick, caused, he thinks, by smoking, & being sick inward, caused by paint in floor; according to history, was wild & hysterical in behavior (denies this). Present mental state is evidently not much impaired, in a careless & symetrical way & he has many vague & erroneous ideas.

Personal and Medical History of William Sweytzer

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in WEIGHT, 153 lbs. NUTRITION, Good

WOUNDS OR ABNORMALITIES, none noted.

TONGUE, Tremors, steady Coatings, none special Promptness Movement, quite prompt

PUPILS, Equality, equal Size, a little above normal

Response Light, fairly well Accommodation,

SIGHT, seems good

HEARING, normal

COORDINATION, Arms, finger to nose, eyes shut, some inaccuracy.

Legs, Standing foot fairly good. Standing, Eyes shut, sways some.

TREMORS, Hands, very slight Tongue, steady

Facial Muscles, seem good General,

REFLEXES, Patellar, equal; about 1 or 2.

Other Reflexes,

ARTICULATION, Hesitating, fair Slurred,

FACIAL EXPRESSION, slightly impaired

SENSIBILITY,

HEART, Palpitating

LUNGS, sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Record kept 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, an uncle Insane

Father or Pat. Relations, Father, he things, is living; "always taking medicine"

Brothers or Sisters,

Personal and Medical History of William Sweytzer

LOBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy-Sheriff A.E. Uhlir, with the following history. As to consanguinity or heredity, unknown. This is 1st attack, symptoms appearing a few weeks back, Saturday last. Symptoms severe. Disease seems increasing. He is reticent and it is hard to get anything out of him. Is a "Union-Labor man". Lost $200 last winter; has worried & talked a good deal about it. Has said "he intended to kill himself". If propensity now active, cannot say. Is not filthy or destructive. Previously, showed a reticient disposition. No history of intemperance nor of any severe disease &c. Cause of the disease is not known. He has had no medical treatment. — On personal examination, was found in cell, at jail, yelling &c. He would not enter into conversation; could get nothing from him. Is raving, at present. Appearance & manner, those of an insane person. E.R. Foster and J.E. Trexler affirm above report; both his friends & Trexler is his Land-lord.

Nov 20/93. On admission, was put on B³. Nov 21/93. Was restless & noisy 8 hours last night & slept but 1 hour. Caused the night-nurse a good deal of trouble. Was this morning, moved to C³. Is wild, boisterous, and noisy, now; striking, biting and kicking, and has to be held. Appetite fair; bowels have moved. Has some cough & raises phlegm. Pulse 120. Has "spells" of yelling & singing; when quiet, talked quite rationally. Nov 22/93. No complaints or injuries to note. Nov 23/93. Was noisy all last night; slept none. AM. Pulse 64. Appetite good. Bowels seem regular. Coughs a little, still. Has been very quiet and obedient all day. Talks very little. Shows delusions. Says "he has not slept for 20 years". Nov 23/93. Was noisy & restless for 4 hours, but slept 5 hours, last night. AM. Pulse 78. Appetite very good. Bowels seem normal. Talks but little; only when questioned. Is quietly behaved, though somewhat restless, walking the floor a good deal. Is on medicine. Nov 24/93. Slept 7 hours, last night; was not noisy. AM. Pulse 78. Became excited today & engaged in a fight with another patient. Takes medicine regularly. — Nov 25/93. Rested fairly well, sleeping 7 hours, last night. AM. Pulse 68. Still somewhat inclined to be restless; walking the hall quite often. Does not talk unless spoken to. Behavior seems slightly improved. Goes out walking with the rest. Nov 26/93. Slept 7 hours, last night. AM. Pulse 64. Appetite good; bowels regular. Is quietly behaved, though somewhat restless & walking the floor. Is fairly rational. Hesitates some in answering questions. Is still on medicine. Nov 27/93. Was noisy & restless for 3 hours, but slept 5 hours, last night. AM. Pulse 64. Conduct and behavior about as above described, by day. — Dec 4/93. For first few nights of past week has been quite restless & noisy, for from 3 to 4 hours, sleeping only from 4 to 5 hours, each night; the past 2 nights, however, though still somewhat restless, he has been sleeping somewhat better (6 hours each night). Is quietly behaved, by day. Still somewhat restless, walking the floor a good deal. Appetite has continued good; bowels regular; pulse is still somewhat above normal. Talks but little; hesitates in replies to questions. Reads; plays games; goes out walking with the rest. Is of good personal habits. Is on medicine. Wt today, 158½ pds. (a slight gain). Pulse 80. Dec 8/93. For the past 5 days has been acting in a curious manner, looking at the walls & peeking through a paper tube. Is quietly behaved. Dec 21/93. Abscess forming on his right cheek. — Dec 25/93. Abscess much reduced. Now refuses his medicine. Dec 28/93. Abscess has disappeared. Dec 31/93. Appetite very good, though he complains sometimes of a sour stomach. Behavior very good. Talks fairly rationally, most of the time; is always ready for argument. Shows a few delusions. Seems to be much better, mentally. Has not been in seclusion this month. Physical condition seems good.

Personal and Medical History of William Sweytzer

1894

Jan 2/94 Jan 2/94. Wt 159 pds. Pulse 90. Jan 4/94. Has a "noisy spell" today. Is very incoherent. Has illusions. What appears to be a small abscess is appearing on neck. Jan 6/94. Ate no breakfast; complains of being sick. Ate nothing all day; does not complain much. Jan 7/94. Commenced eating again, at noon, today. Jan 8/94. Was noisy for 6 hours, last night. Ate only one meal, during the day. Jan 10/94. Appetite is improving. Jan 20/94. Has a small abscess on neck. Jan 31/94. Appetite, now, very good; bowels regular. Is, generally, contrary & stubborn. Will fight savagely; bite and kick and "snarl like a dog". Habits are neat. No improvement in condition noticed.

Feb 1/94 Feb 1/94. Wt 156 pds. Pulse 80. Feb 22/94. Conduct & behavior about as lastly above described. Still shows delusions; will say "he has gone 5 years without sleep; 20 years without eating &c"; Also has illusions. "Will recognize men on the ward, whom he used to know in Minneapolis, and Montana". No improvement noticed in patients condition. —

" 24 Feb 24/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. He was, today, Taken out and Returned under "new Warrant" from Olmsted County. Put back on C³. — Feb 25/94. No change to report. —

Mar 1/94 March 1/94. Wt 157 pds. Pulse 84. March 31/94. Appetite good; bowels regular. Is quietly behaved, a good part of the time. Has a few "obstreperous spells" & becomes very excited & noisy. Has illusions and delusions. Habits are neat and clean; physical condition good; otherwise, no improvement observed.

Apl 1/94 April 1/94. Wt 157 pds. Pulse 116. April 3/94. A new patient (Foresback) was placed in the same room with this patient, last night; this morning on opening the door of the room, Foresback was found to be mutilated in a horrible manner, (his testicles being torn out). Sweytzer states that Foresback made several attempts to commit a "crime against nature" upon him and that he tore out the testicles with his teeth. April 5/94. Very excited today; running about ward; trying doors; "wants to get out". April 9/94. Is more quiet today. April 10/94. Has been noisy & excited after going to bed, last night. April 11/94. Is very noisy and incoherent today. —

" 25/30 April 26/94. Vaccinated today. April 30/94. Appetite very good; bowels regular. No improvement in patients condition can be noted. Talks only when spoken to; sometimes rationally. He has many delusions. Habits continue neat & clean. — . — . —

May 1/95 May 1/94. Wt 157 pds. Pulse 84. May 15/94. Had "noisy spell" during evening of 14th also today. Was inclined to be ugly. May 23/94. Was noisy & unruly while out walking. Want to go his own way & calling the others "to follow him to freedom". May 24/94. Is over "noisy spell"; is now quiet.

" 31 May 31/94. With above recently noted exceptions, patient has been fairly quiet & well behaved this month. Still is liable to get noisy & unruly if crossed in his purposes. Talks now except when spoken to or he is excited. Habits are neat & clean. Yet there is no special improvement to note. —

June 1/95 June 1/94. Wt 161 pds. Pulse 68. June 30/94. Nothing special to note, except some improvement in behavior.

July 1/95 July 1/94. Wt 165 " " " 31/94. Had 2 noisy excited "spells"; one on 15th & other on 21st. — Behavior has been quiet, most of the month: but he is still inclined to be easily excited & irritated. Sometimes, talks quite rationally, but is not very communicative. Still manifests delusions. Habits neat.

Aug 1/95 Aug 1/94. Wt 163 pds. Pulse 68. Aug 20/94. Is noisy & excited, today. Aug 31/94. No improvement, mentally. Is generally quietly behaved but is subject to "noisy spells". Irritable, easily excited. When excited, his talk is very incoherent. Still manifest delusions. Habits neat.

(Carried to 388)

Personal and Medical History of Peter Joseph Schaps

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3560.

Residence, Albany, Stearns Co. Minn

Date Admission, 21st November 1893.

Admitted by, Dr Kilbourne Hour, 7 PM.

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

Sex, Male

Age, about 45

Civil Condition, not given

Children, —

Age Youngest Child, —

Occupation, Miller

Degree Education, Common school

Profession Religion, Roman Catholic

Habits, not stated

Nativity, Germany (parents also born there).

Physicians Committing, Jas A Gravel & G. J. O'Leary.

Correspondents, Theresia Schaps
Albany Minn

No. for Year, 130.

Insane Relatives, not stated

Cause Exciting, not stated

Cause Predisposing, previous attack.

Form, acute mania (recurrent)

Accompanying Bodily Disorder, none mentioned in history

Suicidal or Not, not stated

Date of this Attack, 4 Days ago

Duration, about 4 days.

No. of Attack, Not 1st (was in St. Peter Hospital).

No. of Admissions, 1st here

Age First Attack, not stated

Time of Leaving, Feb. 22. 94

Time in Hospital, 3 mos 1d

Result, Imp.

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EXAMINATION ON ADMISSION.

Early Dr. Ely & Herzog Dec 7/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, } Good
Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

see attached Slip ⊕

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Somewhat exalted.

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, voluble

Personal and Medical History of Peter Joseph Schaps

EXAMINATION ON ADMISSION. (Continued.)

⊕

NUTRITION, Good.

Peculiarities of Movement, prompt

Response Light,

SIGHT,

HEARING,

COORDINATION,

TREMORS, Hands,

Facial,

REFLEXES, Patellars,

Other Reflexes,

ARTICULATION, Hesitancy,

FACIAL EXPRESSION,

MOBILITY,

GAIT, normal

normal

OPHTHALMOSCOPIC EXAM.,

Dirty, Clean, Careless,

Normal, Constipated, Irregular,

Good, Medium, Poor,

Good, Poor, Irregular,

RESP., TEMP.,

MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Thirteen 14 Days before admission ONSET GRADUAL OR SUDDEN, Sudden

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

Mother or Mat. Relations, Mother Insane, puerperal (?) or Confusional

Father or Pat. Relations, no history of heredity

Brothers or Sisters, " "

Personal and Medical History of Peter Joseph Schaps

EMERY, PICKLE & CHAMBERS, DAVENPORT, IOWA

Whole No. 3560.

Residence

Date Adm

Admitted

How Sent,

Sex,

Age,

Civil Cond

Children,

Age Young

Occupation,

Degree Edu

Profession F

Habits,

Nativity,

Physicians C

Corresponde

Eddy Dr Ed

MENTAL AC

Clear or Co

Quick or Sl

MEMORY :

Past Events

Recent Ever

Special Subj

PERCEPTIVI

Alert or Dull

Correct or Ill

REASONING

Ordinary Sub

Own Mental S

Special Subje

GENERAL DE

see attache

(4) He tells the story of his going to St Peter Hospital & of recovering quickly from that attack; of his having trouble about his Mill property the purchasing of machinery &c &c which seems to be the reason of this present attack. Says he was not violent when brought here (story does not seem to be very connected but may be due to his German) - Charges forgery of papers &c. Says he was not discharged, as cured, from St. Peter but was released under bonds - As he was made out as "discharged cured" he became responsible for certain papers which he signed & which responsibility he denies & evade - States "that he is all right now" - Charges persecution in money matters - Says "he was threatened with incarceration in an Asylum which he gives as cause for present attack.

He mentions an attack of "acute Mania" in 1872-3 Confined in St Peter 6 or 7 months; violent 6 weeks - exciting cause overheated while fighting fire; predisposing cause trouble & loss of relatives & years previous by burning of ocean Steamer.

2nd attack, May 11th 1888 — April 2d 1889 - St. Peter - Cause given, exposure -

3d attack, April 5 to June 23/91. - Says "was not insane" St. Peter - 4th attack, this present one -

Personal and Medical History of Peter Joseph Schaps

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in. WEIGHT, 150 lbs. NUTRITION, Good.

WOUNDS OR ABNORMALITIES, Last Joint R forefinger missing. Abnormalities none.

TONGUE, Tremors, None Coatings, Light Promptness Movement, Prompt

PUPILS, Equality, Equal Size, normal

Response Light, Good Accommodation, Good

SIGHT, (Ophthalmus) somewhat impaired by age.

HEARING, Good

COORDINATION, Arms, Good

Legs, Good by usual tests

TREMORS, Hands, none Tongue, Slight

Facial Muscles, None General, None

REFLEXES, Patellar, Equal — 3 — 4 —

Other Reflexes,

ARTICULATION, Hesitating, Slurred, Foreign Accent

FACIAL EXPRESSION, Bright

SENSIBILITY, normal

HEART, normal

LUNGS, normal

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

Records kept

HISTORICAL.

LENGTH OF INVASION, This time 4 Days before admission ONSET GRADUAL OR SUDDEN, Sudden

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

Mother or Mat. Relations, Mother Insane, Puerperal (?) or Confinement

Father or Pat. Relations, no history of hereditz

Brothers or Sisters, " "

Personal and Medical History of Peter Joseph Schaps

ROBERT, FULLER & DOUGHERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriff C. C. Haas, attended by Henry Chapel, with the following history. This is rather meagre, in some respects. As to consanguinity, unknown; as to heredity, not stated. As to any history of intemperance, severe disease or injury to head; supposed cause of the disease, if any, medical treatment given, nothing is stated. This is not 1st attack; he has been confined in St Peter Asylum; when, is not mentioned, nor for how long. First symptoms of this attack were manifested four days ago; complaint made by Hotel, where he was stopping. Is violent now. Disease seems increasing; not variable; nor rational intervals. Derangement is now shown by his being sullen, violent; wants to destroy everything he can reach. Is not disposed to injure others, but is destructive. On personal examination, is violent, sullen, refuses to talk, consequently no information can be obtained from him; acts in a generally insane manner. Was pounding the walls of cell, beating floor & cell-door; tearing up the contents of cell. Appearance and manner were those of an insane person. (Has a number of papers from St Peter, bearing on his case).

Nov 21 — Nov 21/93. Was brought here, in straight-jacket; with legs strapped; also in handcuffs. Is in good condition, apparently. Was put on B3 — Bodily condition dirty; there are observed an old injury at end of finger; slight bruises & scratches, caused by restraint apparatus, now on arrival. Nov 22/93. Was restless & noisy for 7 hours, sleeping but 2 hours, last night. AM. Pulse 100. Appetite very good. Bowels seem constipated; no cough observed. Is boisterous & excited today; it requiring 2 attendants, most of the time, to hold him. Talk is loud & incoherent. Has delusions. No complaints or injuries to note, today. Nov 23/93. Was noisy all last night; slept none. AM. Pulse 96. Appetite good; bowels have moved. There is no improvement in his behavior. It has been necessary for 2 attendants to hold him all day. "Fears poison". Refuses medicine. Nov 24/93. Slept only 2 hours; was noisy for 7 hours, last night. AM. Pulse 90. Bm. Has been very restless & noisy all day, requiring one or two attendants to hold him. Appetite fair; bowels move regularly. Took one dose of medicine today. Nov 25/93. Was given hyposthe last night, and slept 4 hours, but was noisy & restless 5 hours. AM. Pulse 96. Appetite very good; behavior somewhat improved. Is a little more quiet. Went out walking today. Takes medicine. Nov 26/93. Noisy for 5 hours, sleeping but 2 hours, last night. AM. Pulse 84. Refused breakfast but ate his dinner and supper. Behavior keeps improving. Has delusions in regard to his being held here. Talks of "Conspiracies & schemes". Takes medicine regularly. Nov 27/93. Slept 5 hours last night, was noisy 4 hours. AM. Pulse 90. Appetite good; bowels regular. Is now quietly behaved. Talks considerably; sometimes rationally; though inclined to be silly; reads some. Wrote a letter today. Nov 28/93. Was restless & noisy for 7 hours, sleeping but 2 hours, last night. AM. Appetite fair; complains of being sick and not able to get up. — Pulse 92. Seems to be worried about home, lawsuits & various other affairs. Still takes medicine. Nov 29/93. Was noisy & restless for 5 hours, slept only 4 hours, last night. AM. Pulse 92. Appetite very good; bowels regular. Has been in bed the past few days, and is still sick & in bed. Quiet and well-behaved. Talks fairly rationally at times; again, is incoherent. Nov 30/93. Restless for 1 hour, quite noisy 3 hours, slept but 4 hours, last night. AM. Pulse 100. Appetite good; bowels regular. Refused his medicine today. Is worried about his home, wife & business. —

Dec 1 — Dec 1/93. Slept 6 hours, restless 3 hours, last night. AM. Pulse 100. Still worries a great deal. Dec 2/93. Restless 7 hours. Sleeping only 2 hours, last night. AM. Pulse 90. Is well-behaved. Lies quietly in bed, all day. Talks a great deal about his business & home affairs. —

Dec 3/93. Slept 6 hours last night; was restless for 2 hours or so. AM. Pulse 90. Still lies quietly in his bed. Becomes very talkative if spoken to. Dec 4/93. Slept but one hour last night. —

Personal and Medical History of Peter Joseph Schaps.

1893 Dec 4 — Rested [illegible] as usual. AM. Pulse 96. At 10.40 Am was moved to C2. Still sick [illegible] rationally of home & his business affairs; says "his wife enough [illegible] to balance of night. Complained of having had tooth ache. [illegible] bed. Appetite has continued very good & bowels regular. Is [illegible] m. Pulse 90. Wants to get up. Dec 6/93. Up, dressed & on the hall. [illegible] Appetite good; bowels regular. Is talking almost all the time. [illegible] ionally of tooth-ache. Dec 11/93. Transferred to B1 at 11.50 AM. [illegible] through still somewhat restless. Inclined to talk about his business, [illegible] him in Hospital & that he could not appear in a law-suit that [illegible] was [illegible] having. Eyes serious and slow; manner drowsy. Does not care to help with any hall-work.

" 31 — Dec 31/93. Has, of late, shown a mean & disagreable disposition; is ugly & contrary at times; hard to reason with. Very slow in action. Asking many favors but unwilling to do anything requested of him. Appetite good. Bowels regular. Is in good physical condition.

1894 Jan 2/94 — Jan 2/94. Wt 202½ pds. (has gained 12½ pds, in past month). Pulse 84. Jan 20/94. Is always talking about his business affairs; about a big lawsuit that his wife is having; say "that she sent him to the Hospital until it is all over & then she is coming after him". Appears to be worrying a good deal; inclined to tell his troubles to others & to be very complaining & and fault-finding. Is quite contrary, at times. Appetite good. Bowels regular. Physical Condition good.

Febr Feb 2/94 — Feb 2/94. Wt 200 pounds. Pulse 84. Feb 6/94. Is very restless; continually going about the ward, and telling his troubles to anyone who will have the patience to listen to him; very fault finding; hard to reason with; stubborn, at times. Not inclined to help with work.

" 21 — Feb 21/94. Has been about as last described, for the past 2 or 3 weeks. —

" 22 — Feb 22/94. Patient was one of those committed under the law, recently declared illegal, and he was to day permitted to Go Home

— Crossed off the records: was illegally committed —

CLINICAL CHART.

1893 C2

DATE.	PULSE.	HEAD.	RESP.
Dec 4	10.40		
5	7 a.m. 100		
	5 p.m. 90		
6	7 a.m. 106		
	6 p.m. 96		
7			

20/265/3560

Personal and Medical History of Peter Joseph Schaps

SUBERT, PICKAS & OSMBERG, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriff A.C. Haas, attended by
This is rather meagre, in some respects. As to consanguinity, unknow
of intemperance, severe disease or injury to head; supposed cause of th
nothing is stated. This is not 1st attack; he has been confined in
howling. First symptoms of this attack were manifested [illegible]
was stopping. Is violent now. Disease seems increasing; not
now shown by his being sullen, violent; wants to destroy everyt
others, but is destructive. On personal Examination, I was
information can be obtained from him; acts in a generally
of cell, tearing floor & cell-door; tearing up the contents o
thos of an insane person. (Has a number of papers from St. Peter, bearing on his case).

Nov 21 Nov 21/93. Was brought here, in straight-jacket, with legs strapped, also in handcuffs. Semi good condition apparently. Was put on C3 — Bodily condition dirty; there are observed an old injury on end of finger; slight
" 22 bruises & scratches, caused by restraint apparatus, worn on arrival. Nov 22/93. Was restless & noisy for 7 hours, sleeping but 2 hours, last night. AM. Pulse 100. Appetite very good. Bowels seem constipated; no cough observed. Is boisterous & excited today; it requiring 2 attendants, most of the time, to hold him. Talk is
" 23 loud & incoherent. Has delusions. No complains or injuries to note, today. Nov 23/93. Was noisy all last night; slept none. AM. Pulse 96. Appetite good; bowels have moved. There is no improvement in his behavior. It has been
" 24 necessary for 2 attendants to hold him all day. "Fears poison". Refuses medicine. Nov 24/93. Slept only 2 hours; was noisy for 7 hours, last night. AM. Pulse 90. PM. Has been very restless & noisy all day, requiring me or two attendants to hold him. Appetite fair; bowels move more regularly. Took medicine today.
" 25 Nov 25/93. Was given hypnotic last night, and slept 4 hours, but was noisy & restless 5 hours. AM. Pulse 96. Appetite very good; behavior somewhat improved. Is a little more quiet. Went out walking today. Takes medicine.
" 26 Nov 26/93. Noisy for 5 hours, sleeping but 2 hours, last night. AM. Pulse 84. Refused breakfast but ate his dinner and supper. Behavior keeps improving. Has delusions in regard to his being held here. Talks of "Conspiracies & schemes". Takes medicine regularly. Nov 27/93. Slept 5 hours last night, was noisy 4 hours.
" 27 AM. Pulse 90. Appetite good; bowels regular. Is now quietly behaved. Talks considerably; sometimes rationally; though inclined to be silly; reads some. Wrote a letter today. Nov 28/93. Was restless & noisy for 7 hours,
" 28 sleeping but 2 hours, last night. AM. Appetite fair; complains of being sick and not able to get up. — Pulse 96. Seems to be worried about home, lawsuits & various other affairs. Still takes medicine.
" 29 Nov 29/93. Was noisy & restless for 5 hours, slept only 4 hours, last night. AM. Pulse 72. Appetite very good; bowels regular. Has been in bed the past few days, and is still sick & in bed. Quiet
" 30 and well-behaved. Talks fairly rationally at times; again is incoherent. Nov 30/93. Restless for 1 hour, quite noisy 3 hours, slept but 2 hours, last night. AM. Pulse 100. Appetite good; bowels regular. Refused his medicine today. Is worried about his home, wife & business. —
Dec 1 Dec 1/93. Slept 6 hours, restless 3 hours, last night. AM. Pulse 100. Still worries a great deal.
" 2 Dec 2/93. Restless 7 hours, sleeping only 2 hours, last night. AM. Pulse 90. Is well-behaved. Lies quietly in bed, all day. Talks a great deal about his business & home affairs. —
" 3 Dec 3/93. Slept 6 hours last night; was restless for 2 hours or so. AM. Pulse 90. Still lies quietly
" 4 in his bed. Becomes very talkative if spoken to. Dec 4/93. Slept but one hour last night. —

Personal and Medical History of Peter Joseph Schaps

1893 cont'd

Dec 4 Rest of night passed about as usual. AM. Pulse 96. At 10.40 Am. was moved to C2. Still sick & was put to bed. Talks fairly rationally of home & his business affairs; says "he is well enough
" 5 to get up. Wt today, 190 pounds. (a gain of 10 pounds, since admission). Dec 5/93. Slept but 3 hours last night. Very restless the balance of night. Complained of having had tooth-ache. 7 A.M. Pulse 100. Still kept in bed. Appetite has continued very good & bowels regular. Is
" 6 inclined to talk a great deal. PM. Pulse 90. Wants to get up. Dec 6/93. Up, dressed & on the hall.
" 9 Dec 9/93. Has remained up on ward. Appetite good; bowels regular. Is talking almost all the time.
" 11 Is very restless. Complains, occasionally, of tooth-ache. Dec 11/93. Transfered to B1 at 11.30 AM.
" 22 Dec 22/93. Is quiet & well behaved, though still somewhat restless. Is inclined to talk about his business, a great deal. Says that "people put him in Hospital so that he could not appear in a law-suit that his wife was having". His actions are slow; manner drowsy. Does not care to help with any hall-work.
" 31 Dec 31/93. Has, of late, shown a mean & disagreeable disposition; is ugly & contrary, at times; hard to reason with. Very slow in action. Asking many favors but unwilling to do anything requested of him. Appetite good. Bowels regular. Is in good physical condition.

1894
Jan 20 Jan 2/94. Wt 202½ pds. (has gained 12½ pds, in past month). Pulse 84. Jan 20/94. Is always talking about his business affairs; about a big lawsuit that his wife is having; says "that she sent him to the Hospital until it is all over & then she is coming after him". Appears to be worrying a good deal; inclined to tell his troubles to others & to be very complaining & and fault-finding. Is quite contrary, at times. Appetite good. Bowels regular. Physical condition good.
Feb 6 Feb 2/94. Wt 200 pounds. Pulse 84. Feb 6/94. Is very restless; continually going about the ward, and telling his troubles to anyone who will have the patience to listen to him; very fault finding; hard to reason with; stubborn, at times. Not inclined to help with work.
" 21 Feb 21/94. Has been about as last described, for the past 2 or 3 weeks. —
" 22 Feb 22/94. Patient was one of those committed under the law, recently declared illegal, and he was to day permitted to Go home

— Crossed off the records: was illegally committed —

Personal and Medical History of Andrew. W. Anderson #7

HERBERT, PUGLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3561.
Residence, 774 Farquier St St Paul, Minn
Date Admission, 21st November 1893
Admitted by, Dr Kilbourne Hour, 7 PM
How Sent, John B. Olivier, Jof P, Ramsey County
Sex, Male
Age, 39 years
Civil Condition, married
Children, 4
Age Youngest Child, —
Occupation, Tailor (Father, a farmer).
Degree Education, limited to reading, writing.
Profession Religion, Lutheran
Habits, probably not good
Nativity, Sweden (Parents also born there).
Physicians Committing, P. Marchand and D.W. Robillard
Correspondents, address of friends 713 Farquier St.
Family Physcn D. Robillard, 878 Payne Ave St Paul

No. for Year, 131.
Insane Relatives, none
Cause Exciting, "Softness of brain, via Syphilis"
Cause Predisposing, probably bad habits
Form, acute melancholia
Accompanying Bodily Disorder, Syphilis; anaemia
Suicidal or Not, propensity now active
Date of this Attack, November 1893
Duration, probably a week or so
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 39 years
Time of Leaving, Feb. 6th '94
Time in Hospital, 2 mo 15 da.
Result, Imp.

Crossed from Absence List April 1st 1894 because illegally committed

EXAMINATION ON ADMISSION.

Exd by Dr Herzog & Eby. Dec 7/93 — 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, Dull
Correct or Illusive, somewhat illusive

REASONING POWER:
Ordinary Subjects, Good
Own Mental State, not good
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
"Heard talking in head; something touched me last"
"Saw signs. Has had some operation on Eyes"
"Clocks, trains &c talk to him" —

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

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

HALLUCINATIONS: of hearing &c

ILLUSIONS:

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

Personal and Medical History of Andrew. W. Anderson #7

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7½ in WEIGHT, 138 lbs. NUTRITION, Anaemic
WOUNDS OR ABNORMALITIES, Probably none.
TONGUE, Tremors, quite tremulous Coating, No coating; teeth marks Promptness Movement, Quite prompt
PUPILS, Equality, Equal Size, moderate
Response Light, Yes Accommodation, Yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, } Good, to usual tests
Legs, }
TREMORS, Hands, slight Tongue, none
Facial Muscles none General, —
REFLEXES, Patellar, Equal; 5 or 6; Dr P's Scale
Other Reflexes,
ARTICULATION, Hesitating, — Slurred, Foreign Accent
FACIAL EXPRESSION, Despondent
SENSIBILITY, normal
HEART, Sounds good; slow
LUNGS, Good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, None Insane —
Father or Pat. Relations, No Heredity —
Brothers or Sisters, one brother a Drunkard. No Insanity in brothers or sisters.

Personal and Medical History of Andrew W. Anderson #2

EGBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA.

1893

This patient was brought here by Deputy Sheriff, P.C. Haas, attended by Henry Chapel, with the following history. There is no history of consanguinity or heredity. This is 1st attack, Symptoms manifested this month; disease seems increasing; not variable; no rational intervals. He is progressive and the same. Derangement now shown by his talk, from illusions, "Trains, clocks & other things talk to him". Has shown a disposition to injure others. Has not attempted suicide but propensity is now active. Has no filthy or destructive habits. Previously, he manifested no peculiarities. There is no history of intemperance. He has not been restrained or confined. He supposed cause of the disease is softness of brain, via Syphilis. He has been treated by Cathartics, Narcotics, (Chloral & Brom.) Tonics. Anti-Syphilitics. On personal examination, there is found rambling talk; Anaemia. Patient said he was annoyed by Railroad & imaginary Creditors. Pain in head, and said to wife that he would kill himself, if not for babies. Shows general delusions. Appearance & manner were mild. —

Nov 21 — Nov 21/93. The patient, on admission, is in good physical condition. Was put on B.Z. Pulse 76. Te 99.

" 22 — Bodily condition quite clear; no injuries or peculiarities noted. Nov 22/93. Slept 6 hours last night: was somewhat restless when awake. AM. Pulse 76. Te 98.6. Appetite good; bowels constipated, at times. Has also some slight Cough. Is, at times, quite restless. Talks when addressed & seems quite sensible.

" 23 — PM. Pulse 74. Te 98.8. No complaints or injuries to note. Nov 23/93. Was restless for 2 hours or so, but slept 6 hours, last night. AM. Pulse 72. Te 98.8. Appetite medium. Walks the hall some; restless.

" 24 — PM. Pulse 74. Te 99. Nov 24/93. Was quiet & slept 6 hours, last night. AM. Pulse 70. Te 99. Still walks the floor a good deal at times; discontented; "wants to go home"; talk but little. PM. Pulse 72. Te 98.8.

" 25 — Nov 25/93. Was restless for 4 hours, Sleeping but 4 hours, last night. AM. Pulse 72. Appetite only medium. Sits about on a bench, apart from others, most of the time. Complains of not feeling well. —

" 26 — Nov 26/93. Quiet, Sleeping 7 hours, last night. AM. Pulse 76. About the same as yesterday. —

" 27 — Nov 27/93. Slept 6 hours last night; was quiet. AM. Pulse 74. Appetite medium. Can not see behavior by day, do not change any.

" 28 — Nov 28/93. Restless, sleeping but 5 hours, last night. AM. Pulse 72. Restless today; Walking about hall; Talks some. Discontented. "Wants to get out".

Dec 5 — Dec 5/93. During this, the second week of patients stay, Sleep & rest, at night, have continued much broken by his restlessness, (he sleeping only about 4 or 5 hours, each night); Pulse has been about normal; appetite only medium; Sits on a seat, most of the time, in a very depressed manner. Occasionally restless, & walking the floor. Talks but little. Has helped some with ward-work during last day or two. Seems still very discontented & is "continually wanting to go home". Habits are clean. Patients manner has been rather peculiar, and dull.

" 16 — Is quite pallid. Wt 139 pds. Pulse 74. Dec 16/93. Eye sore. Same treated. —

" 19/31 — Dec 19/93. Was today visited by his wife. Dec 31/93. Sleeps well, at night. Appetite good. Is quiet and well-behaved. Makes no complaints. Is deluded. Says "he wants pay for staying here." Works some on ward.

1894 Jan 2/94 — Jan 1/94. Wt 137 pds. (Has lost some in flesh in past month) - Pulse 74. Jan 1/94. Still manifests numerous delusions.

" 22/29 — Jan 22/94. Was visited by brother today. Jan 29/94. Ran away this afternoon. Walked to Eyota, sold his overcoat & bought a ticket for St. Paul. Was caught on the train (while passing by Rochester) & brought back to this Hospital.

" 31 — Jan 31/94. Appetite fairly good. Is rather restless. Still deluded. Has trouble, occasionally, with sore eyes. Works some on ward.

Personal and Medical History of Andrew W. Anderson #2

1894

Feb 1/8 — Feb 1/94. Wt 145½ pds (has gained some in flesh, in past month). Feb 6/94. Was, today, visited by his wife, who took him home with her. He was in fairly quiet condition.

— Crossed off the Records; was illegally Committed —

Henry J. Hutchins

1894

Sep 7/10 — From 1st. Feb 2/94. Wt 181 pds. Pulse 70. Sups on board today. Sep 10/94. Transferred to B.Z. today.

" 23 — Feb 23/94. Has "noisy spells". Shows delusions. "Thinks there is some one trying to kill him" at night.

" 25/30 — Feb 26/94. Was very noisy, last night. Feb 30/94. Still has "noisy spells" at night. Troubled with the delusion "that some one is going to try & kill him". Behaves, by day, good. Works some on ward.

Oct 1/31 — Oct 1/94. Wt 194 pds (a gain of 13 pds in the past month). Pulse 80. Oct 1/94. Deluded & noisy at times.

" 31 — Oct 31/94. Well behaved, though somewhat noisy at times. Still holds to his delusions. Works some. Habits good.

Nov 1 — Nov 1/94. Wt 189 pds. Pulse 76. Dec 1/94. Wt 190½ pds. Pulse 56. Jan 2/95. Wt 191 pounds. Pulse 76.

Dec 1 1894 – Jan 31 1895 — Jan 31/95. Appetite good; bowels regular. Behaves well, on the whole, tho' at times, is quite noisy. Reads some. Deluded; still thinks he hears people talking about him, nights. Cleanly. Works on ward.

Jan 31/Feb 28 — Feb 1/95. Wt 192½ pds. P 76. Feb 21/95. Noisy & very much excited, for a time, today. Is deluded.

" 28 — Feb 28/95. No special change. Still holds Delusions: also "Hallucinations of hearing". Still Shows.

Mar 2/30 — March 2/95. Wt 189 pds. P 64. March 26/95. Says "that he is going out of here the 1st of April. Dead or alive".

" 31 — March 31/95. Still has his excited & noisy "Spells". Walks out regularly. Delusions & Hallucinations persist.

Apr 1/30 — April 1/95. Wt 190 pds. Pulse 72. Apl 30/95. No change noticeable, in any respect. Converses & shows his "peculiar spells" & talks very loudly on the subject of his being very shamefully wronged." —

May 2/31 — May 2/95. Wt 189½ pds. Pulse 72. May 31/95. Is quite noisy, nights; also sometimes, by day. Still has delusions: "thinks his wife comes round, nights" and, if he hears anyone talking, thinks "they say they are going to knife him or shoot him". He has not been feeling well, for past few days.

June 1/30 — June 1/95. Wt 190 pds. Pulse 68. June 6/95. Fell & hurt his hip. Given liniment for same.

" 17/30 — June 17/95. Hip still somewhat sore. June 30/95. Noisy & full of delusions: Get very much excited, at times. Quotes Patrick Henry, at time: "Give me Liberty or give me Death".

July 1/27 — Habits clean. Physical condition good. July 1/95. Wt 187 pds. Pulse 84. July 22/95. Starts to go away, today; said "he was going home", & threatened injury to anyone who would stop him; but offered no resistance when being brought back. However, was very noisy & used obscene language: Had to be set down, by force.

" 31 — July 31/95. No change: Still holds delusions. Habits clean.

Aug 2/31 — Aug 2/95. Wt 189 pds. P 88. Aug 31/95. Had a noisy spell, while at meals: became obscene & profane: had to be held till he quieted down. afterward cried & was quite dependent.

" 31 — Aug 31/95: No special change) noticeable). -

Sep 2/30 — Sep 2/95. Wt 184 pds. P 96. Sep 15/95. Still about the same. Sept 30/95. Becomes noisy & excited, at times: often apologizes for the obscene remarks he make while he is noisy & excited.

Oct 1/20 — Oct 1/95. Wt 184 pds. P 96.

" 7 — Oct 7/95. Complains of severe pain in Stomach & bowels. 10:30. Given dose of mustard & plaster applied to abdomen.

" 8 — Was put to bed. Medicine (powders) given & hot sand bags put to feet. Pyp 102 T 104. Oct 8/95. Slept 7 hours, last night. restless an hour or so. Remained in bed today. Says "he feels much better". Pulse R 22 Te 99.2.

" 9/31 — Oct 9/95. Restless 2 hours, Slept 6 hours. Up, on ward, 5 day. Oct 31/95. Generally quiet, but subject to noisy & excited "spells". Has delusions, most of them of a cruel & criminal nature. Works some. Health Some.

To Rochester Book "A" page 24

Personal and Medical History of Thomas. N. Ramsey

EBERT, FICKE & CHAMBERS, DAVENPORT, IOWA

Whole No. 3567.
Residence, Minneapolis Minn
Date Admission, 21st November 1893.
Admitted by, Dr Kleiboarne Hour, 7 P.M.
How Sent, John N. Steele. Jail. Hennepin County.
Sex, Male
Age, 53 Years
Civil Condition, Divorced
Children, Nine
Age Youngest Child,
Occupation, Lumber-Scaler
Degree Education, Common School
Profession Religion, Episcopal
Habits, A heavy drinker for past 4 months.
Nativity, St John N.B. (Parents born in Ireland)
Physicians Committing, Chase & Norred & Thos. F. Quinby
Correspondents, Mellington & Ramsey, Dawsonan Printing Offic Lumber Exchange. Mpls.

No. for Year, 137.
Insane Relatives, not known
Cause Exciting, Dipsomania
Cause Predisposing, not stated
Form, mania-a-potu
Accompanying Bodily Disorder, Eyeblown out in 1866.
Suicidal or Not, not
Date of this Attack, Four days ago
Duration, Four Days or so.
No. of Attack, 1st so far as known
No. of Admissions, 1st
Age First Attack, 53 years
Time of Leaving, Jan. 8' 94
Time in Hospital, 1 mo. 17 ds.
Result, Rec.

Crossed from the Active List, April 1st, 1894 because illegally committed.

EXAMINATION ON ADMISSION.

Exd by Dr. Ely, Nov 25/93 = MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Recent Events, Special Subjects, } Probably Good

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

REASONING POWER:
Ordinary Subjects, Seems good
Own Mental State, Claims was brought here by deception.
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Admits having drunk hard of late. Thinks attack was brought on by "starting" too much; over excitement. Tells that he could keep away from liquor now if allowed to go.

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

DELUSIONS:
Systematized or Not, None noted
Special Subjects,
Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, voluble; says "he never felt better, than he does now"

Personal and Medical History of Thomas. N. Ramsey

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8½ WEIGHT, 135 lbs. NUTRITION, Quite Fair
WOUNDS OR ABNORMALITIES, Eyeblown out in 1866 (see history).
TONGUE, Tremors, Fine Coatings, Some Promptness Movement, quite prompt
PUPILS, Equality, ——— Size, Dilated
Response Light, Yes Accommodation, Yes.
SIGHT, Some impairment
HEARING, Slight impairment
COORDINATION, Arms, } Quite Good, by usual tests.
Legs, }
TREMORS, Hands, Some Tongue, fine
Facial Muscles, General, none noted
REFLEXES, Patellar, Equal; below normal: 2 or 3. —
Other Reflexes,
ARTICULATION, ~~Hesitating,~~ quite good ~~Slurred,~~
FACIAL EXPRESSION, normal
SENSIBILITY, normal
HEART, Palpitating; Sounds are good.
LUNGS, Sounds are good.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Kept Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Records Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Short ONSET GRADUAL OR SUDDEN, Sudden
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother, he thinks, is still living.
Father or Pat. Relations, Father dead; used to drink some.
Brothers or Sisters,

Personal and Medical History of Thomas N. Ramsey

LOBERT, FOLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriff Adolph Peterson, with the following history. There is no history of consanguinity. As to heredity, not known. This is 1st attack, so far as known. Has never been in hospital before. First symptoms of this attack manifested, so far as known, from four days ago. Is in fear of burglars, bodily injury, a lunch counter at night, and theatre another. Is always incoherent, never completely rational. Derangement is now shown in a variety of subjects; burglaries, plays, sheriff, guns, lunch counters, saloons & theatres. He has two pictures in his room, with which he holds protracted conversations. Is not suicidal, nor filthy nor destructive. Has drunk to excess since July last. Denies that parents were intemperate. He had an eye blown out in 1866; no other injury or disease. He has not been restrained or confined. Cause of disease is Dipsomania. Has been treated by sedatives. On personal Examination, nothing further of importance brought out. Talk is incoherent, suspicious & full of vagaries. He was sick by very loquacious, but otherwise quiet. Other facts are his Endless variety of ideas; occurrences which exist in a diseased imagination.

Nov 21 Nov 21/93. On admission, came with arms strapped. Was put on 13th. Pulse 82. T(e) 99.4. Bodily condition was rather dirty. Is blind in one eye (the left), (see history); Nov 23/93. Was restless & noisy for 3 hours; slept only 5 hours, last night. AM. Pulse 80. T(e) 99.6. Bowels seem free; no cough noticed. — Is restless & walking the hall, part of the day. Thinks he is in Minneapolis. Talks incoherently.

" 23 No complaints or injuries to note, today. PM. Pulse 84. T(e) 99.4. Nov 23/93. Rested & slept apparently well, (8 hours), last night. AM. Pulse 80. T(e) 99.2. Is quietly behaved. Talks freely

" 24 Seems more contented. Plays games; works some. PM. Pulse 82. T(e) 99. Nov 24/93. Again slept well, last night. AM. Pulse 78. T(e) 98.8. Seems now to realize where he is. Appetite is good. He

" 25 is quiet & well-behaved; makes no complaints. PM. Pulse 80. T(e) 99. Nov 25/93. AM. Pulse 76. Talks quite freely & seemingly sensibly. Quiet & well-behaved. Works in dining room.

" 26/28 Nov 26/93. AM. Pulse 76. Talks freely; no delusions noted. Nov 28/93. No material change.

Dec 5 Dec 5/93. Since last noted, rest & sleep at night have continued good (uniformly 8 hours, each night). He has continued quiet & well behaved; clean, tidy and of good personal habits. Appetite good & bowels apparently regular. Pulse has been about normal. Patient talks quite freely & sensibly; no delusions have been noted. Reads; plays games; works at ward; makes no complaints. Is apparently contented here. Physical condition quite good. Wt 151 pounds. Pulse 74. (Patient has made a very marked increase of flesh, since coming; 16 pounds).

" 15 Dec 15/93. Complains some

" 30/31 of sore-throat; given medicine. Dec 30/93. Complains, today, of his legs paining him. Dec 31/93. Apparently rests and sleeps well, at night. Is always quiet & well-behaved. Talks freely. No delusions are noted. Plays games &c. Seems to worry, at times, on account of thinking he is going to get away from here soon. Works well and willingly in the dining room. Habits and clean.

1894

Jany 2 Jany 2/94. Wt 145½ lbs. (some loss in flesh, without apparent cause). Pulse 76.

" 7 Jany 7/94. Talks quite freely & rationally. Quiet and well-behaved. Plays games and seems interested in them. Works well at ward. Is in good physical condition.

" 8 Jany 8/94. Went home today, alone, on trial.

Crossed off the Records; was illegally committed.

Personal and Medical History of Richard A. Jeffrey.

From 332.

25-329

DETAILED HISTORY OF SICKNESS OF MR. Richard A. Jeffrey
DIAGNOSIS.

1894 A. L. E.

DATE July	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP. AM	TEMP. PM	
21	7	5	66	74					7 12.30 6.30 Medicine.
									10.30 AM Complains of pain in bowels. Says has not had bowels moved.
22	7	5	78	80					7 10.30 1 and 6 Medicine
23	7	5	80	66					7 " " 2 " " " 7 PM Bowels moved.
24	7	5	80	68					7 " 12.30 6.30 " "
25	7	5	70	68					7 " " Medicine
26	7	5	78	62					7 " " 6 " "
27	7	5	84	66					7 " 12.30 " "
28	7	5	84	64					Slept on evening of 27th from 6 PM
29	7	5	78	66					28 12.30 M. Medicine 5 PM. Complains of
29									Feeling sick to stomach
30	7	5	72	60					29 12.30 PM Medicine 5 PM. Passage
31	7	5	72	78					7 12.30 6.30 Medicine
									7 12 6 Medicine. Complains of Stomach continually sour at times after meals. Bowels as a rule costive.

" 16

" 17 Does not appear well, of late. Aug 17/94. Still complains of feeling sick at his stomach.

" 20 (given Special medicine. See attached nurse's record, of this date). Aug 20/94. Abdomen appears t

(Carried to 308)

Personal and Medical History of Richard A. Jeffrey.

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329

DETAILED HISTORY OF SICKNESS OF MR. Richard A Jeffrey.
DIAGNOSIS.

1894 Q 2 E

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM
July 1	7	5	62	60				
" 2	7	5	64	58				
" 3	8							
" 4	7	5	60	58				
" 5	7	3	80					
" 6	5		62					
" 7	7	5	70	68				
" 8	7	5	80	60				
" 9	7	5	60	62				
" 10	7	5	70	64				
" 11	7	5	72	72				
" 12	7	5	80	66				
" 13	7	5	66	60				
" 14	7	5	68	72				
" 15	7	5	84	66				
" 16	7	5	70	62				
" 17	7	5	80	64				
" 18	7	5	80	60				
" 19	7	5	80	60				
" 20	7	5	72	76				

Weight 126 lbs.
Evesta. Slight passage
Threw up his trat last night
Treated by a friend
Sleeps on an average 7 hrs out of 6 hrs.
7 A.M. 12 M. Medicine. 4 P.M. Complaining of severe pain in rectum.
Gave following evening as usual
Supper
Night 11 P.M. Coughing
7 A.M. 12 M. 6 P.M. Medicine
7 A.M. Complaining of severe pain in rectum
7 A.M. Gave following evening as usual
Supper
7 A.M. 12 M. Medicine. 2 P.M. 8 P.M. Bath.
" Complaining of pain in stomach. Slight passage.
7 A.M. 12 M. Medicine.
" " " 6 P.M. " " 12 M. Slight passage
" " " " " " " " " "
7 A.M. 12 M. 6 P.M. Medicine. 12 M. Complaining of severe pain in rectum. 1 P.M. Slight passage
2 A.M. 12 M. 6 P.M. Medicine.
" " " Medicine. 6 P.M. Bath
" A.M. Complains of pain in bowels.
10 " Gave evening as usual
Bowels moved
7 A.M. 12 M. 6 P.M. Medicine

" 25 Talk.
" 26/93 Nov 26/93.
Dec 5 Dec 5/93. Has continued well; bowels apparently regular; no delusions have been noticed; apparently contented; has made a very marked increase of flesh, twice coming; 16 pounds). Dec 15/93. Complains some of sore throat; Given medicine. Dec 30/93. Complains today, of his legs paining him. Dec 31/93. Apparently, rests and sleeps well, at night. Is always quiet & well-behaved. Talks freely. No delusions are noted. Plays games &c. Seems to worry, at times, account of thinking he is going to get away from here. Works well and willingly, in the dining room. Habits and clean.
1894
Jany 2 Jany 2/94. Wt 145 & 5 ozs. (some loss in flesh, without apparent cause). Pulse 76.
" 7 Jany 7/94. Talks quite freely & rationally. Quiet and well-behaved. Plays games and seems interested in them. Works well inward. Semi good physical condition.
" 8 Jany 8/94. Went home today, alone, on trial.

Crossed off the Records; was illegally committed.

" 30/93 Talks quietly & noisy for 3 hours; has cough noticed. — Minneapolis. Talks incoherently. 3/93. Rested & slept ap- quietly behaved. Talks freely 99. Nov 24/93. Again sleeps realize where he is. Appetite is good. He also do. 99. Nov 25/93. Wt. Pulse 76. & well-behaved. Works in dining-room. delusions noted. Nov 28/93. No material change. has continued good (uniformly 8 hours, each night), & of good personal habits. Appetite good & now about normal. Patient talks quite freely & sensibly; plays games; works inward; makes no complaints. In good physical condition quite good. Wt 151 pounds. Pulse 74. (Patient

May 1/ " 15 " 30/ June 1/ " 30/ July 2/ " 31 Aug 1/ " 9 " 10 " 13/16 " 17 " 20

Complains. Aug 16/94. Patient does not appear so well, of late. Aug 17/94. Still complains of feeling sick at his stomach. (Given Special medicine. See attached nurse's record, of this date). Aug 20/94. Abdomen appears to

(Carried to 308)

Personal and Medical History of Richard A. Jeffrey.

332

25-3.79

DETAILED HISTORY OF SICKNESS OF MR. Richard A. Jeffrey.
DIAGNOSIS.

1894 O.2.E

DATE	HOUR	PULSE		RESP.		TEMP		
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.
June 28	7	5	66	56			On special diet	
29	7	5	64	64			Gave bath	
	8						Bowels moved	
		2					"	"
		4						
30	7	5	24	60				

10 . 7 . 5 . 10 . 00 .

(Carried to 308)

Dalts

Nov 26/4

Dec 5/93.

Has continued
bowels apparently
no delusions have
apparently contented
has made a very marked increase of flesh, knee coming; 16 pounds). Dec 15/93. Complains some
of sore-throat; Given medicine. Dec 30/93. Complains today of his legs paining him. Dec 31/93. Apparently,
rests and sleeps well, at night. Is always quiet & well-behaved. Talks freely. No delusions are noted.
Plays games &c. Seems to worry, at times, on account of thinking he is going to get away from here soon.
Works well and willingly in the dining room. Habits and clean.

1894
Jany 2/94. Wt 145½ lbs. (some loss in flesh, without apparent cause). Pulse 76.

Jany 7/94. Talks quite freely & rationally. Quiet and well-behaved. Plays games and seems
interested in them. Works well onward. Semi good physical condition.

Jany 8/94. Went home today, alone, on trial.

Crossed off the Records; was illegally Committed.

Personal and Medical History of Richard A. Jeffrey.

32.

529

CASE RECORD.

Patient's Name R A Jeffrey. Name Disease Name Physician

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
June 1894						
14. 5. A. M.		60			On special diet	
15. 7. A. "		72		Gave bath		Sleeps nightly over an average of 7 hrs.
5. P. "		56				
16. 7. A. "		64				
5. P. "		52				
17. 7. A. "		60				
18. 7 " "		60				
5. P. "		56				
19. 7. A. "		64				
5. P. "		60				
11.15 A. "				Enema,		Bowels moved slightly. Complained of severe pain in rectum.
" "						
12.30 M.						Bowels moved freely.
20. 7. A. M		68				
5. P. "		60				
21. 7. A. "		70				
5. P. "		60				
May 1/94 22. 7. A. "		80		Gave bath.		
5. P. "		56				
" 25/94 23. 7. A. "		80				Night. Slight Passage
" 31 5. P. "		56				
7.30 A. "				Enema,		Fair passage
June 1/94 24. 7. A. "		64				
5. P. "		60				
25. 7. A. "		64				Sleeps nightly on an average of 7 hrs.
5. P. "		58				
July 2/94 26. 7. A. "		60				
" 31 5. P. "		60				
2.30 P. "						Passage Fair.
27. 7. A. "		74				
5. P. "		64				

Recorded by T. A. Spillane Nurse.

" 24 Le
well
" 25 is quiet
Talks fin
" 26/94 Nov 26/93.
Dec 5 Dec 5/93. Quie
Shehas continued g
bowels apparently reg
no delusions have been noted. Reads; Plays games; works inward; mates no complaints. Is
apparently contented here. Physical condition quite good. Wt 151 pounds. Pulse 74. (Patient
" 15 has made a very marked increase of flesh, twice coming; 16 pounds). Dec 15/93. Complains some
" 30/94 of sore-throat; given medicine. Dec 30/93. Complains today, of his legs paining him. Dec 31/93. Apparently,
rests and sleeps well, at night. Is always quiet & well-behaved. Talks freely. No delusions are noted.
Plays games &c. Seems to worry, at times, on account of thinking he is going to get away from here.
1894 Works well and willingly in the dining room. Habits and clean.
Jany 1 Jany 2/94. Wt 145 & 6ds. (some loss in flesh, without apparent cause). Pulse 76.
" 7 Jany 7/94. Talks quite freely & rationally. Quiet and well-behaved. Plays games and seems
interested in them. Works well inward. Semi good physical condition.
" 8 Jany 8/94. Went home today, alone, on trial.

Crossed off the Records; was illegally Committed.

Aug 7/94 ... Takes pill rationally - vomits some, once after supper meal

" 9

" 10

" 13/16 ... compares. Aug 10/94. Patient

" 17 Does not appear so well, of late. Aug 17/94. Still complains of feeling sick at his stomach.

" 20 (Given Special Medicine. See attached nurse's record, of this date). Aug 20/94. Abdomen appears &

(Carried to 308)

CASE RECORD.

Patient's Name Richard A Jeffrey Name Disease ..... Name Physician .....

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
June 1894						
1. 7 A.M		74		Gave bath	On Spare diet	
5 P.M		60				
7.30				Anemema of Soap Suds		Bowels moved.
						Weight 126 lbs
2. 7.—		70				
5.—		60				
3. 7.—		70				
5.—		58				
4. 7.—		70				Complains of bowels
						paining at times.
5.—		56				
5. 7.—		60				
5.—		60				
6, 7.—		68				
5.—		60				
8 A.M.				Enema,		Slight passage.
7. 7.—		60				
5.—		64				
8. 7.—		64		Bath		Slept tolerably well
5.—		58				on average of 7 hrs
9. 7.—		68				
5.—		60				
10 7.—		64				
5.—		64				
11. 7.—		60				
5.—		60				
12. 7.—		66				
5.—		58				
6 P.M						Complains of pain
						in bowels.
13. 7 A.M.		82				Enema, very effect
8.30 A.M.						ive.

Recorded by T. R. Spillane Nurse.

ought not.
otherwise quiet.
uation.
99.4. Bodily Condition
ttess + noisy for 3 hours;
e; no coughs noticed. —
Minneapolis. Talks incoherently.
Nov 23/93. Rested + slept ap-
. Is quietly behaved. Talks freely
Pulse 82. T(e) 99. Nov 24/93. Again slept
now to realize where he is. Appetite is good. At
P.M. Pulse 80. T(e) 99. Nov 25/93. A.M. Pulse 76.
. Quiet + well-behaved. Works in dining room.
ely; no delusions noted. Nov 26/93. No material change.
slept at night have continued good (uniformly 8 hours, each night).
behaved; clean, tidy and of good personal habits. Appetite good +
Pulse has been about normal. Patient talks quite freely + sensibly;
apparently contented here. Physical condition quite good. Wt 151 pounds. Pulse 74. (Patient
has made a very marked increase of flesh, twice coming; 16 pounds). Dec 1/93. Complains some
of sore-throat; given medicine. Dec 30/93. Complains today, of his legs paining him. Dec 31/93. Apparently,
rests and sleeps well, at night. Is always quiet + well-behaved. Talks freely. No delusions are noted.
Plays games etc. Seems to worry, at times, on account of thinking he is going to get away from here.
Works well and willingly in the dining room. Habits are clean.
1894 Jany 2/94. Wt 145 ½ lbs. (some loss in flesh, without apparent cause). Pulse 76.
Jany 7/94. Talks quite freely + rationally. Quiet and well-behaved. Plays games and seems
interested in them. Works well inward. Semi good physical condition.
Jany 8/94. Went home today, alone, on trial.

Crossed off the Recds; was illegally Committed.

Aug 7/94. Pulse 74. Temp. 98.4. Resp. 20. Patient does not appear well, of late. Aug 7/94. Still complains of feeling sick at his stomach. (Given Special Medicine. See attached nurse's record, of this date). Aug 10/94. Abdomen appears to
(Carried to 308)

Personal and Medical History of Thomas. N. Ramsey

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Dec 5

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" 30/31

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Janu
7
" 8 Janu 8/94.

Crossed off the Records; was illegally committed.

Personal and Medical History of Richard. A. Jeffrey.

From 332.

Mar 7
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" 10
" 17
" 20
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" 20
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" 24
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May 1/31
" 1/15
" 16/28
" 31
June 1/30
July 1/31
" 31
Augt
" 9
" 10
" 11/16
" 17
" 20

25-329

CASE RECORD.

Patient's Name R.A. Jeffery. Name Disease ..... Name Physician .....

Date	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
May 1894						
28. 7. A.M.		64			One extra diet	Asked Dr for some-
5. P.M.		56				thing to kill him
						self with.
29. 7. —		64				
5. —		58				
8. A.M.				Enema		Bowels moved.
30. 7. —		64				
5. —		60				
7.30 A.M.				Bath.		
31. 7. A.M.		72				
5. P.M.		62				

Recorded by J. R. Spillane Nurse.

12 . 7 : 5 . 70 . 60 .

after every meal

complaints. Augt 6/94. Patient does not appear so well, of late. Augt 7/94. Still complains of feeling sick at his stomach. (gave Special medicine. See attached Nurse's record, of this date). Augt 8/94. Mooney appears to

(Carried to 308)

Personal and Medical History of Richard A. Jeffrey.

CASE RECORD.

Patient's Name R A Jeffery Name Disease Name Physician

Date.		Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
May 1894							
15.	7. A.M.		70			On extra diet	
	5. P.M.		66				
	8. A.M.				Bath.		
16.	7. A.M.		60				
	5. P.M.		60				
17.	7. A.M.		66				
	5. P.M.		56				
18.	7. —		64				
	5. —		58				
	6. P.M.				Gave enema of soapsuds.		
19.	7. —		62				
	5. —		56				
20.	7. —		76				
	5. —		66				
21.	7. —		64				
	5. —		56				Lies in bed steadily. Appetite good. at times complains of bowels.
22.	7. —		66				
	5. —		70				
23.	7. —		70		Bath		
	5. —		62				
	8. A.M.				Enema, soapsuds & glycerine		
24.	7. —		64				
	5. —		62				
25.	7. —		64				
	5. —		62				
26.	7. —		60				Upon ward in roller chair about 2½ hours.
	5. —		62				
27.	7. —		62				
	5. —		60				

Recorded by R A Spillane Nurse.

Crossed off the Records; was illegally committed.

Jany 8/94.

12 : 7 : 5 : 70.00.

Aug 10/94. Patient complains. Aug 15/94. Patient does not appear so well of late. Aug 17/94. Still complains of feeling sick at his stomach. (Give Special Medicine. See attached nurse's record of this date). Aug 20/94. Abdomen appears to

(Carried to 308)

Personal and Medical History of Richard A. Jeffrey.

CASE RECORD.

Patient's Name Richard A Jeffrey Name Disease Name Physician

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
May 1894						
1. 7 A.M.		66		Bath	On extra diet	Weight 126 lbs.
5 P.M.		66				
2. 7 A.M.		64				
5 P.M.		68				
3. 7 A.M.		66				
5 P.M.		60				
4. 7 A.M.		64		7 P.M. Gave enema of soap		
5 P.M.		56		suds and glycerine.		
5. 7 A.M.		66				Has been Ordered planning all day. Thinks he is going to die.
5 P.M.		60				
6. 7 A.M.		68				
5 P.M.		66				
7. 7 —		64				
5 —		60				
8. 7 —		66		6.35 P.M. Gave an enema		
5 —		62		of soap suds. Bowels moved freely. Bath.		
9. 7 —		62				
5 —		60				
10. 7 —		60				
5 —		58				
11. 7 —		62				
5 —		60				Complains of bowels.
12. 7 —		60				
5 —		50				
13. 7 —		66				
5 —		62				
14. 7 —		66				
5 —		58				
7 P.M.				Enema of soap suds.		

Recorded by J. R. Gillane Nurse.

Crossed off the Records ; was illegally Committed.

Jany 8/94. [illegible]

Aug 12 : 7 : 5 : 70. 00.

Aug 10/94. Patient

Aug 7/94. Still complains of feeling sick at his stomach.

Aug 10/94. Attorney appears &

(Carried to 308)

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	AM
25	7	5	66	58			
26	7	5	60	58			
27	7	5	64	54			
28	7	5	64	58			
29	7	5	58	60			
30	7	5	64	56			
31	7	5	64	58			
Aug 1	7	5	72	60			
2	7	5	72	60			
3	7	5	64	60			
4	7	5	70	60			

SICKNESS OF MR. Richard A. Jeffrey.
DIAGNOSIS.

TEMP AM	TEMP PM	
		Appetite very poor.
		Always complaining of Stomach trouble. Slept Night from 12 to 5 a.m. on an average of 6½ hrs
		Says he thinks he is gaining slowly for a few days
		Appetite poor. Bowels as a rule Costive
		Is quiet most of time. Talks fairly rational. Says he has not had any hard drinking for his life
		Eats some little of late. Takes enema of Soapsuds & Glycerine regularly. Bowels has not moved very much. Slept on an average of 6½ hrs Night from 16 to 28th
		Weight 123 lbs.
		Complains of Stomach bothering him. Appetite fairly good.
		Sleeps in a quiet manner during day. Appetite fairly good.
		Bowels have been regular of late. Takes pills Rationally. Vomits a little, about one hour after every meal

Crossed off the Record; was illegally Committed.

(Carried to 308)

Personal and Medical History of Thomas H. Ramsey

Personal and Medical History of Richard A. Jeffrey.

From 332.

SICKNESS OF MR. Richard A. Jeffrey.
DIAGNOSIS.

1894	@ 2.								
DATE	HOUR		PULSE		RESP.		TEMP		
April	AM.	PM.	AM.	PM.	AM.	PM.	AM.	PM.	
2	7	5	70	68					Appetite very poor
3	7	5	72	60					Always complaining of Stomach. Slept Nightly from 10 to 12 hrs. on an average of 6 3/4 hrs.
4	7	5	72	60					Says he thinks he is growing thin for a week past
5	7	5	60	60					
6	7		60						
7	7	5	64	56					
8	7	5	62	58					
9	7	5	68	56					
10	7	5	66	64					
11	7	5	66	56					Appetite poor. Bowels a little costive
12	7	5	68	60					
13	7	5	68	58					
14	7	5	60	68					Is quiet most of time — talks fairly rational — says he has not slept very much during last week
15	7	5	68	64					
16	7	5	64	56					
17	7	5	60	60					Eats small bits of Cake — takes enema of teaspoonful of Soda every other day. Bowels regular Slept on an average of 6 1/2 hrs. nightly from 10 to 12 hrs.
18	7	5	70	56					
19	7	5	64	52					
20	7	5	64	56					Weight 127 lbs
21	7	5	66	56					Complains of Stomach bothering him — appetite fairly good
22	7	5	60	54					
23	7	5	64	60					Sleeps a good deal during the day — appetite fairly good
24	7	5	64	62					
	7	5	72	60					
	7	5	72	60					Bowels fairly regular of late
	7	5	64	60					Talks quite rationally — vomits a little, almost
12	7	5	70	60					after every meal

1893
Jany 8/94.

Crossed off the Records ; was illegally Committed.

May 1/ March 1st

May 1/ "12/ "26/ "31

June 1/3

July 7/3 "31

Aug 1/5 "9 "10 "1[illegible] "17 "20

(Carried to 308)

Personal and Medical History of [illegible]

1893

[illegible]

Crossed off the Records ; was illegally Committed.

Personal and Medical History of Richard A. Jeffrey.

332.

1894 ⊙ 2

SICKNESS OF MR. Richard A. Jeffrey.
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RES AM	RES PM	TEMP AM	TEMP PM
May 11	7	5	64	60				
12	7	5	70	60				
13	7	5	76	60				
14	7	5	70	60				
15	7	5	72	60				
16	7	5	72	60				
17	7	5	68	60				
18	7	5	64	60				
19		5		60				
20	7	5	70	60				
21		5		60				
22	7	5	70	62				
23		5		70				
24	7	5	60	60		14		
25	7	5	68	70				
26	7		64					
27	7	5	60	60				
28	7	5	66	60				
29	7	5	62	62				
30	7	5	64	60				
31	7	5	64	60				
April 1	7	5	64	66				
9	7	5	72	60				
10	7	5	72	60				
11	7	5	64	60				
12	7	5	70	60				

Appetit very poor

Always complaining of headache from 12th to 15th inc on

Slept night through 6½ hrs

an average of 6½ hrs

says he can't hear is going deaf

for a great while

appetite poor Bowels as a rule

Constipated

Is quiet weak talks fairly rational

says he has worked very hard

during last life

Eats small bits of Cake takes enemas

of soapsuds & Glycerine regulars

Slept on an average of 6½ hrs nightly from the 16th to 28th

Weight 137 lbs

Complains Stomach bothering him

appetite fairly good

Feels nauseated during to day appetite fairly

good

Bowels fairly regular of late

take pills naturally Vomits a little, almost

after every meal

(Carried to 308)

Personal and Medical History of Thomas [illegible]

1893

[illegible]

Crossed off the Records ; was illegaly Committed.

Personal and Medical History of Richard A. Jeffrey.

From 332.

March 5/94 Left 123½ pos. March 8 94 Admitted [illegible]

329

DETAILED HISTORY OF SICKNESS OF MR. Richard A. Jeffrey.
DIAGNOSIS.

1894 e.v.

DATE	HOUR	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Feb 12	7	5	72	60				Appetite very poor
13	7	5	66	76				
14	7	5	24	68				Always complainning of
15	7	5	78	56				Slept Nightly from the 12th to 15th inc. on
16	7	5	60	60				an average of 6 3/4 hrs
17	7	5	70	60				Says he has a bad cough
18	7	5	72	56				for a great while
19	7	5	60	60				
20	7	5	72	60				Appetite poor Bowels a little
21	7	5	70	80				costive
22	7	5	66	60				
23	7	5	78	68				Is quiet most talk fairly rational
24	7	5	68	60				Says he has not had any bad
25		5		60				during his life
26	7	5	68	60				
27		5		60				Eats some little of late takes enema
28	7	5	68	68				of soapsuds & 9 by cunn regular
Mar 1	7	5	72	60				Slept on an average of 6½ hrs nightly from the 16 to 28th
2		5		60				
3	7	5	60	60				Weight 121 37 lbs
4	7	5	70	62				
5	7	5	60	60				Complains of stomach bothering him
6	7	5	64	60				appetite fairly good
7	7	5	68	64				
8	7	5	76	60				Feels agreeable during the day appetite fairly
9	7	5	72	60				good
10	7	5	72	60				
11	7	5	64	60				
12	7	5	70	60				Bowels fairly regular of late
								takes pills naturally vomits a little, almost
								after every meal

Aug 10/94. Patient complains of feeling sick at his stomach.

[illegible] as attached nurse's record, of this date). Aug 10/94. Abdomen appears s

(Carried to 308)

332.

...2/94. Wt 123½ pds. March 6/94. Appetite fairly good. Complains, still, of Stomach bothering him a good deal during the day. March 11/94. Bowels are fairly regular of late. Vomits a little, ... Still complains of Stomach giving him distress.

329

DETAILED HISTORY OF SICKNESS OF MR. Richard A. Jeffery
DIAGNOSIS.

1894 @ 2.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Jan 16	7	5	66	52					
17	7	5	66	52					
18	7	5	60	58					Bowels moved during the night
19	7	5	60	52					10.30 " " freely & Patient fatigued.
20	7	5	64	50					
21	7		74						Complains of pain in Stomach.
22	7	5	24	18					Bowels Costive.
23	7	5	60	50					Gave dose for bowels
24	7	5	66	60					Bowels moved freely
25	7	5	68	50					Complains of not feeling as well
26	7	5	66	54					as usual
27	7		72						Vomits after eating. Refuses medicine.
28	7	5	70	56					Suspect mate has sick stomach
29	7	5	64	54					Always complaining of bowels
30	7	5	72	54					
31	7	5	60	50					Bowels Costive gave dose for bowels
Feb 1	7	5	60	64					Slept two hours during the night
2	7	5	78	54					Gave pill 16. Bowels moved
3	7	5	66	58					Weight 121½ lbs.
4									
5	7	5	70	66					Appetite not very good. Raises a good deal of phlegm at times
6	7	5	72	54					
7	7	5	74	60					
8	7	5	74	56					
9	7	5	68	50					
10	7	5	70	58					
11	7	5	70	60					Complains of Stomach and Bowels.

Crossed off the Records; was illegally Committed.

(308)

Personal and Medical History of Thomas H. Ramsey

HERBERT, FUDLAR & CHAMBERS, DAVENPORT, IOWA

1893

Nov 1
" 24
" 23
" 24
" 25
" 26/28
Recd
" 15
" 30/
1894
Jan 7
" 7
" 8

Posted off the records; was foregoing Committed

Personal and Medical History of Richard A. Jeffrey.

From 332.

Mar 8 March 2/94. Wt 123½ pds. March 8/94. Appetite fairly good. Complains, still, of stomach bothering him.
" 11 Sleeps a good deal during the day. March 11/94. Bowels are fairly regular, of late. Vomits a little, almost after every meal. Talks quite rationally. Still complains of stomach giving him distress.
" 12 March 12/94. This patient was Committed here under the "Law of 1893" recently declared unconstitutional. He was, today, Taken out and Returned under new warrant from Olmsted County.
" 14 March 14/94. Says he passed his urine 6 or 7 times, during the night. Bowels fairly regular. Talk is rational.
" 17 March 17/94. Patient lies steadily in bed. Appetite fairly good; bowels fairly regular. Talks quite freely and
" 20/24 rationally. March 20/94. Complains, today, of feeling very poorly & weaker than usual. Mar 24/94. Passes his urine a number of times during the night; seems to have but little control over his urinary organs.—
" 28 March 28/94. Appetite good; bowels have moved freely; Lies quietly in bed & sleeps some during the day.—
" 31 March 31/94. Patient is steadily confined to his bed; remains there quietly. Condition does not change any
Apl 2 April 2/94. Complains a great deal of his bowels & stomach; vomits after almost every meal. Wt 125½ pds.
" 6/9 April 6/94. Complains that bowels paining him & of being cold & feeling sick at his stomach. Apl 9/94. Complains
" 13 of pain in stomach. Bowels have been fairly free, of late. April 13/94. Sleeps, on the average, about 6 hours,
" 17 nightly. Is still confined to his bed; lies quietly there. April 17/94. Sat up in roller-chair, for
" 20 about 2 hours, today. April 20/94. Bowels badly constipated; has to be given enemeta of soapsuds
" 21 & glycerine, quite frequently. April 21/94. Complained, last night, of feeling very weak & thought he
" 22 was going to die. Also complains today of not feeling as well as usual. April 22/94. Was got up
" 24 and put in roller-chair, for a couple of hours, today. April 24/94. Complains of being sick at his
" 30 stomach; vomited some. Was again up, in roller chair, today. April 30/94. Still complains of pains in stomach; bowels very costive; requires frequent enemeta; sleeps nightly, about 6 hours.—
May 1/5 May 1/94. Wt 126 pds. May 5/94. Has been complaining all day. May 6/94. "Thinks he is going to die".
" 12/15 May 12/94. Complaining of his bowels today. May 15/94. Lies steadily in bed. Appetite good; complains of bowels.
" 26/28 May 26/94. Was up, onward & in roller-chair, for about 2½ hours today. May 28/94. Today, asked the
" 31 Dr. "for something to kill himself with". May 31/94. Lies steadily in bed: appetite fairly good;
bowels are quite constipated, at times, requiring frequent Enemata. Patient is on extra diet.—
June 1/30 June 1/94. Wt 125 pds. June 30/94. There is no special change to note, during the month. Patient is still confined to his bed. Sleeps on an average of 9 hours, nightly. Is on special Diet; bowels, constipated, most of the time, requiring frequent enemata: complains, from time to time, of bowels paining him, and,
July 2/3 occasionally of severe pain in rectum. July 2/94. Wt 126½ pds. July 3/94. Threw up his breakfast.
" 31 was visited by a friend, today. July 31/94. Patient is steadily confined to his bed. Sleeps, on the average, 6 hours nightly. Complains, quite often, of severe pains in rectum; occasionally, of feeling sick at his stomach; vomits, at times, after meals. Bowels are constipated, requiring frequent Enemata; passages are, as a rule, slight. (See attached nurse's-record).—
Aug 2/5 Aug 2/94. Wt 131½ pds. (a gain of 5 pounds in flesh, during past month). Aug 5/94. Bowels
" 9 move fairly freely. Is on medicine. Aug 9/94. Appetite good; bowels regular. Always
" 10 complains of distress in his stomach. Aug 10/94. Constipated: given enema: Complains of
" 13/16 feeling sick at his stomach. Aug 13/94. Again making similar complaints. Aug 16/94. Patient
" 17 does not appear well, of late. Aug 17/94. Still complains of feeling sick at his stomach.
" 20 (given Special medicine. See attached nurse's record, of this date). Aug 20/94. Abdomen appears &

(Carried to 308)

Personal and Medical History of Alfred Dahl

EBERT, FIELER & CHAMBERS, DIVENPORT, IOWA



Whole No. 3563.
Residence, #10 – 19½ Ave So. Minneapolis
Date Admission, 22nd November 1893.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John A. Steele Jof P, Hennepin County.
Sex, Male
Age, 31
Civil Condition, married
Children, four
Age Youngest Child, —
Occupation, Engineer
Degree Education, Fair; moderate.
Profession Religion, not a church member
Habits, not intemperate
Nativity, Sweden (parents also born there)
Physicians Committing, A. D. Irwin & Charles Simpson
Correspondents, (sister) Miss Emma Nelson, 3021 20th Ave So

No. for Year, 133.
Insane Relatives, none
Cause Exciting, nothing definite
Cause Predisposing, previous Attack
Form, chronic mania
Accompanying Bodily Disorder, none mentioned in history
Suicidal or Not, not.
Date of this Attack, probably recent
Duration, probably short
No. of Attack, 2nd (three before, see notes).
No. of Admissions, 2nd
Age First Attack, 30 years
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exd by Dr Ely Nov 25/93.

MENTAL CHARACTERISTICS.

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

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

PERCEPTIVITY:
Alert or Dull, fairly alert
Correct or Illusive, correct

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

GENERAL DESCRIPTIVE REMARKS:
Remembers family well, when he was here before + date of leaving.

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

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

HALLUCINATIONS: None noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, coherent
Voluble or Reticent, quite free

Personal and Medical History of Alfred Dahl

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8 in WEIGHT, 107 pounds NUTRITION, somewhat thin; anaemic
WOUNDS OR ABNORMALITIES, ✓
TONGUE, Tremors, none Coatings, quite white Promptness Movement, quite prompt
PUPILS, Equality, Equal Size, somewhat dilated
Response Light, Yes Accommodation, Yes
SIGHT, seems good
HEARING, Good
COORDINATION, Arms,

Case No. 3563. Alfred Dahl. 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.

Ted

Other Reflexes,
ARTICULATION, Hesitating, Quite good Slurred, —
FACIAL EXPRESSION, Good, though he has a somewhat depressed look, at times.
SENSIBILITY, normal
HEART, Sounds are good
LUNGS, Sounds, good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, previous attack ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living — healthy
Father or Pat. Relations, father died of typhoid fever.
Brothers or Sisters, Brothers + sisters living + healthy. —

Personal and Medical History of Alfred Dahl

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3563.
Residence, #10 – 19½ Ave So. Minneapolis
Date Admission, 22nd November 1893.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John A. Steele Jof P, Hennepin County.
Sex, Male
Age, 31
Civil Condition, married
Children, four
Age Youngest Child, —
Occupation, Engineer
Degree Education, Fair; moderate.
Profession Religion, not a church mem
Habits, not intemperate
Nativity, Sweden (parents also born ther
Physicians Committing, A.J. Irwin & Charles C
Correspondents, (wife) Miss Emma Nelson, 3021 20th Ave So

No. for Year, 133.
Insane Relatives, none
Cause Exciting, nothing definite
Cause Predisposing, previous Attack
Form, chronic mania
Accompanying Bodily Disorder, none mentioned in history
Suicidal or Not, not.
Date of this Attack, probably recent
Duration, probably short
No. of Attack, 2nd (three before, see notes).
No. of Admissions, 2nd

EXAMINATION ON ADMISSION.

Exd by Dr Eby Nov 25/93 - MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Quick
MEMORY:
Past Events, seems good
Recent Events, " "
Special Subjects,
PERCEPTIVITY:
Alert or Dull, fairly alert
Correct or Illusive, correct
REASONING POWER:
Ordinary Subjects, good
Own Mental State, Poor
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Remembers fairly well, when he was here before + date of leaving.

EMOTIONAL STATE:
Normal, Calm, Yes
Indifferent,
Exalted,
Depressed, somewhat
DELUSIONS:
Systematized or Not, None detected
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, coherent
Voluble or Reticent, quite free

Personal and Medical History of Alfred Dahl

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8 in. WEIGHT, 107 pounds. NUTRITION, somewhat thin; anaemic
WOUNDS OR ABNORMALITIES, —
TONGUE, Tremors, none Coatings, quite white Promptness Movement, quite prompt
PUPILS, Equality, Equal Size, somewhat dilated
Response Light, Yes Accommodation, Yes
SIGHT, seems good
HEARING, Good
COORDINATION, Arms, } Quite good, by usual tests.
Legs, }
TREMORS, Hands, slight Tongue, none
Facial Muscles, none General, — unnoted
REFLEXES, Patellar, Equal – about 6 or 7 –
Other Reflexes,
ARTICULATION, Hesitating, Quite good Slurred, —
FACIAL EXPRESSION, Good, though he has a somewhat depressed look, at times.
SENSIBILITY, normal
HEART, Sounds are good
LUNGS, Sounds, good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Records kept Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, previous attack ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living — healthy
Father or Pat. Relations, father died of typhoid fever.
Brothers or Sisters, Brothers sisters living are healthy. —

Personal and Medical History of Alfred Dahl

BARLEY, FISCHER & CRANBERG, DAVENPORT, IOWA

1893 Was brought here by Deputy Sheriff James Hines, with the following history. There is no history of consanguinity or heredity. This seems to be 2nd attack, (one occurring about 1 year ago: ⊕ see note below) This present attack is probably recent; shown by a tendency to burn papers; is sleepless. Patient has reasonably rational intervals. Derangement is now manifested on no special subject. There is incoherence in general topics. Is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Previously, he showed an excitable, bad temper. There is no history of intemperance nor of any severe disease or injury to head. Nothing definite known as to cause of disease. Has only had hospital treatment while here before. He refuses to take medicine, yet talks of it all the time, nearly. On personal Exam. Hines found a tendency to spend his money. Has medicine that he takes for 4th permanent. There was incoherence on all subjects. Says "Hines is a law against some men making money". He is incoherent; wears Masonic Emblem, of which he gives no account. Speaks lightly of his condition. Has a vacant expression. Is excitable. Know others, it is learned that he has a tendency to burn papers, without discrimination. Wife earns the money & does not realize his condition.

Note ⊕ Records show that patient was here before, from Dec 24/91 to Dec 26/92. During that period, however, he was home, on trial, for about 8 months. For quite a while, during previous stay, he showed delusions of fear & fright; also hallucinations. Has always quiet & well-behaved. Memory, however, was quite poor, & he showed mental enfeeblement to a moderate degree. Ranked well as Ward (B') & was quiet & pleasant in Conversation. Was improved, when taken home by sister, at last date. —
(See Vol 18. Page 196. No 29014).

Nov 22/93. On admission, was quiet. Temperature 98.2. Pulse 74. Resp 19. Bodily condition quite clean. Was dressed neatly. Has 2 small running sores on legs. Nov 23/93. Slept 8 hours last night & was quiet. AM. Pulse 72. Resp 19. Appetite good; bowels seem regular; no cough noticed. Restless at times and wanting to get out. Talks quite freely. No delusions noted. No complaints or injuries to report. PM. Pulse 76. Resp 19.

Nov 24/93. Rested quite well, sleeping 7 hours, last night. AM. Pulse 72. Resp 18. Is eating but little today. Restless, walking the floor, at times. Is somewhat arrogant and cranky. PM. Pulse 74. Resp 19. Habits are clean.

Nov 25/93. Slept 6 hours, last night; was quiet. AM. Pulse 74. Resp 19. Appetite quite good today. Makes no complaints. PM. Pulse 76. Resp 18. Nov 26/93. Was restless & slept but 5 hours, last night. AM. Pulse 72. Is fairly well-behaved; still somewhat restless. Talks considerably. Reads some. Nov 27/93. Slept only 6 hours last night; was restless. AM. Pulse 74. Appetite medium. Sits about on hall, most of time. Talks but few delusions. Nov 28/93. Was restless & noisy last night and slept only 3 hours. AM. Is quite restless; walking the hall; still deluded. (Sores are not so bad as at time of his coming).

Nov 29/93. Slept only 3 hours, last night; was very restless. AM. Pulse 72. Conduct & behavior, about as yesterday. Is clean tidy & of good personal habits. Dec 1/93. AM 116½ pds. (9½ pds loss). Pulse 70

Dec 5/93. During past 6 nights, patient has continued restless & noisy, & has slept only 5 or 6 hours, each night. Pulse has been normal (about). He has also continued restless by day, walking the floor, a good deal; at times, has also been somewhat boisterous. Appetite has been good. Bowels some; talks with his fellow patients; is still deluded. Dec 6/93. Restless all last night; slept none. Restless by day. Stands about occasionally, with eyes shut. Patient is steadily the same; cannot realize why here; deluded; dull mentally; ideas perverted. Is pallid, but fairly strong.

…8/93. Restless 6 hours, sleeping but 2 hours, last night. Has a small sore on leg (see) …, at times, incoherent and he also … 2 nights, sleeping only about 4 hours … quiet & well-behaved; makes no … Has a sore on leg that heals … Coming here. —

…ndly today; shows delusions. …condition. Still shows …

…is quite loudly and …. Habits are clean. …nerally Declared …nder "New Warrant".

…s, nearly all the time. Is in- … all manifests his delusions. — … & boisterous today; much deluded. … about; Doug no work at all now. …nasonical letter. Does not go out …ions. Habits are clean. …much, if any. Appetite is …e. Is cranky. …ly. — …today. — …B'. — …ined to talk at …very good. — …if any …ndolent. …Appetite poor. …pecial & Repd. …l-behaved — …ard-work. …inclined to …90. Tx 99.2 …ing) wake-

Oct 1st.	Temp	99				
"	"	98 2/5				
" 2	"	99				
Oct 2	Wt 110		Pulse 96			
" 3 a.m.	Temp	98 4/5	" 120	Resp	19	8 a.m.
" 3 —	"	99	" 104	"	20	6 p.m.
" 4	"	98	" 108	"	19	8 a.m.
" 4	"	98 2/5	" 114	"	18	6 p.m.
" 5	"	99	" 102	"	19	7.30 a.m.
	"	99	" 100	"	18	5 p.m.

Oct. 1 Transferred to C. 2, E.

Oct 7 Oct 1/94. Wt 110 pds. Pulse 95. Oct 7/94. See attached records of Pulse &c. Patient has been failing and growing weaker. He was, today, transferred to C.² ("the Sick Ward") — (remained in bed today — Pulse 110. R 19. T 100. Still shows many delusions — Complains of feeling unwell).

" 8 Was put to bed in C². Oct 8/94. Appetite quite good; bowels regular. Tubercular osteomyelitis

(carried to 1892)

EHRET, FISCHER & CHANDLER, DAVENPORT, IOWA

1893

Was brought here by Deputy Sheriff James Hines, with the fo
consanguinity or heredity. This seems to be 2nd attack, (se
This present attack is probably recent; shown by a tendency t
reasonably patinal intervals. Derangement is now man
incoherence in general topics. Is neither disposed to injure
previously, he showed an excitable, bad temper. There is no his
or injury to head. Nothing definite known as to cause of d
while here before. He refuses to take medicine, yet talks q
Hines found a tendency to spend his money. Has mede
incoherence in all subjects. Says "Hines is always aga
-table of giving three answers to any question. Su
sistant; wears Masonic Emblem, of which he gives
Has a vacant expression. Excitable. Knows others,
papers, without discrimination. Wife fears the m

Note ⊕ Records show that patient was here before, from Dec 7th
he was home, on trial, for about 8 months. Is quite a u
of fear & fright; also hallucinations. Was always quiet
poor, & he showed mental enfeeblement to a modera
quiet & pleasant in conversation. Was improved, w
(See Vol 18. Page 196. No. 29011).

Nov Nov 22/93. On admission, was quiet. Was put on B².
" 23 Was dressed neatly. Has 2 small running sores on le
quiet. AM. Pulse 72. T. 99. Appetite good; bowels reg
wanting to get out. Talks quite freely. No delusions
" 24 Nov 24/93. Rested quite well, sleeping 7 hours, last night
Restless, walking the floor, at times. Is somewhat arroga
" 25 Nov 25/93. Slept 6 hours, last night; was quiet. AM.
" 26 Complaints. PM. Pulse 76. T. 98.6. Nov 26/93. Was rea
" 27 Is fairly well-behaved; still somewhat restless. Talks
6 hours last night; was restless. AM. Pulse 74. Appetite rues
" 28 Talks but shows delusions. Nov 28/93. Was restless & noisy last night and slept only 2 hours. AM.
Is quite restless; walking the hall; still deluded. (Sores are not so bad as at time of his coming).
" 29 Nov 29/93. Slept only 3 hours, last night; was very restless. AM. Pulse 72. Conduct & behavior, about
as yesterday. Is clean tidy & of good personal habits. Dec 1/93. AM. 116½ /p 28. (9½ /p 9 min). Pulse 70
Dec 5/93 Dec 5/93. During past 6 nights, patient has continued restless & noisy, & has slept only 2 or 3 hours,
each night. Pulse has been normal (about). He has also continued restless by day, walking the
floor a good deal; at times, has also been somewhat boisterous. Appetite has been good. Converses
" 6 some; talks with his fellow patients; is still deluded. Dec 6/93. Restless all last night; slept none.
Restless by day. Stands about occasionally, with eyes shut. Patient is steadily the same; can-
not realize why here; deluded; dull mentally; ideas perverted. Is pallid, but fairly strong.

Please Notify
those Minneapolis
Pupils that no looker
after us that there
looking after us is
no longer required
Sance they have gone
no more —
ask where perfect
for her dear and
Speak + 2 hears
I wish I was better
Come + we go just
so free that I wish
myself to be as
Come and we go
I have directed this
ter writer and we
wish us good health
and freedom to go
and home for us
hear act supp

Alfred Dahl
Minneapolis
Minn

Dec 8/93. Restless 6 hours, sleeping but 2 hours,
, last night. Has a small sore on leg (see)
Ik, at times, incoherent and he also
t 2 nights, sleeping only about 4 hours
be quiet & well-behaved; makes no
Has a sore on leg that heals
niece coming here. —
loudly today; shows delusions.
is condition. Still shows

talks quite loudly and
ent. Habits are clean.
recently declared
der "New Warrant"
ally all the time. Is in-
manifests his delusions. —
sy & boisterous today; much deluded.
sits idly about; Doing no work at all now.
ne. Writes an occasional letter. Does not go out
Still holds to his delusions. Habits are clean.
10. Apl 3/94. Does not change much, if any. Appetite is
c. Is cranky.
ily. —
today. —
13. —
ined to talk at
very good. —
if any
indolent.
Appetite poor.
Special Dr Dept.
-behaved —
ard - work.
inclined to
20. Tr 99.2
ing) weak-

Oct 1st.	Temp 99	Pulse 130,	7 am		
"	" 98 2/5	" 90	6 pm		
" 2	" 99	" 96	8 am		
Oct 2	WK 110	Pulse 96			
" 3rd	Temp 98 4/5	" 120	Resp. 19 — 8 am		
" 3 —	" 99	" 104	" 20	6 pm	
" 4	" 98	" 108	" 19	8 am	
" 4	" 98 2/5	" 114	" 18	6 pm	
" 5	" 99	" 102	" 19	730 am	
"	" 99	" 100	" 18 —	5 pm	

Oct. 7 Transferred to C. 2, E.

Oct 7 Oct 7/94. Wt 110 /p. Pulse 95. Oct 7/94. See attached records of Pulse &c. Patient has been failing and growing weaker. He was, today, transferred to C.² ("the Sick Ward") - (Remained in bed today - Pulse 110. R 19. T. 100. Still shows many delusions - Complains of feeling unwell).
" 8 Was put to bed in C⁷. Oct 8/94. Appetite quite good; bowels regular. Tubercular Osteomyelitis
(carried to 1895)

Rockester March 16-95

Secretis Missionery asst
Revs A. G. Skogsberg Paster
the Rwords goo to Show
Congration in Good Standing
in Lodge number 10
in on or around the Globe

Alfred Dahl
Recording Secretary
Minnesota Free Masons

Doctor Herzog

1893 Was brought here by Deputy Sheriff Jame[illegible] consanguinity or heredity. This seems to[illegible] This present attack is probably recent; [illegible] reasonably rational interval. Deranged[illegible] incoherence in general topics. Is neither [illegible] Previously, he showed an excitable, bad temp[illegible] or injury to head. Nothing definite known[illegible] while here before. He refuses to take medi[illegible] There is found a tendency to speed his mo[illegible] incoherence in all subjects. Says "Thre[illegible] -pable of giving three answers to any[illegible] instant; wears Masonic Emblem, of w[illegible] Has a vacant expression. Is excitable. [illegible] papers, without discrimination. Wife [illegible]

Note ⊕ Records show that patient was here before, [illegible] he was home, on trial, for about 8 months. [illegible] of fear & fright; also hallucinations. Was als[illegible] poor, & he showed mental enfeeblement [illegible] quiet & pleasant in Conversation. Was [illegible] (See Vol 18. Page 196. No. 29014).

Nov 22/93. On admission, was quiet. Was
" 23 Was dressed neatly. Has a small running [illegible] quiet. Aff. Pulse 72. Tr 99. Appetite good; bowels [illegible] wanting to get out. Talks quite freely. No delusions [illegible]
" 24 Nov 24/93. Rested quite well, sleeping 7 hours, last night [illegible] Restless, walking the floor, at times. Is somewhat arrogan[illegible]
" 25 Nov 25/93. Slept 6 hours, last night; was quiet. Aff. [illegible]
" 26 Complaints. Pill. Pulse 76. Tr 98. Nov 26/93 Was restl[illegible]
" 27 Is fairly well-behaved; still somewhat restless. Talks [illegible] 6 hours last night; was restless. Aff. Pulse 74. Appetit[illegible]
" 28 Talks but shows delusions. Nov 28/93. Was restless & noisy last [illegible] Is quite restless; walking the hall; still deluded. (Fores are not so bad as at time of his Coming).
" 29 Nov 29/93. Slept only 3 hours, last night; was very restless. Aff. Pulse 72. Conduct & behavior, about as yesterday. Is clean tidy & of good personal habits. Dec 1/93. Aff 116½ /98. (9½ /82 Sein). Pulse 70
Dec 5/93 Dec 5/93. During past 6 nights, patient has continued restless & noisy, & has slept only 2 or 3 hours, each night. Pulse has been normal (about). He has also continued restless by day, walking the floor, a good deal; at times, has also been somewhat boisterous. Appetite has been good. Bowels
" 6 some; talks with his fellow patients: is still deluded. Dec 6/93. Restless all last night; slept none. Restless by day. Stands about occasionally, with eyes shut. Patient is steadily the same; Cannot realize why here; deluded; dull mentally; ideas perverted. Is pallid, but fairly strong.

Some one will go
I have directed this
to Brother and we
will be good Lodge
and friends go
and bone
hear act

Dec 8/93. Restless 6 hours, sleeping but 2 hours, [illegible] last night. Has a small bone on leg (see) [illegible] at times, incoherent and he also [illegible] 2 nights, sleeping only about 4 hours [illegible] quiet & well-behaved; makes no [illegible] Has a bone on leg that breaks [illegible] Quiet Coming here. —
[illegible] loudly today; shows delusions. [illegible] condition. Still shows

Talks quite loudly and [illegible] Habits are clean. [illegible] recently Declared [illegible] New Warrant. [illegible] all the time. Is ci- [illegible] manifests his delusions. — [illegible] & boisterous today; much deluded. [illegible] idly about; Does no work at all now. [illegible]. Writes an occasional letter. Does not go out [illegible] still holds to his delusions. Habits are clean. [illegible] April 30/94. Does not change much, if any. Appetite is [illegible] c — Is cranky; [illegible] ly. — [illegible] today. — [illegible] B! — [illegible] to talk at [illegible] very good. — [illegible] If any [illegible] indolent [illegible] Appetite poor. [illegible] special Regt [illegible] well-behaved — [illegible] ward-work. [illegible] inclined to [illegible] 90. Tr 99½ [illegible] ng) weake-

Oct 1st.	Temp	94	Pulse	130,	7 am
"	"	98 2/5	"	90	6 pm
" 2	"	99	"	96	8 am
Oct 2	Wt	110	Pulse	96	
" 3 9	Temp	98 4/5	"	120	Resp. 19 — 8 am
" 3 —	"	99	"	104	" 20 6 pm
" 4	"	98	"	108	" 19 8 am
" 4	"	98 2/5	"	114	" 18 6 pm
" 5	"	99	"	102	" 19 7:30 am
	"	99	"	100	" 18 — 5 pm

Oct. 7 Transferred to C. 2. E.

Oct 7/94 Oct 1/94 Wt 110 lbs. Pulse 96 - Oct 7/94. See attached record of Pulse &c. Patient has been failing and growing weaker. He was, today, transferred to C.2 ("the Sick Ward") - (Remained in bed today - Pulse 110. R 19 - Tr 100 - Still shows many delusions — Complains of feeling unwell).
" 8 Was put to bed in C7 - Oct 8/94. Appetite quite good; bowels regular. Tubercular osteomyelitis
(carried to 1192)

HERBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Deputy Sheriff Jame-
consanguinity or heredity. This seems to-
This present attack is probably recent; sh
reasonably rational intervals. Deranger
incoherence in general topics. Is neither
Previously, he showed an excitable, bad temp
or injury to head. Nothing definite known
while here before. He refuses to take medi
There is found a tendency to spend his mo
incoherence in all subjects. Says "Hu
-sible of giving three answers to any
existant; wears Masonic Emblem, of w
Has a vacant expression. Is excitable
papers, without discrimination. Wife
Note ⊕ Record show that patient was here before,
he was home, on trial, for about 8 months.
of fear & fright; also hallucinations. Has als
poor, & he showed mental enfeblement
quiet & pleasant in Conversation. Was
(See Vol 18. Page 196. No. 7901+).

Nov Nov 22/93. On admission, was quiet. Was
" 23 Was dressed neatly. Has a small runn
quiet. Att. Pulse 72. Tp 99. Appetite goo
wanting to get out. Talks quite freely, h
" 24 Nov 24/93. Rested quite well, sleeping 7 hour
Restless, walking the floor, at times. Is somewhat arrogant
" 25 Nov 25/93. Slept 6 hours, last night; was quiet. Att. Pulse
" 26 Complaints. Att. Pulse 76. Tp 98.8. Nov 26/93 Was restless
" 27 Is fairly well-behaved; still somewhat restless. Talks c
6 hours last night; was restless. Att. Pulse 74. Appetite
" 28 Talks but shows delusions. Nov 28/93. Was restless & noisy last
Is quite restless; walking the hall; still deluded. (Sores are not so bad as at time of his Coming)
" 29 Nov 29/93. Slept only 3 hours, last night; was very restless. Att. Pulse 72. Conduct & behavior, about
as yesterday. Is clean tidy & of good personal habits. Dec 1/93. Att 115½ pds. (9½ pds gain). Pulse 70
Dec 5/93 Dec 5/93. During past 6 nights, patient has continued restless & noisy, & has slept only four hours,
each night. Pulse has been normal (about). He has also continued restless by day, walking the
floor, a good deal; at times, has also been somewhat boisterous. Appetite has been good. He eats
" 6 some; talks with his fellow patients; is still deluded. Dec 6/93. Restless all last night; slept none.
Restless by day. Stands about occasionally, with eyes shut. Patient is steadily the same; can-
not realize why here; deluded; dull mentally; ideas perverted. Is pallid, but fairly strong.

3/16/94

Doctor Herzog

the Recrd goes to Show
they will not let her Speak
with me, or ells I have made
her ashamed about her self
Send her to Speak with me
we are 2 to eat from the
Same Same Dish there is no use
in Speaking see—
we are 2 to Sleep in the
Same Same bed there is no use
in fooling me

Alferd. Dahl.
Recording Secretary
Minnesota Free Masons

Her brother and wife must be sent for and [illegible] and home [illegible] act[illegible]

1893

Dec 7/93 Dec 7/93. Slept but 5 hours; restless 3 hours; last night. Dec 8/93. Restless 6 hours, sleeping but 2 hours,
" 10 last night. Dec 10/93. Restless 3 hours, sleeping only 5 hours, last night. Has a small Sore on leg (See)
" 15 Dec 15/93. Appetite poor. Patient is quite well behaved. Talk, at times, incoherent and he also
" 22 shows delusions. Dec 22/93. Has been very restless the past 2 nights, sleeping only about 4 hours
" 31 a week. Dec 31/93. Patient's Condition does not Change much. Is quiet & well-behaved; makes no
Complaints. Appetite medium now. He still manifests delusions. Has a sore on leg that breaks
out occasionally. Physical health has somewhat improved, since Coming here. —

1894
Jan 2/94 Jan 2/94. Wt 117 pds. Pulse 86. Jan 14/94. Is talking quite loudly today; shows delusions.
" 21 Jan 31/94. Appetite only fairly good. No noticeable Change in his condition. Still shows
delusions. Does not work or go out walking.

Feb 7/94 Feb 7/94. Wt 118 pds. Pulse 86. Feb 21/94. No material Change. Talks quite loudly and
boisterously, at times. Still manifests delusions. Does no work. Habits are clean.
" 24 Feby 24/94. This Patient was Committed here under the "Law of 1893" recently Declared
unconstitutional. He was, ~~to-day~~, Taken out and Returned under "New Warrant"
from Olmsted County. Feb 28/94. Sits about on the benches, nearly all the time. Is si-
" 28 lent; does not work any. Reads some; talks fairly freely; but still manifests his delusions. —

Mar 7/94 March 7/94. Wt 118 pds. Pulse 88. March 15/94. Is noisy & boisterous today; much deluded.
" 31 March 31/94. Apparently rests well, at night. Still sits idly about; Does no work at all now.
Talks very loudly, at times. Plays games some. Writes an occasional letter. Does not go out
walking, with the rest. Reads some. Still holds to his delusions. Habits are clean.

Apr 30 Apl 2/94. Wt 118 pds. Pulse 90. Apl 30/94. Does not change much, if any. Appetite is
c°. Is cranky;
ly. —
today. —
13. —
ued to talk at
very Good. —
of any
indolent.
Appetite poor.
Special Report
l-behaved —
ard-work.
ucluded to
90. Tp 99 ½
ing) water-

Oct 1st.	Temp	99	Pulse	130.	7 am
"	"	98 2/5	"	90	4 pm
" 2	"	99	"	96	8 am
Oct 2	Wt 110		Pulse	96	
" 3 a.m.	Temp	98 4/5	"	120	Resp. 19 — 8 am
" 3 —	"	99	"	104	" 20 6 pm
" 4	"	98	"	108	" 19 8 am
" 4	"	98 2/5	"	114	" 18 6 pm
" 5	"	99	"	102	" 19 7:30 am
	"	99	"	100	" 18 — 5 pm

Oct. 7 Transferred to C. 2, E.

Oct 7 Oct 1/94 Wt 110 pds. Pulse 95. Oct 7/94. See attached records of Pulse &c. Patient has been failing
and growing weaker. He was, today, transferred to C.2 ("the Sick Ward") — (Remained in bed
today — Pulse 110. R 19. Tp 100 — Still shows many delusions — Complains of feeling unwell).
" 8 was put to bed in C.2. Oct 8/94. Appetite quite good; bowels regular. Tubercular osteomyelitis
(carried to 7192)

HERBERT, FISCHER & EICKBERG, DAVENPORT, IOWA

1893

Was brought here by Deputy-Sheriff Jame
consanguinity or heredity. This seems to
This present attack is probably recent; sh
reasonably rational intervals. Derangem
incoherence in general topics. In either
Previously, he showed an excitable [illegible]
or raging to lead. Nothing defi
while here before. He refuses
There is found a tendency
incoherence in all
- table of giving th
sistant; wears M
Has a vacant
papers, with
Note. Record sh
he was hon
of fear
poor,
quiet & pe

(See Vol 18.

Nov 22/93. On adm
Was dressed neatly. Wa
quiet. Appt. Pulse 72. T 99.
wanting to get out. Talks quite
Nov 24/93. Rested quite well, sleeping 7
restless, walking the floor, at times. Is somew
Nov 25/93. Slept 6 hours, last night; was quiet.
Complaints. Appt. Pulse 76. T 98.8. Nov 26/93. Was re
Is fairly well-behaved; still somewhat restless. Talks Co
6 hours last night; was restless. Appt. Pulse 74. Appetite
Talks but shows delusions. Nov 28/93. Was restless & noisy la
Is quite restless; walking the hall; still deluded. (Sores are abo
Nov 29/93. Slept only 3 hours, last night; was very restless. Appt. Pulse 72.
as yesterday. Is clean tidy & of good personal habits. Dec 1/93. Wt 116½ pds. (9½ pds / mo). Pulse 70
Dec 5/93. During past 6 nights, patient has continued restless & noisy, & has slept only 2 or 3 hours
each night. Pulse has been normal (about). He has also continued restless by day, walking the
floor, a good deal; at times, has also been somewhat boisterous. Appetite has been good. Bowels
Dec 6/93. Restless all last night; slept some.
restless by day. Stands about occasionally, with eyes shut. Patient is steadily the same;
- not realizing why here; deluded; dull mentally; ideas perverted. Is pallid, but fairly strong.

Doctor Herzog

the Recrd goes to Show
they will not let her Speak
with me or ells I have made
her ashamed about her self
Send her to Speak with me
we are 2 to eat from the
me Same Dish there is no use
breaking see
2 to Sleep in the
ne bed there is no use

Dahl

ry

e

3/16/94

1893

Dec 1/8 Dec 7/93. Slept but 5 hours; restless 3 hours; last night. Dec 8/93. Restless 6 hours, sleeping but 2 hours,
" 10 last night. Dec 10/93. Restless 3 hours, sleeping only 5 hours, last night. Has a small sore on leg (see
" 15 Dec 13/93. Appetite poor. Patient is quite well behaved. Talks, at times, incoherent and he also
" 22 shows delusions. Dec 22/93. Has been very restless the past 2 nights, sleeping only about 4 hours
" 31 a week. Dec 31/93. Patients Condition does not change much. Is quiet & well-behaved; makes no
complaints. Appetite medium now. He still manifests delusions. Has a sore on leg that breaks
out occasionally. Physical health has somewhat improved, since coming here.

1894
Jan 2/14 Jan 2/94. Wt 117 pds. Pulse 86. Jan 14/94. Is talking quite loudly today; shows delusions.
" 31 Jan 21/94. Appetite only fairly good. No noticeable change in his condition. Still shows
delusions. Does not work or go out walking.

Feb 7/21 Feb 1/94. Wt 118 pds. Pulse 86. Feb 25/94. No material change. Talks quite loudly and
boisterously, at times. Still manifests delusions. Does no work. Habits are clean.
" 24 Feb 21/94. This patient was committed here under the "Law of 1893" recently declared
unconstitutional. He was, ~~today~~, Taken out and Returned under "New Warrant"
" 28 from Olmsted County. Feb 28/94. Sits about on the benches, nearly all the time. Is si-
-dolent; does not work any. Reads some; talks fairly freely; but still manifests his delusions.

Mar 2/21 March 2/94. Wt 118 pds. Pulse 88. March 12/94. Is noisy & boisterous today; much deluded.
" 31 March 31/94. Apparently rests well, at night. Still sits idly about; Does no work at all now.
Talks very loudly, at times. Plays games some. Writes an occasional letter. Does not go out
walking, with the rest. Reads some. Still holds to his delusions. Habits are clean.

Apr 2/30 Apl 2/94. Wt 119 pds. Pulse 90. Apl 30/94. Does not change much, if any. Appetite is
good; bowels apparently regular. Still deluded. Says "Drs are all murderers &c" - Is cranky;
seldom goes out for a walk. Does no work in the ward. — Habits are cleanly. —

May 1/16 May 1/94. Wt 117½ pds. Pulse 76. May 6/94. Is talking a lot of "nonsensical trash"; today. —
" 18 May 18/94. No noticeable change in his condition. Is still much deluded. Transfered to B1 —
" 31 May 31/94. Is quiet & well-behaved. Has "spells" when he acts very stupidly; is not inclined to talk at
times. Is quite forgetful. Appetite is poor; bowels regular. Physical health not very good. -

June 1 June 1/94. Wt 113 pds; (has been losing in flesh, the past 2 months, yet does not complain of any
" 30 serious ill-feeling). Pulse 92. June 30/94. No special change. Has many delusions. Is indolent.

July 4 July 4/94. Wt 108 pds (still losing quite markedly in flesh, month by month). Pulse 86. Appetite poor.
" 18/31 July 18/94. Sore on left leg is very slow in healing. July 31/94. Beyond loss of flesh, nothing special to report.

Aug 1/31 Aug 1/94. Wt 109 pds. Pulse 93. Appetite good; bowels regular. Aug 31/94. Well-behaved -
Has all sorts of delusions. Trifled with sores on his left leg. Helps a little with ward-work.

Sep 3/30 Sep 3/94. Wt 110 pds. Pulse 106. Sep 30/94. No special change; Behaves well. Is much inclined to
be alone - appetite is poor, for some time past. Yes today, he vomited his dinner. Pulse 100. T 99.2
7 PM (today). Pulse 112. T 99.4 Patient still has many delusions. Physically, is (doing) weake-

Oct 2/ Oct 1/94. Wt 110 pds. Pulse 95. Oct 7/94. See attached records of Pulse &c. Patient has been failing
and growing weaker. He was, today, transferred to C.2 ("the Sick Ward") - (Remained in bed
today - Pulse 110. R 19. T 100 - Still shows many delusions - Complains of feeling unwell).
" 8 was put to bed in C7 - Oct 8/94. Appetite quite good; bowels regular. Tubercular osteomyelitis
(carried to 1892)

Personal and Medical History of John F. Sullivan

SEBERT, PULLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3565.

Residence, Stillwater, Minn.

Date Admission, 23rd November 1893.

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

How Sent, Rudolph Schmicke Jr. Washington County

Sex, Male

Age, 20

Civil Condition, Single

Children,

Age Youngest Child, —

Occupation, Book-Keeper

Degree Education, Graduate of St. John's University.

Profession Religion, Catholic

Habits, Smoking & intemperate, Opium said known.

Nativity, Iowa; (Parents born in Ireland).

Physicians Committing, P. H. Caines and W. C. Wright.

Correspondents, (Nearest friend) D. J. Sullivan, Stillwater, Minn.

Family Physician Dr. S. C. Johnson. Hudson.

No. for Year, 135.

Insane Relatives, None

Cause Exciting, Date from disappointment in going to Military Academy of U.S. West Point, on account of color blindness

Cause Predisposing, not stated

Form, for many days

Accompanying Bodily Disorder, has had Epileptiform Spasms

Suicidal or Not, Not attempted, but frequently active here

Date of this Attack, about 5 years ago

Duration, about 5 years - off & on -

No. of Attack, Many (one, abt 5 yrs ago & frequently since)

No. of Admissions, 1st

Age First Attack, about 15 years.

Time of Leaving, Feb 10 '94

Time in Hospital, 8 mo. 17 da

Result, Imp.

Crossed off from discharge 1st April 1894 because illegally committed.

EXAMINATION ON ADMISSION.

Exd by Dr Phelps. Nov 27/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Seemingly accurate

Quick or Sluggish, Quite prompt

MEMORY:

Past Events, Good, except for certain

Recent Events, periods.

Special Subjects,

PERCEPTIVITY: Fairly Good, at present.

Alert or Dull,

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Fairly Good, at present

Own Mental State,

Special Subjects,

EMOTIONAL STATE:

Normal, Calm, Normal

Indifferent,

Exalted,

Depressed,

DELUSIONS: None noted and he

Systematized or Not denies those mentioned

Special Subjects, in history.

Transitory or Not,

HALLUCINATIONS: None brought out.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free

GENERAL DESCRIPTIVE REMARKS:

Admits he had 3 such attacks, previous ones have been milder. Says is troubled with headaches; these last about 2 wks once; has got feverish with them; headaches more selfpride; but has not been obliged to get to bed from them; these commenced to show themselves some 5 or 6 years ago. Troubled with Cough the last 2 yrs, also some dyspepsia. Says has this Continuous desire to move about, realizes but little then; has no purpose for this moving. The headaches mentioned he describes as at back of head, base of brain; of a neuralgic nature. Acknowledges some nervousness, nervousness. Caused by overwork & followed by attacks of trance state, described by himself. (Some occasion travelling in California

Personal and Medical History of John F. Sullivan

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11 in WEIGHT, 144 lbs NUTRITION, Seems quite good, tho' quite pale.

WOUNDS OR ABNORMALITIES, Probably none

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

PUPILS, Equality, Equal (sometimes of eye lids). Size, quite markedly dilated

Response Light, fairly good Accommodation, Yes

SIGHT, Short-sighted; probably astigmatism

HEARING, Good

COORDINATION, Arms, } slightly unsteady; finger to nose, eyes shut, some inaccuracy with rt. hand;

Legs, } better with left, Standing on one foot, slight incoordination; Standing, eyes shut, sways some.

TREMORS, Hands, some Tongue, Slight

Facial Muscles, some of eyelids General,

REFLEXES, Patellar, equal; about q. -

Other Reflexes, some ankle clonus —

ARTICULATION, ~~Hesitating~~, Quite good Slurred,

FACIAL EXPRESSION, normal

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Quite long ONSET GRADUAL OR SUDDEN, Sudden (he says).

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters, No history of heredity

EBBERT, PUCLAN & BRANDSER, DAVENPORT, IOWA.

1893

This man was brought here by Sheriffs-Deputy Charles Anderson, attended by Dr. St. Carnes. M.D. with the following history. There is no history of consanguinity or heredity. This is not 1st attack They occurred about 5 years ago & frequently since; duration sometimes, for weeks; never was at hospital. First symptoms of this attack were manifested while teaching School, about 5 years ago; suddenly left home, and his whereabouts was not known for 5 (five) months. Disease seems increasing, but is variable and there are rational intervals, though with no regularity. Derangement is now shown, with subject of travel, which has taken him away from home & business frequently; also on the subject of music; also imagines there is a large sum of money awaiting him somewhere. He has shown disposition to injure others. Has not attempted suicide, but propensity is now active. Is not filthy & destructive. Previously, he showed a predominant passion for study & literature. There is no history of intemperance, so far as known. Patient has had several Epileptiform spasms. Has not been restrained or confined. The cause of the disease dates from disappointment in going to Military Academy of U.S. at West Point, owing to Color-blindness. He had no treatment except as sought by himself.

On personal examination, there are found extreme nervousness & irresistible desire to leave home, and wander about for indefinite period; sudden expressions of fear that he is going to do harm. He said he had an irresistible desire for motion & to travel; that he would take strolls & walk for miles & hours, not knowing where he was or caring where; that everything was oblivious, except he realized that he existed. He answered questions without serious objection, although his countenance indicated suspicion that he was thought to be mentally wrong. Appearance and manner were nervous & excitable. Four weeks ago, on Oct 28th, he threatened to kill his sister; warned his people to keep away from him, fearing himself, that he might injure them; having special dislike for his brother. Two sharpened knives were found under the Commode, in his bedroom. His actions clearly indicate inability to resist the desire to exercise them.

Nov 23 Nov 23/93. On admission, is in quite good physical condition. Has patient to C2. Bodily condition good; is clean. No injuries or peculiarities noted. Nov 24/93. Slept well, last night. AM. Pulse 80. Appetite good; bowels regular. Has a chronic cough. Has been up, on ward, all day; very quiet; talks but little. Is very neat in appearance. Inclined to read a great deal. Is in apparently good physical condition. PM. P 72.

" 25 Nov 25/93. Quiet; slept 7 hours, last night. Up, on ward, all day. Amuses himself by reading, playing Card & checkers. (Today, received a package from his mother, containing a complete toilet set, cigars candy &c). Nov 26/93. Rested & slept apparently well, last night. Today, is up, on ward, as usual. Spends his time, on ward, as above mentioned; Went to Chapel today. Seems quite happy & contented.

" 27/28 Nov 27/93. AM. Pulse 80. Converses quite freely & rationally. PM. Pulse 78. Nov 28/93. Pulse AM 102. Is quiet & well-behaved, though somewhat restless, at times. Talks a great deal about himself, & about his travels. PM. Pulse 108. Nov 29/93. AM. Pulse 90. Does not want to go out walking

" 29 with the other patients. PM. Pulse 96. Nov 30/93. Since last noted, has continued to eat and

" 30 sleep well, at night. Appetite has been uniformly good; bowels regular. AM. Pulse 106. Says "he would like to be at home today", yet seems fairly Contented. PM. Pulse 108.

Dec 1/2 Dec 1/93. AM. Pulse 88 PM. 78 Dec 2/93. AM. Pulse 80 Inj — PM. Pulse 94 Inj —

" 3/4/5 Dec 3/93. AM. " 76 PM 80 Dec 4/93. AM. " 86 PM Pulse 92 Dec 5/93. AM. P 82 PM P 78.

" 6/7 Dec 6/93 AM " 78 PM 72 Dec 7/93. AM " 88 PM " 92. During this, the second week

1893

Dec 7 (Contd) patient's rest and sleep, at night, have continued quite good. Appetite has continued uniformly good; bowels normal. Is always very neat and tidy in habits. Does not care to go out walking; Spends most of his time on ward, either at playing cards or reading. On one or two occasions has become somewhat excited, showing a bad temper. Coughs some; says "he has had a slight cough, for years". Has complained occasionally of a pain across his hips. Appears fairly well posted on the ways of the world. From his talk, one would think he had been quite well. Seems fairly well contented here; thinks he is improving. Writes quite a number of letters

" 10 to his relatives & friends. Does no work. No medicine. Dec 10/93. Complains of

" 15 having some difficulty in passing his urine. Dec 15/93. Coughs a little, at times. Talks freely & pleasantly; sings; plays cards &c. Appetite fairly good. Bowels regular.

" 20 Is now on medicine. Dec 20/93. Has a cold today. Coughs more than usual, and

" 25 Complains of headache. Dec 25/93. Shows a very bad temper, at times. Wants to have his own way. Says "he does not have to obey the rules of the ward" & is quite abusive, when he

" 31 gets started. Dec 31/93. Appetite not very good. Still complains of a bad cold. Goes out walking - Does considerable Correspondence with relatives & friends. Is very neat in dress. But does not seem as "right" as some time ago.

1894

Jan 2/10 Jan 2/94. Wt 136½ pds. (Is not as fleshy as on admission) - Jan 10/94. Of late, seems very independent; thinks himself "a privileged Character" - (Attendant remarks that he is not a very desirable patient for this "Sick Ward") - Jan 15/94. Transferred to B2 today. Patient

" 15 did not like the change. Takes his meals still in C2 - Jan 31/94. Rather independent,

" 31 but has had no trouble since coming on this ward. Is still very neat about his dress & person.

Feb 1 Feb 1/94. Wt 146 pds. (Quite a gain in flesh in past month). Pulse 76. — " —

" 8 Feb 8/94. Not feeling very well, remained in bed part of the day. On getting up, felt better.

" 10 Feb 10/94. Went home today, alone —

— Crossed off the Records; was illegally Committed —

Personal and Medical History of Christ Wolf

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3571.
Residence, Poor-Farm, Muscatine County.
Date Admission, 25th November 1893.
Admitted by, Dr Pfeiffer Hour, 7 P.M.
How Sent, H. L. Buck, Jof S, Muscatine County.
Sex, Male
Age, 51
Civil Condition, married
Children, 1 daughter
Age Youngest Child,
Occupation, Carpenter
Degree Education, Limited to reading & writing.
Profession Religion, Presbyterian
Habits, Not intemperate, so far as known
Nativity, Switzerland (parents also born there).
Physicians Committing, Jno. S. Tracy and L. A. Kelly
Correspondents,

No. for Year, 141.
Insane Relatives, an uncle, a father's side, was insane
Cause Exciting, no known cause; has had chorea for years.
Cause Predisposing, probably some head injury (some years ago)
Form, chronic dementia
Accompanying Bodily Disorder, Chorea for years
Suicidal or Not, Threatens Suicide
Date of this Attack, 2 months ago
Duration, 2 months
No. of Attack, 1st So far as known
No. of Admissions, 1st
Age First Attack, about 51.
Time of Leaving, February 2nd 1901.
Time in Hospital, 7 years. 2 mos: 8 days
Result, Died: Chronic Chorea

EXAMINATION ON ADMISSION.

Exd by Dr. Ehrx Nov 30 Dec 5/93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, somewhat confused
Quick or Sluggish, Quick
MEMORY:
Past Events,
Recent Events, } Impaired
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State, } Impaired
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Has quite marked Choreic Movements.

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

Personal and Medical History of Christ Wolf

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in. WEIGHT, 159 lbs. NUTRITION, Fairly Good.
WOUNDS OR ABNORMALITIES, Birth-mark on the right cheek
TONGUE, Tremors, Some Coatings, Slight Promptness Movement, quite prompt
PUPILS, Equality, Equal Size, quite dilated
Response Light, Yes Accommodation, Yes
SIGHT, Some impairment
HEARING, Somewhat impaired
...t for choreic Movements
TREMORS
REFLEXES
Other Reflexes,
ARTICULATION, Hesitating, Foreign accent
FACIAL EXPRESSION,
SENSIBILITY, Normal
HEART, Sounds are good.
LUNGS,
EXAM. URINE.

Case No. 3571. Chris Wolf. Vol. 25.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations, Paternal uncle Insane
Brothers or Sisters,

Personal and Medical History of Christ Wolf

EBERT, FIELER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3571.
Residence, Poor-Farm, Muscatine County.
Date Admission, 25th November 1893.
Admitted by, Dr. Pfeiffer Hour, 7 P.M.
How Sent, H. L. Buck, Jof S, Muscatine County.
Sex, Male
Age, 51
Civil Condition, married
Children, 1 daughter
Age Youngest Child,
Occupation, Carpenter
Degree Education, Limited to reading & writ
Profession Religion, Presbyterian
Habits, Not intemperate, So far as Kno
Nativity, Switzerland (parents also born the
Physicians Committing, Jno. A. Tracy and L. A. Seely
Correspondents,

No. for Year, 141
Insane Relatives, An uncle, a father's sister was insane
Cause Exciting, no known cause; has had chorea for years.
Cause Predisposing, Probably some head injury (some years ago)
Form, chronic dementia
Accompanying Bodily Disorder, Chorea for years
Suicidal or Not, Threatens Suicide
Date of this Attack, 2 months ago
Duration, 2 months
No. of Attack, 1st So far as known

EXAMINATION ON ADMISSION.

Exd by Dr. Phyx Nervous Dec 5/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Somewhat confused
Quick or Sluggish, Quick
MEMORY:
Past Events,
Recent Events, } Impaired
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State, } Impaired
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Has quite marked Choreic Movements.

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

Personal and Medical History of Christ Wolf

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in. WEIGHT, 159 lbs. NUTRITION, Fairly Good.
WOUNDS OR ABNORMALITIES, Birth-mark on the right cheek
TONGUE, Tremors, Some Coatings, Slight Promptness Movement, quite prompt
PUPILS, Equality, Equal Size, quite dilated
Response Light, Yes Accommodation, Yes
SIGHT, Some impairment
HEARING, somewhat impaired
COORDINATION, Arms, } Quite good, by usual tests, except for choreic movements
Legs, }
TREMORS, Hands, Marked Tongue, Some
Facial Muscles, Some General, Some
REFLEXES, Patellar, about 6 — No Ps Seals —
Other Reflexes,
ARTICULATION, ~~Hesitating,~~ Foreign accent
FACIAL EXPRESSION,
SENSIBILITY, Normal
HEART, Sounds are good.
LUNGS,
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Records kept Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations, Paternal uncle Insane
Brothers or Sisters,

Personal and Medical History of Christ Wolf

EBBERT, FICKE & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Sheriff Gay, with the following history of case. As to consanguinity, not known. One uncle on his father's side, was insane. So far as known, this is 1st attack. Symptoms manifested 2 months ago, by fits of despondency & wandering away from home. Disease seems increasing, but is variable and there are rational interval; if regular or irregular, cannot ascertain. Derangement is now shown by the belief that he is a paper & book Agent, and thinks his wife is around informing people he is crazy, and wants to inform them he is all right. Is not disposed to injure others. Has not attempted, but threatens, suicide. No filthy or destructive habit. Has, previously, been irritable & disposed to believe himself an Agent for two years. There is no history of intemperance as far as known. Had a fall of 12 feet, some years ago, from a scaffold; cannot determine if head was injured. He has not been restrained or confined. There is no known cause of the disease. He has Chorea & has had, for years. Has been treated by Sedatives & anodynes, Cimicifuga, triple Brom. Common Hyocyamus, Fowler's solution. On personal examination, Conversation is incoherent, and disconnected, facial muscles twitching and memory much impaired. He says "he will and must die if he stays at the Poor-House (Farm)" and insists that he must run away. Appearance and manner, nervous & excitable. It is ascertained the Inmates are all afraid of him and say he is insane, when excited, & during his periodic spells

Nov 25/93. On admission, was put on B[3]. Pulse 90. Tem 99. Bodily condition, dirty. Has a "birth mark" on right cheek. Nov 25/93. Was restless for 2 & a 3 hours, last night; but slept 6 hours. AM. Pulse 90 Tem 98.6 Appetite good. Has some cough. Seems rather restless today, walking the hall; Talks quite freely; speech somewhat impeded; no complaints or injuries to note. PM. Pulse 84. Tem 98. Nov 27/93. Quiet and slept 8 hours, last night. AM. Pulse 88 Tem 98.8. Walks aimlessly about the hall; locomotion is not very good. Talks freely; no delusions noted. PM. Pulse 86. Tem 99. Nov 28/93. AM. Pulse 82 Tem 98.8 Quiet & well-behaved. There is much impediment of speech. Talks some with his fellow-patients. PM. Pulse 84 Tem 99. Nov 29/93. AM. Pulse 80. Conduct & behavior by day, as usual. Nov 30/93. Has been quiet, sleeping well the past few nights. AM. Pulse 80. So clean, tidy & of good personal habits.

Dec 1/93. Was noisy & slept only 6 hours, last night. AM. Pulse 78. Talks some. Makes no complaints. Dec 2/93. Quiet and slept 7 hours, last night. AM. Pulse 80. Quiet & well-behaved. Dec 3/93. Patient has not changed much, if any, during this, the second week of his stay. Sleep & rest at night have been quite good. Pulse about normal. Appetite also good. Is quiet & well-behaved; somewhat restless occasionally when he walks the floor. Talks more freely with his German fellow-patients. Seems quite contented here. Wt (on 4th inst) 116 lbs; (a gain of 5 pounds, since Coming). Pulse 78. Dec 15/93. Appetite good. Continues quiet and well-behaved; though somewhat restless at times, walking the hall. Makes no complaints. Does no work. Dec 31/93. No material change. Lives along quietly & seemingly contentedly here.

1894
Jan 1/94. Wt 116 lbs. Pulse 76. Jan 16/94. Was, today, transferred to W[3].

Jan 31/94. Appetite fairly good; bowels regular. Does not seem to have much use of his legs or arms; can hardly walk. Has to be fed in the hall, (as he takes up too much room at table). Habits are clean.

Feb 1/94. Wt 116½ lbs. Pulse 78. Feb 23/94. Slept poorly last night (only 3 hours): Was restless for 6 hours or so.

Feb 28/94. Does not seem to change any. Talk cannot be understood. Habits cleanly. —

Mar 1/94. Wt 116½ lbs Pulse 85. Continues about the same. —

Personal and Medical History of Christ Wolf

1894

Mar 12/94. Patient was committed here under the "Law of 1893" recently. Declared insane - Antisocial. He was, today, Taken out and Returned under "new warrant" from Chariton County.

Mar 31/94. Appetite is good; bowels seem regular. He, apparently rests & sleeps well, at night. Is quietly behaved; hardly ever speaking; (Can't talk English); but cannot be understood in his tongue. Does not have very good use of his legs & arms. Habits are clean. He does not seem to improve. —

April 2/94. Wt 154½ lbs. Pulse 76. April 19/94. No noticeable change; today transferred to W[4]

April 30/94. Appetite good; bowels regular; no cough observed. Is quietly behaved; goes about ward, swinging his arms & legs and cannot keep still. Frequently in washroom, washing his hands & face. Is disinclined to undress, at bed time. Talks a good deal, in an incoherent manner. Apparently in good health; habits clean.

May 1/94. Wt 115 lbs - Pulse 72. May 15/94. While at walking, fell & a pile of lumber & cut right eyebrow.

May 31/94. Appears about their ordinary good health - He is fairly well behaved, though quarrelsome, at times. Talks foolishly & in a pantomimic manner; confused; Choreic movements still continue. Habits are cleanly.

June 1/94. Wt 115 lbs. Pulse 72. June 30/94. No change to report upon his condition, during this month.

July 1/94. Wt 114 " " 78. July 31/94. There is no noticeable Change in patient's condition. -

Aug 1/94. Wt 160 " " 75. Aug 31/94. No change from what is mentioned in last general note.

Sept 1/94. Wt 160 " " 80. Sept 30/94. On account of alterations & enlargements, patient, was, with several others, moved to W[3] on 10th inst. Was dirty 1 day during the month. Otherwise no change.

Oct 1/94. Wt 162 lbs. P 75. Oct 31/94. Patients' Condition does not change any. Behaves well.

Nov 1/94. Wt 158 lbs. Pulse 74. Dec 1/94. Wt 167 lbs. P 72. Jan 2/95. Wt 170 lbs. P 76.

Dec 1 (1894) to Jan 30/95. Jan 31/95. Appetite good; bowels regular. Behavior quiet. Talks some, but in a way that no one can understand him. Patient has considerable trouble in walking about. During these 3 months, there has been no special change to note. (3/1 - Wt 158½ lbs. P 75. - 3/1. Wt 157½ lbs. Pulse 80. 4/1 - Wt 158½ lbs. P 78.) Was recently (Apl 15) struck accidentally by patient Sam. Olsen, and discoloring his Eye. Apl 30/95. Behavior fairly good: Habits clean, but untidy, on account of Choreic Convulsions. Conversation unintelligible. May 1/95. Wt 166 lbs. Pulse 82. May 1/95. No change to note. Was transferred to W[4] today. May 31/95. Seem good physical health. Still much troubled with chorea: has difficulty in walking and eating. Well-behaved: not so quarrelsome as some 9 months ago. Makes no complaints. Talks indistinctly & incoherently. Cleanly in his habits. —

June 1/95. Wt 160 lbs. Pulse 72. June 30/95. No change in condition noted, either mentally or physically. July 1/95. Wt 157½ lbs. Pulse 78. July 31/95. Still no change. Aug 1/95. Wt 159 lbs. Pulse 64. Sept 1/95. Wt 159 lbs. P 84. Sept 5/95. Patient appeared at table this morning, with a swollen eye: seemed to have been struck during night: also had a long scratch on his back, as if cut with some sharp instrument: no one seems to know how he came by it. Oct 1/95. Wt 160 lbs. Pulse 70. Oct 31/95. No change noted: Quiet & well-behaved: makes no complaints. Health seems good.

Nov 1/95. Wt 157 lbs. Pulse 66: Dec 1/95. Wt 165 lbs. Pulse 72: Jan 1/96. Wt 172 lbs. Pulse 68.

Dec 1 1895 to Jan 31/96. Jan 31/96. Patient had a quite severe attacks of diarrhoea, during the month. (6th 8th & 9th) also on 15th. Was treated for same. General condition shows no change in any way. Cleanly in dress: dirty & filthy in habits. Has to be dressed & undressed. Talks unintelligibly. Feb 3/96. Wt 172 lbs. P 64. Feb 29/96. Had a very bad diarrhoea on 14th & 15th. Given medicine: Confined his bed & clothes, frequently, during day: patient seems to be failing of late. Very dirty, slovenly & filthy in dress & habits. Appetite poor: sleeps poorly: does not go out: talks to himself in German language. Mar 1/96. Wt 162 lbs: P 68.

Mar 31/96. Apl 1/96. Wt 173 lbs P 62. Apl 30/96. More feeble of late, also more dirty & slovenly. Shuffles: goes walking: talks freely in the German language & cannot be understood. Is Incoherent & Delusional. Dr Ironsides Book A. folio 302

Personal and Medical History of Henry Halverson

HERBERT, VOLKAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3577.
Residence, 310 – 21st Ave. So. Minneapolis
Date Admission, 27th November 1893.
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, John H. Steele, Jof P, Hennepin County.
Sex, Male
Age, 28 years old
Civil Condition, single
Children,
Age Youngest Child,
Occupation, Carriage - Painter
Degree Education, Common School
Profession Religion, not a church member
Habits, not intemperate
Nativity, Norway (Parents also born there)
Physicians Committing, Karl Bendeke & W. R. Stiel
Correspondents, Father Halvor Halverson, Fairbault, Minn

No. for Year, 1117.
Insane Relatives, a brother has been in Asylum at Jamestown N.D.
Cause Exciting, not known
Cause Predisposing, probably some heredity
Form, acute mania
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, not
Date of this Attack, probably recent
Duration, probably short
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 28 years
Time of Leaving, Feb. 19 '94
Time in Hospital, 2m 22ds
Result, Imp

Crossed from Minnesota Jan. 3rd 1894, because of illegally committed.

EXAMINATION ON ADMISSION.

Exd by Drs Ehrgott & Haynes, Dec 7/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, some confused
Quick or Sluggish, Quick
MEMORY:
Past Events, fair
Recent Events, Good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, not alert
Correct or Illusive,
REASONING POWER:
Ordinary Subjects, Impaired
Own Mental State, Unimpaired
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, talked slightly
Depressed,
DELUSIONS:
Systematized or Not, ?
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, More or less incoherent
Voluble or Reticent, voluble

Personal and Medical History of Henry Halverson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11½ in WEIGHT, 114 lbs NUTRITION, Seems fair
WOUNDS OR ABNORMALITIES, Probably none
TONGUE, Tremors, very tremulous Coatings, slight Promptness Movement, Quite prompt
PUPILS, Equality, Equal Size, somewhat dilated
Response Light, Yes Accommodation, Yes
SIGHT, Fairly good
HEARING Good
COORDINATION, Arms, Good by usual tests; finger to nose, eyes shut, good.
Legs, Standing, eyes shut, quite steady.
TREMORS, Hands, none special Tongue, quite marked
Facial Muscles, none special General,
REFLEXES, Patellar, Equal; about normal, under reinforcement.
Other Reflexes,
ARTICULATION, Hesitating, ✓ Slurred, ✓
FACIAL EXPRESSION, ✓
SENSIBILITY,
HEART, Sounds are good
LUNGS, Sounds are good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Kept 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, 3 brothers —

Personal and Medical History of Henry Halverson

1893 Was brought here by deputy Sheriff Adolph Peterson, with the following history. There is some history of consanguinity as patients parents were second Cousins. Also, a brother has been in the Asylum at Jamestown, N.D. This is 1st attack; symptoms manifested probably recently, at residence, with religious mania. Disease seems stationary; is rational at intervals, but these are not regular. Derangement now shown by his reading the Bible & praying. He is not disposed to injure others, nor suicidal, nor filthy, nor destructive. No peculiarities were previously shown. There is no history of intemperance, nor of any severe disease to or injury to the head. — He has had to be held, a short times. Cause of the disease, not known. Has taken bromides, with some sedative relief. On personal examination, he is found to be physically healthy. He says that he sees & talks with God, nights, and also sees angels around him. He walks about in an incoherent way, collecting books & reading passages of the Scripture. Appearance and manner those of an insane person. Other facts are that he undresses himself several times a day and again dresses.

Nov 27/93. On admission, was put on B3. Pulse 74. T(o) 99.6. Bodily Condition quite clean. No injuries or peculiarities noted. Nov 28/93. Was restless and quite noisy for 5 hours, frequently out of bed, and slept but 3 hours, last night. AM. Pulse 76. T(o) 99.4. Appetite is only medium. PM. Has been noisy & restless today. Talks to himself; shows delusions. No injuries or complaints to note. — Pulse 74. T(o) 99.6. Nov 29/93. Slept only 3 hours, last night; was, again, restless & noisy for 5 hours or so. AM P70. T(o) 99. PM. Has been extremely restless & noisy during the day. Makes no complaints. P72 T 98.8. Nov 30/93. Was restless & noisy for from 4 to 6 hours, last night; out of bed the greater part of the time and slept but 2 hours. AM. Pulse 74. T(o) 98.8. Restless again today, walking about hall; also is noisy. PM. T(o) 99. Is clean, fairly tidy & of good personal habits.

Dec 1/93. Slept somewhat better (7 hours), last night. AM. Pulse 72. Appetite, now, generally good. Conduct & behavior, by day, do not improve. Talks loudly & gesticulates. Dec 2/93. Noisy & restless, sleeping but 4 hours, last night. Appetite medium. Still noisy & restless in daytime. Is much deluded. Says "he came down here to heal the Sick". Dec 3/93. Was noisy for a while, but slept 6 hours, last night. AM. Pulse 70. PM. Has been noisy all day; praying, talking & gesticulating. Dec 4/93. Was noisy for 5 hours, restless & slept but 3 hours, last night. AM. Pulse 70. Eats but very little. Pt today 113 pds. (a slight loss). Restless & noisy today; gesticulating; talking loudly. During most of past week, he has been lying on the benches or moving about in a restless & rather aimless way, absorbed in his own ideas. Dec 11/93. During this, the 2d week of his stay, patient has continued nightly, noisy & restless from 2 to 3 hours, but sleeping 5 to 6 hours, each night. Pulse has been about normal. Appetite fairly good. At times, has been restless by day; loud talking and Gesticulating; Talk, for most part, incoherent & full of delusions; answers questions however, quite freely & seemingly rationally. On the whole, has seemed more quiet, the past week; his health improves some; Talks somewhat more coherently. Dec 16/93. Though somewhat noisy for an hour or so each night, yet he has been sleeping 6 to 7 hours each of past 3 nights. Has also been noisy, by day. Dec 25/93. Restless & loves, sleeping but 4 hours, last night. Continues noisy during day and disturbed, at times. Dec 29/93. Was visited by friends, today. Dec 31/93. Rest & sleep at night continues the more or less broken and disturbed, at times. Is extremely noisy at times, by day, also. Appetite only medium. Patient

Personal and Medical History of Henry Halverson

1893 Cont'd Dec 31 Makes no complaints. Still shows delusions. Also says that he is crazy. Knows where he is yet apparently is contented. Habits are clean.

1894 Jan 1/94 - 31 Jan 2/94. Pt 119 pds. (Has gained some in flesh, the past month). Pulse 82. Jan 15/94. Is talking continually. Jan 31/94. Appetite good. Is somewhat quieter of late, than he has previously been. Works on C. Is of good personal habits. —

Feb 1/94 - 19 Feb 1/94. Pt today 121 pds. Pulse 72. Feb 8/94. Seems improving mentally. Works still on C. — Feb 19/94. Is quietly behaved. Talks freely. Makes no complaints. Physical condition good & mental condition is much improved. Works on C daily. Was committed under the new law, now declared illegal, and was taken out by friend today.

Crossed off the records; was illegally committed.
A.O.O.

1894 Oct 8 From 280. of Insane Hospital

Vol 20 Folio 277

DETAILED HISTORY OF SICKNESS OF MR Alfred Dahl
DIAGNOSIS.

DATE	HOUR	PULSE: AM	PULSE: PM	RESP: AM	RESP: PM	TEMP: AM	TEMP: PM	
1	7	74	64	20	20	99	98.2	Eye dressed - seems about the same
								Appetite good - bowels regular
2	7	80	72	18	24	99	99	Slept 5 hours
								Slept 7 hours
3	7	8	88	68				Eye dressed - doing well
								Slept 7 hours
4	7	8	88	76				Appetite good - bowels regular
								Eye dressed - doing well
5	7	8	72	68				
6	7	8	84	72				Eye dressed - doing well - Appetite good - bowels regular
7	7	8	104	92				9 A.M. Dressed for forward - Seems quite well
8	7	8	88	84				Slept 7 to 9 hours every night
								Eye dressed - doing nicely - Appetite good - bowels regular
9	7	8	72	20				Keeps forward all day
								Works forward
10	7	8	88	84				Eye dressed - doing well
11								Eye dressed - Appetite good - bowels
12								
13								
14								

now. ... was many ... every day. Is quite irritable at times, very noisy. Has many delusions. Generally cheerful & obedient. May 3/95. Wt 108½ pds. May 31/95. No special change. Cranky & likes talk & argue as long as anyone will talk with him. —

Normal. April 30/95. Works more and

Carried to page 174 Female Book A

Nov 27 - 28 ... operation ... last; enlarged ... patient emaciated ... & has been ... left leg, just ... Patient ... right knee ... nicely - ... has usual. ... left. — ... now. ... nicely - ... change - ... very ... e. ... work - ... pil. ... ue) ... work ... each.

Personal and Medical History of Henry Halverson

LESLEY, FULLER & CHAMBERS, DAVENPORT, IOWA.

1893 Nov 27 | Was brought here by deputy Sheriff Adolph Peterson, with the following history. There is some history of consanguinity as patients parents were second cousins. Also, a brother has been in the Asylum at Jamestown, N.D. This is 1st attack; symptoms manifested probably recently, at residence, with religious mania. Disease seems stationary; is rational at intervals, but these are not regular. Derangement now shown by his reading the Bible & praying. He is not disposed to injure others, nor suicidal, nor filthy, nor destructive. No peculiarities were previously shown. There is no history of intemperance, nor of any severe disease &c or injury to the head. — He has had to be held, at short times. Cause of the disease, not known. Has taken bromides, with some sedative relief. On personal examination, he is found to be physically healthy. He says that he sees & talks with God, nights, and also sees angels around him. He walks about in an incoherent way, collecting books & reading passages of the Scripture. Appearance and manner those of an insane person. Other facts are that he undresses himself several times a day and again dresses.

Nov 27 | Nov 27/93. On admission, was put on B3. Pulse 74. T(e) 99.6. Bodily Condition quite clean. No injuries or peculiarities noted. Nov 28/93. Was restless and quite noisy for 5 hours, frequently out of bed, and slept but 3 hours, last night. AM. Pulse 76. T(e) 99.4. Appetite is only medium. PM. Has been noisy & restless today. Talks to himself; shows delusions. No injuries or complaints of note. —
" 29 | Pulse 74. T(e) 99.6. Nov 29/93. Slept only 3 hours, last night; was, again, restless & noisy for 5 hours or so. AM. P 70. T(e) 99. PM. Has been extremely restless & noisy during the day. Makes no complaints. P 72. T 98.8.
" 30 | Nov 30/93. Was restless & noisy for from 4 to 6 hours, last night; out of bed the greater part of the time and slept but 2 hours. AM. Pulse 74. T(e) 98.8. Restless again today, walking about hall; also is noisy. PM. T 99. Is clean, fairly tidy & of good personal habits.
Dec 1 | Dec 1/93. Slept somewhat better (7 hours), last night. AM. Pulse 72. Appetite, now, generally good.
" 2 | Conduct & behavior, by day, do not improve. Talks loudly & gesticulates. Dec 2/93. Noisy & restless, sleeping but 4 hours, last night. Appetite medium. Still noisy & restless in daytime & shouts
" 3 | delivered. Says "he came down here to heal the sick". Dec 3/93. Was noisy for a while, but slept 6 hours, last night. AM. Pulse 70. PM. Has been noisy all day; praying, talking & gesticulating.
" 4 | Dec 4/93. Was noisy for 5 hours, restless & slept but 3 hours, last night. AM. Pulse 70. Eats but very little. Eff today 113 p.m. (a slight loss). Restless & noisy today; gesticulating; talking loudly. During most of past week, he has been lying on the benches & moving about in a restless & partial aimless way, absorbed in his own ideas. Dec 11/93. During this, the 2d week of his stay,
" 11 | patient has continued, nightly, noisy & restless from 2 to 3 hours, but sleeping 5 to 6 hours, each night. Pulse has been about normal. Appetite fairly good. At times, has been restless by day; loud talking and gesticulating; Talk, for most part, incoherent & full of delusions; answers questions however
" 16 | quite freely & seemingly rationally. On the whole, has seemed more quiet, the past week; his health improves some; Talks somewhat more coherently. Dec 16/93. Though somewhat noisy for an hour or so each night, yet he has been sleeping 6 to 7 hours a each of past 3 nights. Has also
" 26 | been noisy, by day. Dec 26/93. Restless & loud, sleeping but 4 hours, last night. Continues noisy during day.
" 29/31 | Dec 29/93. Was visited by friends, today. Dec 31/93. Rest & sleep at night continues the more or less broken and disturbed, at times. Is extremely noisy at times, by day, also. Appetite only medium. Patient

Personal and Medical History of Henry Halverson

1893 Cont'd Dec 31 | Makes no complaints. Still shows delusions. Also says that he is crazy. Knows where he is yet apparently is contented. Habits are clean.
1894 Jan 1/ " 31 | Jan 2/94. Eff 119 p.m. (Has gained some in flesh, the past month). Pulse 82. Jan 15/94. Is failing continually. Jan 31/94. Appetite good. Is somewhat quieter of late, than he has previously been. Works on C. Is of good personal habits. —
Feb 1/ " 19 | Feb 1/94. Eff today 121 p.m. Pulse 72. Feb 8/94. Seems improving mentally. Works still on C. Feb 19/94. Is quietly behaved. Talks freely. Makes no complaints. Physical condition good & mental condition is much improved. Works on C. daily. Was committed under the new law, now declared illegal, and was taken out by friend, today.

Crossed off the records; was illegally committed.

1894 Oct 8 | From 280.
of Iowa, this [illegible]

Vol 20 Folio 177

DETAILED HISTORY OF SICKNESS OF MR Alfred Dahl
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Nov. 1	7	12	74	64	20	20	99	98.2	Legs dressed - seems about the same
2	7	12	74	64	20	20	99	98.2	Appetite good - bowels regular
3	7	12	80	72	18	24	98	99	Slept 5 hours
4	7	12	80	72	18	24	98	99	Slept 7 hours
5	7	12	80	72	18	24	98	99	Legs dressed - doing well
6	7	12	88	68					Slept 7 hours
7	7	12	88	76					Appetite good - bowels regular
8	7	12	88	76					Legs dressed - doing well
9	7	12	92	68					
10	7	12	84	72					Legs dressed - doing well - Appetite
11	7	12	104	72					good - bowels regular
12	7	12	88	84					Asks discharge for wife - Seems quite well
13	7	12	72	70					Slept 7 to 9 hours every night
14	7	12	88	84					Legs dressed - doing nicely - Appetite
15									good - bowels regular
16									Improved some this day
17									Works outward
18									Legs dressed - doing well
19									
20									Legs dressed - Appetite good - bowels regular
21									Legs dressed
22									Legs dressed - doing very well
23									Legs dressed
24									
25									Legs dressed - Slept part night
26									
27									Left leg has scabbed - dressing
28									discontinued - doing very well
29									right leg dressed - doing very well
30									Leg dressed - doing very well -
									Appetite good - bowels regular -
									Works outward

1893 Has brought h[illegible] (covering) history. There is
some history [illegible] Also, a brother has been
in the [illegible] manifested probably
[illegible]tional at intervals,
[illegible]saying. He is not
[illegible] were previously
[illegible] the head. —
[illegible]nades, with
[illegible]ty. He
[illegible]ks
[illegible]ce)

[illegible] 988.
[illegible] and
[illegible] also is noisy.

[illegible]a, now, generally good.
[illegible]ec 2/93. Noisy & restless,
restless in daytime & sleeps
[illegible]3. Was noisy for a while, but slept
all day; praying, talking & gesticulating.
[illegible] hours, last night. H.W. Pulse 90. Eats but
[illegible]less & noisy today; gesticulating; talking loudly.
[illegible]ing in the bunches & moving about in a restless &
[illegible]s own ideas. Dec 11/93. During this, the 2d week of his stay,
restless from 2 to 3 hours, but sleeping 5 to 6 hours, each night.
Appetite fairly good. At times, has been restless by day; loud talking
for most part, incoherent & full of delusions; answers questions however
[illegible]ly rationally. On the whole, has seemed more quiet, the past week; his
[illegible]proves some; talks somewhat more coherently. Dec 16/93. Though somewhat noisy for
an hour or so each night, yet he has been sleeping 6 to 7 hours each of past 3 nights. Has also
been noisy, by day. Dec 23/93. Restless 4 hours, sleeping but 4 hours, last night. Continues noisy during day
" 29/31 Dec 29/93. Was visited by friends, today. Dec 31/93. Rest & sleep at night continues the more or less broken
and disturbed, at times. Is extremely noisy at times, by day, also. Appetite only medium. Patient

1893
Contd
Dec 31 Makes no complaints. Still shows delusions. Also says that he is crazy. Knows where he is
1894 yet apparently is contented. Habits are clean.
Jan 2/ Jan 2/94. Wt 119 lbs. (Has gained some in flesh, the past month). Pulse 82. Jan 15/94. Is
" 31 taking continually. Jan 31/94. Appetite good. Is somewhat quieter of late, than he has previously
been. Works on C. Is of good personal habits. —
Feb 1/ Feb 1/94. Wt today 121 lbs. Pulse 72. Feb 8/94. Seems improving mentally. Works still on C. —
" 19 Feb 19/94. Is quietly behaved. Talks freely. Makes no complaints. Physical condition good &
mental condition is much improved. Works in C. daily. Was committed under the new law,
now declared illegal, and was taken out by friend, today.

Crossed off the records; was illegally committed.
Alfred Dahl

1894 From 280.
Jan 28 of lower third
Feb 26
Folio 277.

DETAILED HISTORY OF SICKNESS OF MR Alfred Dahl.
DIAGNOSIS.

DATE	HOUR	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Oct 7	12 3 5	110	100	20	20	100	100	Cancerous gland from R L Cervix sick
" 7	8							put to bed. Slept 6 hours
" 8	7	118	80	18	18	98.8	99.2	bowels regular. Appetite quite good.
								Tuberculous or Haemophilitis of lower
								third of sternum right side suppurating
								sinus fistulae discharging
								slightly. Is sore & old tuberculosis
								discharging from several bones.
								Numerous scars of old tuberculosis
								abscesses on both legs and chest
								Enlarged tubercular glands on both
								groins below Poupart's ligaments both
								sides. Axillary glands on neck both
								sides. Partially emaciated
								Slept 4 hours
								Slept 5 hours
9	7	92	86	24	16	99.4	99.4	Slept 5 hours
10	7	90	88	24	20	98.8	99.4	Leg dressed. Appetite good. Bowels regular.
								Slept 5 hours
11	7	86	62	24	24	99	98.2	Slept 6 hours
12	7	88	66	24	18	98.6	98.4	Slept 4 hours
13	7	82	74	22	22	98.8	98.4	Leg dressed. Leg sore. Bath.
14	7	82	68	22	18	98.6	99	Slept 7 hours
								Appetite good. Bowels regular.
15	7	82	68	22	18	98.6	99	Slept 8 hours
16	7	84	80	24	20	98.4	98.8	Slept 8 hours
17	7	72	68	22	18	98.4	99	Leg dressed. Left leg has broken out
								just above the ankle. Dressed new wound.
18	7	68	64	18	20	98.6	98.6	Appetite good. Bowels regular. Slept 8 hours
19	7	80	92	20	16	98.4	100.4	Slept 2 hours
20	7	72	60	20	20	98.6	98.6	Appetite good. Bowels regular. Slept 8 hours
21	7	70	60	18	20	97.8	98.4	Leg dressed. Slept 6 hours
22	7	72	80	18	20	98.8	99	Sleeping very well
23	7	68	64	20	20	98.8	99	Slept 8 hours
24	7	68	60	20	16	98.2	98.4	Slept 7 hours
25	7	88	82	18	20	99	98.6	Slept 8 hours. Appetite good. Bowels
26	7	64	70	18	20	98.6	99	regular and free
27	7	68	64	18	20	98.2	98.4	Slept 8 hours. Gums both
28	7	68	60	18	20	98.6	99	Slept 8 hours. Appetite very good.
29	7	76	64	22	20	99	99	Slept 7 hours. Appetite very good.
30	7	76	64	20	18	99	98.6	Legs dressed. Bowels regular.
31	7	68		18		99		Legs dressed. Appetite very good.
								Legs dressed. Bowels regular.
								Legs dressed. Slept well enough to be up.
								Legs dressed. Slept 8 hours.
								Legs dressed. Appetite very good.
								Legs dressed. Bowels regular.

3

FOREST, FISLAR & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by ... with the following history. There is ... Cousins. Also, a brother has been ... ruptions manifested probably ... ary; is rational at intervals, ... Bible & praying. He is not ... nities were previously ... ony & the head. — ... en bromides, with ... healthy. He ... walks ... enhanced ...

... 29 Oct ...
... 30 Nov 30/93. Slept but ... Crn. Tr 99.
Dec 1 Dec 1/93. Slept ... noisy.
" 2 Conduct & behavior ... generally good.
Sleeping but 4 hours, ... noisy & restless,
" 3 deluded. Says "he came ... in daytime & screech
6 hours, last night. Aff. Pulse ... for a while, but slept
" 4 Dec 4/93. Has noisy for 5 hours, ... ging, talking & gesticulating.
very little. Tgt today 113 pds. (a d... ght. Aff. Pulse 90. Eats but
Dressing most of past week, he has be...
" 11 rather aimless way, absorbed in his ... ay; gesticulating; talking loudly
patient has continued, nightly, noisy & restless ... & moving about in a restless &
Pulse has been about normal. Appetite fairly goo... 11/93. During this, the 2° week of his stay,
and gesticulating; talk, for most part, incoherent & full of delusions; answers questions ... 3 hours, but sleeping 5 to 6 hours, each night.
quite freely & seemingly rationally. On the whole, has seemed more quiet, the past week; his ... At times, has been restless by day; loud talking
" 16 health improves some; Talks somewhat more coherently. Dec 6/93. Though somewhat noisy for
an hour or so each night, yet he has been sleeping 6 to 7 hours each of past 3 nights. Has also
" 26 been noisy, by day. Dec 26/93. Restless & loud, sleeping but 4 hours, last night. Continues noisy during day
" 29/31 Dec 29/93. Was visited by friends, today. Dec 31/93. Rest & sleep at night continues & he more or less taken
and disturbed, at times. Is extremely noisy at times, by day, also. Appetite only medium. Patient

1893 Cont'd
Dec 31 makes no complaints. Still shows delusions. Also says "that he is crazy". Knows where he is yet apparently is contented. Habits are clean.

1894
Jan 2/94. Jan 2/94. Tgt 119 pds. (Has gained some in flesh, the past month). Pulse 83. Jan 15/94. Is
" 31 talking continually. Jan 31/94. Appetite good. Is somewhat quieter of late, than he has previously been. Works on C. Is of good personal habits. —

Feb 1/94. Feb 1/94. Tgt today 121 pds. Pulse 72. Feb 8/94. Seems improving mentally. Works still on C.
" 19 Feb 19/94. Is quietly behaved. Talks freely. Makes no complaints. Physical condition good & mental condition is much improved. Works on C daily. Was committed under the new law, now declared illegal, and was taken out by friend, today.

Crossed off the records; was illegally committed.

Alfred Dahl.

1894 From 280.
Oct 8 cont'd of lower third of femur, right side interior aspect; 2 fistulae discharging slightly in scar of old operation leading down to denuded softened bone - numerous scars of old tubercular abscesses about legs & chest; enlarged tubercular glands on groin below Poupart's ligaments, both sides; smaller gland in neck, both sides - Patient emaciate-
" 17/18 Oct 17/94. Has been sleeping about 5 hours, nightly - Leg dressed daily & sore doing nicely - Oct 26/94. Has been
sleeping 7 to 8 hours, most of past few nights - Leg dressed daily - New sore has broken out on left leg, just
" 27 above the ankle - Same Dressed. Oct 27/94. Sores are Dressed daily & are doing very nicely. Patient
has been resting & sleeping well, at night - Appetite very good; bowels regular - Says he feels well enough to be up.
" 31 Oct 31/94. Still confined steadily to his bed. Sleeps well. Sores dressed daily & are healing nicely -

Nov 7 Nov 7/94. Legs dressed daily & are doing well. Appetite good; bowels regular. Otherwise, about as usual.
" 8 Nov 8/94. 9 A.M. Dressed & up on ward. Patient has been sleeping 7 to 9 hours, every night. —
" 25 Nov 25/94. Has remained up, daily. Legs have been dressed each day & are doing very nicely, now.
" 27 Nov 27/94. Left leg has about healed; dressing of same discontinued - right leg progressing nicely -
" 30 Nov 30/94. Patient continues up daily. Helps some with work. Leg still dressed - Mentally no special change -

Dec 1/94. Dec 1/94. Wt 115½ pds. Dec 8/94. Seems to be improving of late; is cheerful & contented. Appetite very
" 18 good; bowels regular. Works some at ward - Dec 15/94. Goes out quite frequently, for his exercise.
" 31 Dec 31/94. Rest & sleeps well. Up & around daily; is getting along nicely - Bright & cheerful. Helps with work -

1895
Jan 14 Jan 14/95. Works on ward & in dining-room: goes out, for exercise, occasionally. Generally quite cheerful.
" 24 Jan 24/95. Appetite good; bowels regular. Patient, at times, is quite irritable. Says "he wants to go home" -
" 31 Jan 31/95. Reads, at times - Moves about ward: talks considerably to other patients - Sleeps willingly with work.

Feb 1/95 Feb 1/95. Tgt 114 pds. Feb 28/95. Appetite good; bowels regular. Is, at times, rather cross & cutting in his speech.
Read, much of the time. Talks incoherently - Works considerably on ward. Goes out walking frequently -

Mar 1/95 Mar 2/95. Wt 111 pds - March 9/95. Works on ward. Is in quite good health, physically -
" 31 Mar 31/95. Appetite good: bowels regular. Is a little noisy in his talk, at times - Has many

April 1/95 delusions. Works willingly on the ward. - April 9/95. Wt 111½ pds P. normal. April 30/95. Works on ward
& in dining-room: goes out to grounds, every day. Is quite irritable & at times, very noisy. Has many delusions.

May 1/95 Generally, cheerful & obedient. May 1/95. Wt 108½ pds. May 31/95. No special change. Cranky & rather talk & argue as long
as anyone will talk with him. —

carried to page 174

Personal and Medical History of Charles Anderson.

Whole No. 3574.
Residence, Minneapolis (for 8 months).
Date Admission, 28th November 1893.
Admitted by, Dr Phelps Hour, 7 PM
How Sent, John A. Steele, Jail P. Hennepin County
Sex, male
Age, 20 years old (May 7th 1893)
Civil Condition, single
Children,
Age Youngest Child,
Occupation, Harness-maker
Degree Education, Educated to some extent (read)
Profession Religion, not a Church member
Habits, not intemperate
Nativity, Sweden (parents also born there).
Physicians Committing, C. G. Weston & W. A. Jones
Correspondents, Herman Anderson (Brother) 700 Ravenna St N.E. Minneapolis
Family Physician Hugo Tall, 900-15th ave So. Mpls.

No. for Year, 1444.
Insane Relatives, unknown
Cause Exciting, Pachymeningitis Ext.
Cause Predisposing, not stated
Form, acute melancholia
Accompanying Bodily Disorder, no history of any.
t, not
ttack, 3 months past
3 months or so
1st
ions, 1st
ck, about 20.
ng, May 14' 94
ital, 5 m 16 d,
Recovered



EXAMINATION ON ADMISSION.

Evly D. Phelps, Dec 2/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, slightly confused
Quick or Sluggish, quite quick

MEMORY:
Past Events, fair
Recent Events, some confusion
Special Subjects,

PERCEPTIVITY:
Alert or Dull, answers questions promptly
Correct or Illusive,

REASONING POWER:
Ordinary Subjects, fair
Own Mental State, "Can't tell how long he is here"
Special Subjects, poor

GENERAL DESCRIPTIVE REMARKS:
Says: he left badly for about 4 or 5 months. He remembers past events seemingly well, still much confusion in regard to recent subjects. The attack was evidently acute, but in addition, says he was not well for the past 6 months or so —

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, slightly, at present.

DELUSIONS:
Systematized or Not, somewhat systematized about
Special Subjects, Poisoning etc.
Transitory or Not,

HALLUCINATIONS: "of hearing"

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, at present much more clear than for past few days.
Voluble or Reticent,

Personal and Medical History of Charles Anderson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 2 in WEIGHT, 115 lbs NUTRITION, Fairly Good.
WOUNDS OR ABNORMALITIES, none noted —
TONGUE, Tremors, none Coatings, none Promptness Movement, ✓
PUPILS, Equality, equal Size, about normal
Response Light, ready Accommodation, ✓
SIGHT, seems good
HEARING, good
COORDINATION, Arms, finger nose, eyes shut, imperfect; done inaccurately.
Legs, Romberg, eyes shut, always some.

Case No. 3574. Chas. Anderson Vol. 25.

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, face appears slightly swollen.
SENSIBILITY, ✓
HEART, sounds are rapid
LUNGS, sounds, good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,		Clean,	Careless,
BOWELS, Normal,	Kept	Constipated,	Irregular,
APPETITE, Good,	Record	Medium,	Poor,
SLEEP, Good,		Poor,	Irregular,

PULSE, 110 – 115 (somewhat feeble). RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") not much of family history brought out except that his father had a very large family —
Mother or Mat. Relations, Mother died – about 53 –
Father or Pat. Relations, Father died about 11 yrs ago – aged 83
Brothers or Sisters,

Personal and Medical History of Charles Anderson

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3574.
Residence, Minneapolis (for 6 months).
Date Admission, 28th November 1893.
Admitted by, Dr. Phelps Hour, 7 PM
How Sent, John A. Steele, Jail P. Hennepin County
Sex, male
Age, 20 years old (May 7th 1893)
Civil Condition, single
Children,
Age Youngest Child,
Occupation, Harness-maker
Degree Education, Educated to some extent
Profession Religion, not a Church member
Habits, not intemperate
Nativity, Swedish (parents also born there)
Physicians Committing, C. G. Weston & H. A.,
Correspondents, Herman Anderson (Brother) 700 Rainey St N.E. Minneapolis.
Family Physician Hugo Tall, 900-15th ave So. Minneapolis.

No. for Year, 1444.
Insane Relatives, unknown
Cause Exciting, Pachymeningitis Ext.
Cause Predisposing, not stated
Form, acute melancholia
Accompanying Bodily Disorder, no history of any
t, not
ttack, 3 months past
3 months or so
1st
ions, 1st



EXAMINATION ON ADMISSION.

Exd by Dr. Phelps Dec 7/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, slightly confused
Quick or Sluggish, quite quick

MEMORY:
Past Events, fair
Recent Events, some confusion
Special Subjects,

PERCEPTIVITY:
Alert or Dull, answers questions promptly
Correct or Illusive,

REASONING POWER:
Ordinary Subjects, fair
Own Mental State, "Can't tell how long he is here"
Special Subjects, poor

GENERAL DESCRIPTIVE REMARKS:
Says "has felt badly for about 4 or 5 months." He remembers past events seemingly well, still much confusion in regard to recent subjects. The attack was evidently acute, but in addition, says "had was not well for the past 6 months or so —

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, slightly, at present.

DELUSIONS:
Systematized or Not, somewhat systematized about
Special Subjects, Brooming &c.
Transitory or Not,

HALLUCINATIONS: "of hearing"

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, } at present much more clear than for past few days.
Voluble or Reticent, }

Personal and Medical History of Charles Anderson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 2in WEIGHT, 115 lbs NUTRITION, Fairly Good.
WOUNDS OR ABNORMALITIES, none noted —
TONGUE, Tremors, some Coatings, some Promptness Movement, ✓
PUPILS, Equality, equal Size, about normal
Response Light, ready Accommodation, ✓
SIGHT, seems good
HEARING, good
COORDINATION, Arms, finger to nose, eyes shut, imperfect; some inaccuracy.
Legs, standing, eyes shut, sways some.
TREMORS, Hands, some Tongue, some
Facial Muscles, General,
REFLEXES, Patellar, equal — about 4 — Dr. Pt's scale
Other Reflexes, slight ankle clonus
ARTICULATION, Hesitating, seems fairly good ~~Slurred,~~
FACIAL EXPRESSION, face appears slightly swollen
SENSIBILITY, ✓
HEART, sounds are rapid
LUNGS, sounds good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

PULSE, 110 – 115 (somewhat feeble). RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") not much of family history brought out except that his father had a very large family —
Mother or Mat. Relations, Mother died — about 53 —
Father or Pat. Relations, Father died about 11 years ago — aged 83
Brothers or Sisters,

Personal and Medical History of Charles Anderson

EARLEY, FISHER & CHAMBERS, DAVENPORT, IOWA

1892

Has brought here by Deputy Sheriff Uhlin, with the following history. There is no history of either consanguinity, or heredity(?) This is 1st attack. Symptoms first manifested by headache for 3 months past, followed by excitement 3 days ago. Disease seems increasing. Is variable. He is rational, at times, but not at regular intervals. Derangement is now shown in that he thinks his bowels are gone; by delusions of poison & religion, accompanied by excitement. "The Lord directs his thoughts." Patient is neither disposed to injure others, nor suicidal, but is destructive, at times, & tears his clothing. Acts heredity, unknown. No peculiarities were previously shown. - There is no history of intemperance or of any severe disease. He has been restrained by straps in City Hospital. Supposed cause of the disease is Pachymeningitis ?. Has been treated by hypnotics; no effect. On personal examination, the patient manifested delusions of suspicion of poison, and of religion. Speaks freely on these subjects. Was excited, talkative & destructive; appearance and manner were those of excitement preceding acute mania. There are symptoms of headache, dilated pupils, restlessness & excitement (these latter facts from outside sources).

Nov 28/93. On admission, was quiet; seemed somewhat dull & stupid. Was put on 1/3 Bodily Condition fairly clean; no injuries or peculiarities noticed. Nov 29/93. Was restless & noisy (extremely so) 4 hours; slept but 4 hours. AM. Pulse 90. T. 100. Ate nothing; drank a little milk: bowels seem free. Was very noisy & violent today; given a hot bath & put to bed; became very quiet afterward & remained so, except occasionally. Talk is incoherent, yet he speaks sensibly, at times, when questioned. PM. Pulse 92. T. 99.6. No injuries to report, today. Nov 30/93. Was restless out of bed, nearly all night; quite noisy for 4 hours; slept but 1 hour, last night. Was also very noisy & violent this morning; was transferred to 6th. Pulse 96. R 24. Patient was placed in seclusion, on admission to ward, and behaved quietly. Took no breakfast or dinner, but ate sparingly of supper. - Bowels are regular. Seems much depressed, at times.

Dec 1/93. Was fairly restful last night; slept 7 hours. AM. Pulse from 100 to 120. R 24. Appetite very poor: at some meals he refuses to touch food. Bowels regular; no cough noticed. Is very noisy and violent, at times; sits quietly, when not excited, and scarcely speaks. Dec 2/93. Quiet & restful, sleeping 9 hours, last night. AM. Pulse 96. R 22. Is quiet today, only having occasional outbursts of noisy violence. Is inclined to talk a little more today and with some coherence. Takes very little food. Bowels free. Dec 3/93. Apparently slept well, last night. Was quiet. AM. Pulse 84. Refused to take any dinner; also refused supper this evening. Bowels are regular. Patient is much quieter today; talks when questioned and answers quite rationally. Dec 4/93. Slept 9 hours last night. AM. Pulse 74. He has eaten nothing for 2 days. Appears to think there is something wrong with the food; also, with the water. Bowels are regular. No cough noticed. Is now quiet & peaceable. Depressed; cries at times. Says "he is very thirsty". Dec 5/93. Slept well, again, last night. AM. Pulse 76. Ate some supper this evening. Complains of thirst. Still continues quiet but much depressed, crying at times. Dec 6/93. Ate no breakfast this morning. Slept well, last night. Is quiet & well-behaved. Talks very little but in a connected, reasonable manner. Eats nothing & has to be forced to swallow his medicine. - Bowels regular. No injuries to note. Pulse, today 70. Dec 7/93. AM. Pulse 66. Talks very little; ate a little supper this evening. Dec 8/93. Appetite improving today; (is now taking sufficient

Personal and Medical History of Charles Anderson.

1893

nourishment to sustain life); bowels slightly constipated. Pulse 82. Sleeps well, at night. Dec 9/93. Bowels moved during the night. Appetite continues to improve. Pulse, this Am, 68. - Dec 10/93. Appetite, today, is much improved; Pulse 72. Bowels slightly irregular; somewhat constipated; patient talks very little; seems still depressed. Dec 11/93. AM. Pulse 71. Bowels move regular. Appetite quite fair. Dec 12/93. AM. Pulse 70. Since last noted, patient has been quiet & restful at night, sleeping, uniformly 9 hours, on each. Complained some of being sick, yesterday afternoon, but is all right, this morning. Appetite fair; bowels regular. Patient is now more composed; well-behaved, for some time past; talks but very little; is quiet and melancholy in manner; full of deluded ideas; usually, will not talk freely.

Dec 13/93. Appetite poor. Bowels somewhat Constipated. Habits clean. Is well-behaved. Very melancholy, at times. Says "he would like to go home". Dec 19/93. Patient has his Photograph taken today. Is very quiet onward. Seems to be gaining some, tho' still much depressed. Is very anxious to go home. Dec 31/93. Continues very quiet onward. Is subject to "spells" of melancholia, a good deal of the time. Appetite is somewhat better. Habits are clean.

Jan 1/94. Wt 109 pds: (Lost 6 pounds since Coming). Pulse 60. Jan 31/94. Appetite fair; bowels regular. Very quiet; does not talk any. Is melancholy; has "spells of crying" and when asked "what is the matter?", will not answer. On the whole, seems somewhat improved.

Feb 1/94. Wt 110 pds. Pulse 72. Feb 10/94. Received a letter from his sister, today, and afterwards, had quite a "crying spell". Is very downhearted and does not talk unless spoken to: will, however, answer questions quite promptly. Feb 16/94. Struck a fellow-patient (C. Ellenberg) on the head to-day raising a small bunch. Feb 22/94. No change; very clean in habits.

Feb 24/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. He was, today, Taken out and Returned under "new Warrant" from Olmsted County. Feb 28/94. Appetite good; bowels regular. Usually well behaved, though a little quarrelsome at times; talks but little; has "spells" of melancholia; also shows delusions. Is gaining in strength; works some on the ward; habits are clean and tidy. ——

March 1/94. Wt 122 pds; (a gain of 12 pounds in the past month). Pulse 72. March 9/94. Patient tried to escape today; claimed "he wanted to go to Minneapolis to get some beer"; was caught & brought back. March 31/94. Continues quiet & well-behaved. Appetite good; works well. Is improving a good deal. April 2/94. Wt 124½ pds. Pulse 98. April 30/94. Continues to make good improvement. — Appetite good; bowels regular. Makes no complaints. Habits are clean & neat.

May 1/94. Wt 126 pds. (Continues, monthly to make a slight gain in flesh). Pulse 79. Appetite is good. May 13/94. Apparently rests & sleeps well, at night. Behavior is quiet & good: he is pleasant & helpful with his fellow-patients; and from being moody & morose, with suicidal tendencies, he has become cheerful & quite alive to everything that is passing on around him. He makes no complaints. Talks well & sensibly & appears to have entirely outgrown the mental trouble with which he was afflicted. Works onward, willingly & cheerfully. Appears to be in good bodily health & is, seemingly, quite able now to take care of himself. Habits clean. May 14/94. Patient was today, permitted to go home.

— Discharged —

Personal and Medical History of William Lenze

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3576.
Residence, Minneapolis, Minn
Date Admission, 29th November 1893.
Admitted by, D. Phelps Hour, 7 PM
How Sent, John A. Steele, Jof P. Hennepin County
Sex, Male
Age, 27
Civil Condition, Single
Children, none
Age Youngest Child, —
Occupation, Brick-Layer
Degree Education, Common
Profession Religion, Lutheran
Habits, not intemperate
Nativity, Germany (parents also born there).
Physicians Committing, C. A. McCollom & W. A. Jones
Correspondents,
Judge of Probate (prior



No. for Year, 146.
Insane Relatives, not known
Cause Exciting, Unknown, except some degeneracy
Cause Predisposing, probably masturbation
Form, paranoia
Accompanying Bodily Disorder, (is an maniac).
Suicidal or Not, Not
Date of this Attack, more than 1 year ago
Duration, over a year
No. of Attack, 1st (so far as known).
No. of Admissions, 1st
Age First Attack, 26 (about)
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exd by D. Phelps (Dr. Ely & Hayes present) Dec 4/93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, somewhat inaccurate
Quick or Sluggish, Quick
MEMORY:
Past Events, } Fair
Recent Events, }
Special Subjects,
PERCEPTIVITY:
Alert or Dull, quick
Correct or Illusive,
REASONING POWER:
Ordinary Subjects, } Poor.
Own Mental State, }
Special Subjects, }
GENERAL DESCRIPTIVE REMARKS:
Says: sees Phenomena at night. Tells a story of loving some lady (a widow) & wanted to make her his wife, &c. Says: these Phenomena told him he should go to school (University), to write to this lady &c. Admits he has had Gonorrhoea - nothing worse —

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, very slightly
Depressed,
DELUSIONS:
Systematized or Not, about Spiritualism &c
Special Subjects,
Transitory or Not,
HALLUCINATIONS: of various kinds
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Fairly Coherent but believes
Voluble or Reticent, Quite free) thoroughly in them,
he follows them & tries to sustain them.

Personal and Medical History of William Lenze

REASON DETHRONED.

William Lenz, a Student, Committed to the Asylum.

A case of insanity, with peculiarly sad features, came before Judge Steele, of the probate court, yesterday afternoon, the victim being William Lenz, a young man about 25 years old.

Lenz, who is a pupil at the Minneapolis Academy, is laboring under the delusion that he must write love letters to a pretty widow named Mrs. I. M. Pittman, who resides at 22 Twelfth street north. Lenz formed an attachment for Mrs. Pittman about a year ago, when he was a pupil of hers. Since then he has been very persistent in his attentions, and has tormented her by his billet doux, which in some cases demanded money, and which often were of a threatening nature. There was a method in his madness, as he would put only a one-cent stamp on his letters and leave them unsealed, thereby deceiving her as to the nature of the missive received from the postman. These letters she sent back to Lenz in packages. But nothing seemed to discourage the ardent lover. Recently Lenz's letters became threatening, when Mrs. Pittman and her friends decided to have the mental condition of the young man investigated, and they were rather surprised to learn that his mind was unbalanced.

In the court room yesterday Lenz said: "I had a presentiment from heaven that I must write to Mrs. Pittman, by two grains of what seemed to be barley dropping from heaven; one struck me on the head and the other struck her." When the judge asked him what other presentiment he had Lenz replied: "I don't know. I am waiting for the Lord to send me one."

As Lenz was pronounced insane by the physicians after a careful examination, Judge Steele ordered him sent to the state insane asylum at St. Peter.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

WEIGHT, 168½08. NUTRITION, Good.
ABNORMALITIES, none noted (See Supv. Report) —
Coatings, normal Promptness Movement, prompt
Size, slightly dilated
Accommodation, good.

Other Reflexes,

ARTICULATION, ~~Hesitating~~, Seems good

Case No. 3576. William Lenze. 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.

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, over a year ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother died last August.
Father or Pat. Relations, ✓
Brothers or Sisters, ✓

Not much family history obtainable - "Claims he is an illegitimate Child"

Personal and Medical History of William Lenze

HERBERT, PICLER & CRAWBERS, DAVENPORT, IOWA

Whole No. 3576

Residence, Minneapolis, Minn

Date Admission, 29th November 1893.

Admitted by, D. Phelps Hour, 7 PM

How Sent, John A. Steele, Jof P. Hennepin County

Sex, Male

Age, 27

Civil Condition, Single

Children, none

Age Youngest Child, —

Occupation, Brick-Layer

Degree Education, Common

Profession Religion, Lutheran

Habits, not intemperate

Nativity, Germany (parents also born

Physicians Committing, C. A. McCollom

Correspondents,

Judge of Probate (prim

No. for Year, 146

Insane Relatives, not kno

Cause Exciting, ~~intrinsic~~, ex

Cause Predisposing, prob

Form, paranoia

Accompanying Bodily Di

Suicidal or Not,

Date of this Attack,

Duration,

No. of Attack,

No. of Admission

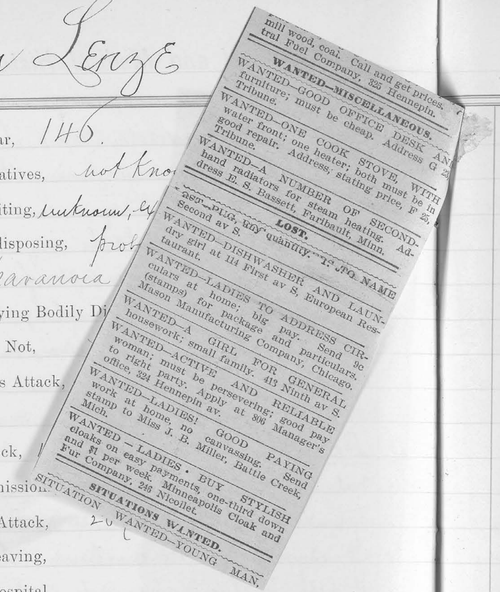
Age First Attack, 26

Time of Leaving,

Time in Hospital,

Result,





mill wood coal. Call and get prices. trial Fuel Company, 325 Hennepin.

WANTED—MISCELLANEOUS.

WANTED—GOOD OFFICE DESK furniture, must be cheap. Address G Tribune.

WANTED—ONE COOK STOVE, WITH water front one heater; both must be in good repair. Address, stating price, F Tribune.

WANTED—A NUMBER OF SECOND-hand radiators for steam heating. Address E. S. Bassett, Faribault, Minn.

LOST.

[illegible] quarrity, [illegible] NAME [illegible]

WANTED—DISHWASHER AND LAUNdress girl at 414 First av S. European Restaurant.

WANTED—LADIES TO ADDRESS CIRculars at home; big package and particulars. Stamped for Mason Manufacturing Company, Chicago.

WANTED—A GIRL FOR GENERAL housework; small family. 415 Ninth av S.

WANTED—ACTIVE AND RELIABLE woman; must be persevering; good pay to right party. Apply at 506 Hennepin av. Manager's office, 324 Hennepin av.

WANTED—LADIES! GOOD PAYING work at home, no canvassing. Send stamp to Miss J. B. Miller, Battle Creek, Mich.

WANTED — LADIES · BUY STYLISH cloaks on easy payments; one-third down and $1 per week. Minneapolis Cloak and Fur Company, 226 Nicollet.

SITUATIONS WANTED.

WANTED—YOUNG MAN.

EXAMIN

Exd by D. Phelps (Dr Ely & Hayes present) Dec 4/93

MENTAL ACTIVITY:

Clear or Confused, somewhat inaccurate

Quick or Sluggish, Quick

MEMORY:

Past Events, } Fair

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, quick

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, }

Own Mental State, } Poor.

Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

Says: sees Phenomena at night. Tells a story of loving his lady (a widow) & waited for mate her his wife, &c. Says these Phenomena told him he should go to School (University), to write to this lady &c. Admits he has had Gonorrhoea — nothing worse —

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, very slightly

Depressed,

DELUSIONS:

Systematized or Not, about Spiritualism &c

Special Subjects,

Transitory or Not,

HALLUCINATIONS: of various kinds

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Fairly Coherent but he believes

Voluble or Reticent, Quite free thoroughly in them, he follows them & tries to sustain them.

Personal and Medical History of William Lenze

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11 1/2 in WEIGHT, 168 lbs NUTRITION, Good

WOUNDS OR ABNORMALITIES, None noted (See Supv. Report)

TONGUE, Tremors, None Coatings, normal Promptness Movement, prompt

PUPILS, Equality, ✓ Size, slightly dilated

Response Light, good Accommodation, good

SIGHT, Good

HEARING, normal

COORDINATION, Arms, } Good, as usual tests

Legs, }

TREMORS, Hands, none Tongue, none

Facial Muscles, mustable General, None

REFLEXES, Patellar, equal; about 3 or 4; D. P's Scale —

Other Reflexes,

ARTICULATION, ~~Hesitating~~, seems good ~~Slurred~~, Some foreign accent.

FACIAL EXPRESSION, Fairly good.

SENSIBILITY, ✓

HEART, Sounds are good

LUNGS, Sounds are good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Recent kept

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, over a year ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, mother died last August.

Father or Pat. Relations, ✓

Brothers or Sisters, ✓

Cat much family history obtainable - Claims he is an illegitimate Child.

Personal and Medical History of William Lenz.

ALBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Deputy-Sheriff Adolph Peterson, with the following history of case. There is no history of consanguinity; as to heredity, not known. This is 1st attack, so far as known; first symptoms manifested more than 1 year ago, by writing incoherent letters & annoying a lady in this way. Disease seems increasing. He is, at times, rational but at no regular intervals. Is incoherent most of the time. Derangement is now shown by his believing in Signs, which tell him what to do; Incoherence of ideas; systematized delusions of grandeur; hallucinations of sight. Is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Previously, addicted to predominant passions and religious impressions. There is no history of intemperance nor of any severe disease or injury to head. He has not been restrained or confined. Cause of the disease unknown, except some degeneracy. Has had no medical treatment. — — —

On personal examination, the following noted; facial muscles unstable; pupils dilated. Said "the Signs tell him what to do" - Was incoherent in his religious impressions. Talks of electricity playing upon him. Talked incoherently & somewhat excitedly. Was quiet most of the time during examination; talked freely of expressed delusions. From other sources, we learn, he is an Ovanist. letter received by lady, a teacher.

Nov 29 Nov 29/93. On admission, was put on B 3rd (SR. Complexion, dark; hair, dark; Eyes grey; condition of skin, good; some small pimples; marks, scars, ulcers, bruises, hernicae, none; bodily condition clean; behavior is good). Pulse 102. Tr 99.4. Nov 30/93. Was quite restless, the greater part of last night; slept only 4 hours. AM " 100 " 98.8. Appetite good; bowels regular & free; no cough noticed. Quiet; walks about the hall; reads some. Answers questions freely; no delusions yet noticed. PM Pulse 99. Tr 99. - no complaints or injuries to note. Habits are clean.

" 30

Dec 1 Dec 1/93. Was quiet & slept 8 hours, last night. AM. Pulse 98. Tr 98.6. Talks some. Is deluded, when drawn out in conversation. PM Pulse 100. Tr 98.8. Dec 2/93. Quiet, sleeping 6 hours, last night. AM. Pulse 94 Tr 98.8. Appetite good. Conduct & behavior, by day, as above described. PM. Pulse 90 Tr 99. -

" 2 Dec 3/93. Slept fairly well (7 hours), last night. AM. Pulse 90. Dec 4/93. AM. Pulse 88. Somewhat restless today, walking the hall a good deal. Talks when addressed. Appetite good. Makes no complaints.

" 3/4 Wt today, 170 pds. (a slight gain). Dec 5/93. AM. Pulse 86. Now also manifests illusions; "sees pictures, when asleep, and knows their meaning". Restless during the day. Appetite good; helps some, with ward-work. Dec 6/93. Has been quiet, sleeping 8 hours or each of past 3 nights. AM

" 5 Pulse 84. Conduct & behavior, by day, continue about as usual. Dec 7/93. Has somewhat restless

" 6 for a couple of hours last night, but slept 6 hours. Dec 8/93. During the 2d week, patient

" 7 has been sleeping 7 to 8 hours each night. Pulse has been about normal. Appetite good. He has been

" 14 quiet & well-behaved. Occasionally will sit by himself, and talk & laugh. Talks fairly freely but still shows delusions. Reads. Writes quite a few letters (sample attached); Works on ward. Physical Condition good.

" 31 Dec 31/93. Sleeps well, at night. Appetite good. Bowels regular. Is quiet & well behaved. Still manifests delusions. Writes occasional letters, all about in the same style as the one above noted. Seems contented here. Makes no complaints. Works in the dining-room.

1894 Jan 2/31 Jan 1/94. Wt 170 pds. Pulse 74. Jan 31/94. Is well behaved. Talks freely. Reads some and writes occasional letters. Talks to himself & laughs, at times. Works on ward. Goes walking

Feb 1/28 Feb 1/94. Wt 169 pds. Pulse 80. Feb 27/94. Quiet & well-behaved. Makes no complaints. Works on

Personal and Medical History of William Lenz

1893

Boclister Mineral Point, Dec 11, 1893.

12/1897

Dear Mrs. Pillsbury.

It looks to me, if I shall go from a religious standpoint, that God has brought misery in this world, in order to make some men satisfied. This I don't believe, and if I do be called crazy all my lifetime. And I am sure this is wrong for you heathens outside of the Asylum to believe. You tyrants from the church, to the democratic policy. How dare you teach such doctrine. All those men that are in the Asylums, could better the world in some ways. we have to have good country roads, and they could do such work all night, but you rulers that are in power, are bulheaded, and selfish. We can called that wise if you

kitchen - Physical condition good. Habits clean. here under the "Law of 1893" recently declared Returned under New Warrant from Olneto County - mits; reads some; writes a great many letters; the ward. Habits are clean. — " — Pulse 90. March 17/94. Worked today in kitchen ay. March 31/94. Continues about as last, generally Physical condition is good. — — — ri weight); Pulse 80. April 15/94. Worked today in kitchen. not seem to change any. Evidently still holds to his many letters, showing his delusions; Seems contented here. Behaves well; talks when addressed. Makes no complaints. o often of his delusions. Works on ward; Health good. Seems working in the kitchen & willingly helps 94. No special change. Works daily in the kitchen. occasionally in kitchen. Always quiet & well behaved. e - Walks out daily. Physical Condition good. - sleep, without apparent cause) - Aug 31/94. - Quiet eks but little; when he does it is as politics - Works on ward - t the same — Has not mentioned his delusions of late - lks but little. Reads considerably. Seems interested what depressed, at times. Natural dress. Goes out walking - t 163 lbs. Pulse 90. Jan 2/95. Wt 169 pds. - Pulse 84. newhat restless, walking the hall, a good deal. Talks ine. Clean & tidy - Goes out walking. Works on ward - Oct 1/95. Wt 168 pds. Pulse 84. Feb 28/95. No noticeable Change. Talks freely. Restless, at times;

Mar 1/28 Has a Peculiar Habit of jerking head & shoulders. Works on ward. March/95. Wt 169 pds. Pulse

" 31 March 31/95. About the same, from month to month. Works on ward. Physical Condition good.

Apl 1/30 April 1/95. Wt 170 lbs. Pulse 72. April 30/95. No change noticeable in any way.

May 1/16 May 1/95. Wt 170 " " 72. May 16/95. Quiet working in the dining-room. Jocular.

" 31 May 31/95. Again working in Dining-room - Behaves well: plays games &c - Is kind & courteous.

June 1/5 June 1/95 - Wt 173 pds. Pulse 92. June 5/95. Had a convulsive twitching or jerking of left arm, nearly all day & was quite stupid & depressed: said "he did not feel well". Looked drowsy & unsteady & unnatural: Head & neck bent forward, & occasionally the movement would be in each arm & in neck & shoulders. June 10/95. Threw a chair at patient Sheehy who was abusing him & said he would kill him at first chance. Transferred to B. today.

" 30 June 30/95. Looks about the same, from month to month. Very quiet: talks but little unless addressed; answers rationally - Reads & writes a good deal. Works some on ward. Health seems good.

July 1/31 July 1/95. Wt 165 pds. Pulse 84. Talks freely & rationally, but shows some delusions, at times. Appears to have made some improvement, of late. Works on ward. Makes no complaints.

carried to Transfer Book "A" page 224

1893 Was brought here by Deputy-Sheriff Adolph [illegible]. There is no history of consanguinity; as to heredity, n[illegible]. First symptoms manifested more than 1 year ago, in this way. Disease seems increasing. He is, at [illegible] incoherent most of the time. Derangement is m[illegible] him what to do; incoherence of ideas; hysteriat[illegible]. Is neither disposed to injure others, nor suicidal, n[illegible] predominant passive and religious impressio[illegible] of any severe disease or injury to head. He[illegible] of the disease unknown, except some degeneracy. On Personal Examination, the following noted "the Legis tell him what to do" - Was incoherent in [illegible] playing upon him. Talks incoherently & somew[illegible] examination; talked freely & expressed delusions. R[illegible] letter received by Lady, a teacher.

Nov 29 Nov 29/93. On admission, was put on B[illegible] (SR. 6[illegible] skin, good; some small pimples; marks, scars, ulcers, br[illegible] is good). Pulse 102. Temp 99.4. " 30 Nov 30/93. Was quite r[illegible] hours. Appt. good; 100 " 98.8. Appetite good; bowels [illegible] about the hall; reads some. Answers questions freely [illegible] no complaints or injuries to note. Habits are clean [illegible]

Dec 1 Dec 1/93. Was quiet & slept 8 hours, last night. Appt. [illegible] " 2 drawn out in conversation. Pulse 100. Temp [illegible] Appt. Pulse 96 Temp 98.8. Appetite good. Conduct & behav[illegible] " 3/4 Dec 3/93. Slept fairly well (7 hours), last night [illegible] restless today, walking the hall a good deal. Talks when addressed. Appetite good. Makes no complaints. " 5 Wt today, 170 pds. (a slight gain). Dec 5/93. Appt. Pulse 86. Now also manifests illusions: "sees pic-tures, when asleep, and knows their meaning." Restless during the day. Appetite good: helps some, with ward-work. " 6 Dec 6/93. Has been quiet, sleeping 8 hours or back of last 3 nights. Appt. " 7 Pulse 82. Conduct & behavior, by day, & routine about as usual. Dec 7/93. Has somewhat restless " 14 for a couple of hours last night, but slept 6 hours. Dec 14/93. During the the 2d week, patient has been sleeping 7 to 8 hours each night. Pulse has been about normal. Appetite good. He has been quiet & well-behaved. Occasionally will sit by himself, and talk & laugh. Talks fairly freely but still shows delusions. Reads. Writes quite a few letters (sample attached); Works on ward. Physical Condition good.

" 31 Dec 31/93. Sleeps well at night. Appetite good. Bowels regular. Is quiet & well behaved. Still manifests delusions. Writes occasional letters, all about in the same style as the one above noted. Seems contented here. Makes no complaints. Works in the dining-room.

1894 Jan 2/31 Jan 1/94. Wt 170 pds. Pulse 92. Jan 31/94. Is well behaved. Talks freely. Reads some, and writes occasional letters. Talks to himself & laughs, at times. Works on ward. Goes walking.

Feb 1/28 Feb 1/94. Wt 169 pds. Pulse 80. Feb 22/94. Quiet & well-behaved. Makes no complaints. Works on

uphold wrongness. not for the sake in getting you killie full, by rights I say, and that comes anarchistsms in the country and tramps and med[illegible] insanity. I am no anarchist and no socialist, but I am a liberallist and die like one. We all have to work, in order to keep healthy. If a man is lazy, then make him do according to his ability. But these ministers teach insanity, because the are afraid of work, that is very plain and so as the saloon keeper and they jew and the tobago man and the roach to hell with them I say, even the difel himself dont want you, you will be dogs and buzzards for your gloathonness. you dont know your own shadow ideas. O' babilon thy tower is read for destruction. Und innocent

1895 kind industrious people have to go under with you. A good newspaper is better than any thing else to civilize and Judge and Puck have done more good in the U.S. states than all the ministers. But the only trouble is, they are some times to partisanes and, dont strike up for truth, you tax men for keeping the asylums up, all this money is a fair capital because you get nothing in return for it. and some good public school teacher got to work for forty dollars a month and drive a wash Doctor makes people sick for the sake of filling his belly. Increase you school system and let every one work some good country roads we must have, and commerce must be extended from

Feb 1/95 Feb 1/95. Wt 168 pds. Pulse 84. Feb 28/95. No noticeable change. Talks freely. Restless, at times; Mch 1 has a peculiar habit of jerking head & shoulders. Works on ward. " 31 March 31/95. About the same, from month to month. Works on ward. March 1/95. Wt 169 pds. Pulse 92. Apl 1/30 April 1/95. Wt 170 pds. Pulse 92. April 30/95. No change noticeable, in any way. May 1/16 May 1/95. Wt 170 " " 92. May 16/95. Put working in the dining-room. Is indolent. " 31 May 31/95. Again working in Dining-room - behaves well; plays games &c - Is kind & secretive. June 1/5 June 1/95. Wt 173 pds. Pulse 92. June 5/95. Had a convulsive twitching or jerking of left arm, nearly all day & was quite stupid & depressed; says "he did not feel well". Walked somewhat unsteady & unnatural. Head & neck bent forward & occasionally the movement would be in back arm & in neck & shoulders. " 10 June 10/95. Threw a chair at patient & then who was abusing him & said he would kill him at first chance. Transferred to B[illegible] today. " 30 June 30/95. Looks about the same, from month to month. Very quiet; talks but little unless addressed; answers rationally. Reads & writes a good deal. Works some on ward. Health seems good. July 1/31 July 1/95. Wt 168 pds. Pulse. Talks freely & rationally but shows some delusions, at times. Appears to have made some improvement, of late. Works on ward. Makes no complaints

Carried to Transfer Book "A" page 224

kitchen - Physical condition good. Habits clean. here under the "Law of 1892" "recently declared Returned under" New Warrant" from Olmsted County - mits; reads some; writes a great many letters; the ward. Habits are clean. — " — ; pulse 90. March 17/94. Worked today, in kitchen ay. March 31/94. Continues about as last, generally Physical condition is good. — " — i weight); Pulse 80. April 15/94. Worked today in kitchen. not seem to change any. Is society still talks of his many letters, shows his delusions; seems entitled he- Behaves well; talks when addressed. Makes no complaints. s often of his delusions. Works on ward; health good. Seems working in the kitchen & willingly helps 94. No special change. Works daily in the kitchen. occasionally in kitchen. Always quiet & well behaved. e - Walks out daily. Physical condition good. - pleasant, without apparent cause) - Aug 31/94. Quiet eaks but little; when he does it is a politics - Works on ward - t the same — Has not mentioned his delusions of late - lks but little. Reads considerably. Seems interested what depressed, at times. Nature does. Goes out walking. 163 lbs. Pulse 90. Jan 2/95. Wt 169 pds. Pulse 84. newhat restless, walking the hall, a good deal. Talks ne. Clean & tidy - Goes out walking. Works on ward -

Personal and Medical History of William Lenz.

LIBERT, FIDLER & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy - Sheriff Adolp
There is no history of consanguinity; as to hereditary
first symptoms manifested more than 1 year
in this way. Disease seems increasing. He is
incoherent most of the time. Derangement
him what to do; incoherence of ideas; hysteri
neither disposed to injure others, nor suicid
predominant passions and religious impre
of any severe disease or injury to head
of the disease unknown, except some degener
On personal examination, the following w
"the Legis tell him what to do". Was incoheren
playing upon him. Talked incoherently & sou
examination; talked freely & expressed delusions
letter received by lady, a teacher.

Nov 29 — Nov 29/93. On admission, was put on B.T. (
skin, good; some small pimples, marks, scars, ulce
" 30 — is good). Pulse 102. Temp 99.4. Nov 30/93. Was f
hours. Am. " 100 " 98.8. Appetite good;
about the hall; reads some. Answers questions
no complaints or injuries to note. Habits are cl

Dec 1 — Dec 1/93. Was quiet & slept 8 hours, last night. M
" 2 — drawn out in conversation. Pm. Pulse 100.
Am. Pulse 94 Temp 98.8. Appetite good. Conduct &
" 3/4 — Dec 3/93. Slept fairly well (7 hours), last night. Was restless today, walking the hall a good deal. Talks when addressed. Appetite good. Makes no complaints.
" 5 — Wt today, 170 pds. (a slight gain). Dec 5/93. Am. Pulse 86. Now also manifests illusions; "sees pictures, when asleep, and knows their meaning". Restless during the day. Appetite good: helps some, with ward-work. Dec 6/93. Has been quiet, sleeping 8 hours as a rule of past 3 nights. Am.
" 6 — Pulse 84. Conduct & behavior, by day, continue about as usual. Dec 7/93. Has somewhat restless
" 7 — for a couple of hours last night, but slept 6 hours. Dec 14/93. During this the 2d week, patient
" 14 — has been sleeping 7 to 8 hours each night. Pulse has been about normal. Appetite good. He has been quiet & well-behaved. Occasionally will sit by himself, and talk & laugh. Talks fairly freely, but still shows delusions. Read. Writes quite a few letters (sample attached); Mends in ward. Physical condition good.
" 31 — Dec 31/93. Sleeps well at night. Appetite good. Bowels regular. Is quiet & well behaved. Still manifests delusions. Writes occasional letters, all about in the same style as the one above noted.

1894
Jan 2/31 — Seems contented here. Makes no complaints. Works in the dining-room. Jan 1/94. Wt 170 pds. Pulse 74. Jan 31/94. Is well behaved. Talks freely. Reads some and writes occasional letters. Talks to himself & laughs, at times. Works in ward. Goes walking
Feb 1/28 — Feb 1/94. Wt 169 pds. Pulse 80. Feb 22/94. Quiet & well-behaved. Makes no complaints. Works in

Ocean to Ocean. Air must be understood, like a clock. If we put one figure from the dial, we can't make it go very well. The figures are different stations in life, and each one must fill his position proper.
The hands are the steamboats which connect the nations from all over. The machinery inside is the inside of the earth which supports the nations and from which all wealth arrives. Now you must teach this doctrine to the people, through the leading newspapers of the country. down proprietors must uphold liberals ums, and condemn dilitantiisms, kill anarchistums, and drown ticsalliisms, Do good & trust and god will give me freedom if I am right, and if I am wrong I am willing to die.
yours very truly
Gentlemen please Wm Lenz.
forward this letter to Mrs. M. Pittman
Curtis Building Minneapolis Minn

Personal and Medical History of William Lenz

1894 (Cont'd)

Feb 28 — the ward; also helps sometimes in the kitchen - Physical condition good. Habits clean.
" 24 — Feb 24/94. This patient was Committed here under the "Law of 1892" recently declared illegal - He was, to day, Taken out and Returned under "new Warrant" from Olmsted County -
" 28 — Feb 28/94. Well-behaved; makes no complaints; reads some; writes a great many letters; still manifests delusions; works well on the ward. Habits are clean. — "
Mar 2/17 — March 2/94. Wt 174 pds (some gain in flesh); Pulse 90. March 17/94. Worked today in kitchen.
" 19/23 — March 19/94. Was working some outside, today. March 31/94. Continues about as last, generally described, above. Quiet & well-behaved. Physical condition is good. — —
Apl 2/14 — April 2/94. Wt 179½ pds (a further gain in weight); Pulse 80. April 9/94. Worked today in kitchen.
" 30 — April 30/94. Patient's mental condition does not seem to change any. He evidently still holds to his delusions. Talks freely; still writes a good many letters, showing his delusions; seems contented here.
May 1/31 — May 1/94. Wt 173 pds. Pulse 72. May 31/94. Behaves well; talks when addressed. Makes no complaints. Does not write so frequently; & does not speak so often of his delusions. Works on ward; health good.
June 1/30 — June 1/94. Wt 171 pds. Pulse 76. June 15/94. Seems working in the kitchen & willingly helps with any work he is asked to do. June 30/94. No special change. Works daily in the kitchen.
July 1/31 — July 1/94. Wt 174 pds. July 31/94. Works on ward & occasionally in kitchen. Always quiet & well behaved. Has not written any letters now for some time. Walks out daily. Physical condition good.
Aug 2/31 — Aug 2/94. Wt 165 pds. Pulse 92. (Has lost in flesh, without apparent cause). Aug 31/94. Quiet and well-behaved. Reads papers & books. Talks but little; when he does it is on politics. Works on ward.
Sep 1/13 — Sep 1/94. Wt 168 pds. P 76. Sep 30/94. About the same. Has not mentioned his delusions of late.
Oct 1/31 — Oct 1/94. Wt 172 " " 78. Oct 31/94. Talks but little. Reads considerably. Seems interested in politics. Is quiet & well-behaved. Somewhat depressed, at times. Natural. Does not walking.
Nov 1 — Nov 1/94. Wt 165½ pds. Pulse 86. Dec 1/94. Wt 163 pds. Pulse 90. Jan 2/95. Wt 169 pds. Pulse 84.
Dec 1 1894 / Jan 2/31 1895 — Jan 31/95. Behavior good. At times, somewhat restless, walking the hall a good deal. Talks but little. Makes no complaints. Reads some. Clean & tidy. Goes out walking. Works on ward.
Feb 1/28 — Feb 1/95. Wt 168 pds. Pulse 84. Feb 28/95. No noticeable change. Talks freely. Restless, at times; has a peculiar habit of jerking head & shoulders. Works on ward. March 1/95. Wt 169 pds. P 92.
Mar 1/31 — March 31/95. About the same, from month to month. Works on ward. Physical condition good.
Apl 1/30 — April 1/95. Wt 170 pds. Pulse 92. April 30/95. No change noticeable in any way.
May 1/8 — May 1/95. Wt 170 " " 72. May 16/95. Quit working in the dining-room. Is violent.
" 31 — May 31/95. Again working in dining-room. Behaves well; plays games &c. Is kind & secretive.
June 1/8 — June 1/95. Wt 173 pds. Pulse 92. June 8/95. Had a convulsive twitching or jerking of left arm nearly all day & was quite stupid & depressed. Said "he did not feel well". Walked somewhat unsteady & unnatural. Head & neck bent forward & occasionally the movement would be in each arm & in neck & shoulders. June 10/95. Threw a chair at patient Keely who was abusing him & said he would kill him at first chance. Transferred to W.B. today.
" 30 — June 30/95. Keeps about the same, from month to month. Very quiet; talks but little unless addressed; answers rationally. Reads & writes a good deal. Works some on ward. Health seems good.
July 1/31 — July 1/95. Wt 166 pds. P 84. Talks freely & rationally but shows some delusions, at times. Appears to have made some improvement, of late. Works on ward. Makes no complaints.

Carried to Transfer Book A page 224

Personal and Medical History of Andrew E. Berg

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3577.

Residence, Faribault, Minn.

Date Admission, 4th December 1893.

Admitted by, Dr Phelps. Hour, 4.30 PM

How Sent, L. & M. Ott, Jo. Co., Rice County

Sex, Male

Age, 15.

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Student (Father, Janitor

Degree Education, Common School

Profession Religion, not a Church member

Habits, not intemperate

Nativity, Faribault, Minn (Parents born in Sweden).

Physicians Committing, G. H. Hoob & D. M. Cook

Correspondents, None given in "Papers"

Family Physician, D. M. Cook, Faribault, Minn.

No. for Year, 147.

Insane Relatives, none

Cause Exciting, Masturbation

Cause Predisposing, not stated

Form, Subacute Insanity

Accompanying Bodily Disorder, No history of any.

Suicidal or Not, not attempted; but threatens.

Duration of this Attack, about one month ago

" " Present Residence, about one month

Number of Attack, 1st

Number of Admissions, 1st

Age First Attack, about 15.

Time of Leaving, Feb. 28 '94

Time in Hospital, 2 mos 24 ds

Result, Rec.

Discharged from Minnesota Hospital for the Insane 1894 Because Illegally Committed

EXAMINATION ON ADMISSION.

Exam'd by Drs Herzog & Eby Dec 8/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Fair

MEMORY:

Past Events, Fair

Recent Events, /

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, ~~good~~ Impaired

Own Mental State, Impaired

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Nurse & Attendant both say: did not hear says "may have threatened to kill her, while angry." —

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Slightly indifferent

Exalted,

Depressed,

DELUSIONS: None noted

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, quite free

Personal and Medical History of Andrew E. Berg

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8 in WEIGHT, 136½ pds NUTRITION, Fair; somewhat anaemic

WOUNDS OR ABNORMALITIES, Goitre

TONGUE, Tremors, slight Coatings, none Promptness Movement, Prompt

PUPILS, Equality, Equal Size, Normal

Response Light, Yes Accommodation, Yes

SIGHT, Good.

HEARING, Good in ear; impaired in right from Complications following measles.

COORDINATION, Arms, Good

Legs, Some incoordination

TREMORS, Hands, None Tongue, Slight

Facial Muscles, none General, none.

REFLEXES, Patellar, about 3 on Lt.

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Dull

SENSIBILITY, normal

HEART, Dulness distinct; no murmurs.

LUNGS, Healthy

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Gradual

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

Mother or Mat. Relations, None known to be insane.

Father or Pat. Relations, None

Brothers or Sisters,

Personal and Medical History of Andrew E. Berg

EBBERT, PICLER & CRAMBERS, DAVENPORT, IOWA.

1893 Was brought here by Sheriff Chas N. Stewart, with the following history. There is no history of Consanguinity or heredity. This is 1st attack. Symptoms appearing about one month ago. Was very much excited and tried to injure others. Disease seems increasing, but is variable and there are rational intervals, but at irregular periods. Derangement is now shown by his desire to injure himself and others. Suicide has not been attempted; only he threatens to kill himself; propensity now active. Is destructive in habits. Previously, was always stubborn & hard to manage. There is no history of intemperance nor of any severe disease or injury to head. At times, has to be tied to keep him under Control. Supposed Cause of disease is masturbation. Has had no medical treatment. — — — On Personal Examination, General appearance found to be healthy, but he confesses to the habit of masturbation; has been addicted to this habit, for some time. Patient was tried during visit of examining physicians & did nothing. Was quiet while they were there, but the mother & older brother said he was very ugly, at times, and threatened their lives, throwing anything at them, he could get hold of.

Dec 1 Dec 1/93. On admission, is in fair physical condition. Has put on 8# (S.R. Complexion light; hair light; eyes blue; condition of skin, good; Mark; none on left shoulder; bodily condition, clean; behavior, good;). — Pulse 92. (later 88). Appetite good; bowels seem regular. No cough noticed. Is well behaved today. Very quiet. Walks about hall some. Answers questions promptly, but does not talk much unless addressed. P.M. Pulse 86. " 5 Dec 5/93. Slept 6 hours, last night. A.M. Pulse 90. Is quiet; Talks only when addressed. No delusions noted. No complaints or injuries. " 6 Dec 6/93. Quiet restful, and sleeping 8 hours, last night. A.M. Pulse 86. Appetite good. Quiet; well-behaved; talks some with his fellow-patients. " 7 Dec 7/93. Was restless for an hour or so, but slept 7 hours, last night. A.M. Pulse 84. " 8 Dec 8/93. Passed last night about as the one preceding. A.M. Pulse 80. Works some. " 9/10 Dec 9/93. A.M. Pulse 76. Dec 10/93. A.M. Pulse 76. Sleeps well at night. Habits are good. — Talks freely. Quiet & well-behaved. Somewhat troubled with goitre; given iodine for same. " 17 Works quite well on the ward. Dec 17/93. Has Continued (since last noted), to sleep well at night; uniformly 8 hours, each. Pulse has been about about normal. Has been quiet & well-behaved. Clean, tidy & of good personal habits. Plays games, reads some; goes out walking. Talks freely. " 31 Works on 6th ward. Is in good physical condition. Dec 31/93. Apparently, Continues to rest & sleep well, at night. Appetite good. Talks freely & fairly sensibly. Plays games. Works on 6th ward. 1894 Makes no complaints. Physical Condition is good.

Jan 2/15 Jan 2/94. Wt 133½ #s. Pulse 74. Jan 15/94. Goitre is somewhat reduced & apparently, makes him no trouble. Is quite silent & reserved. Called. Is well-behaved. Shows no delusions. Makes no complaints. Plays games &c. Works on the adjoining hall (C2). — Jan 31/94. Continues quietly behaved. Talks freely now; Makes no complaints; no delusions noted. Is in good Spirits. —

Feb 1/28 Feb 1/94. Wt 144 #s (a gain of 10½ #s in past months). — Pulse 76. Feb 28/94. No change to note. " 28 Feb 28/94. Patient was committed here under the "law of 1893", recently declared unconstitutional. He went home today with the County Attorney of this County. —

Crossed off the records — was illegally committed —

Personal and Medical History of Alois Fait

from 253.

1894 Continued

April 13 and stubborn & occasionally takes a notion that he will not stay in bed or keeps his clothing on, and a struggle generally takes place before he will go back to bed. Remains in bed all day, today. April 13/94. Sleeps. " 14/16 April 14/94. Patient had 2 Convulsions last night. April 15/94. Has one Convulsion last night. April 21/94. Has one convulsion during the night. " 26 April 28/94. Engaged in a fight with a fellow-patient (Peter Rondeau) while out walking; no injuries done. " 30 April 30/94. Appetite good; bowels regular. Behavior is, at present, fairly good, but he is very easily provoked when he becomes very ugly & pugnacious. Is subject to these "Convulsions or Spasms". Habits are clean. He does not work any. — Health seems good.

May 31 May 1/94. Wt 158½ #s. Pulse 88. May 31/94. Patient has had 35 Convulsions, during this month; all of them occurring at night; none have been reported, by day. Conduct & behavior do not change any. For some time, has been kept on 6th on account of his ugly & pugnacious disposition. Health seems good.

June 30 June 1/94. Wt 163 #s. Pulse 86. June 30/94. 32 nocturnal Convulsions are reported for this month. Patient does not change any, either as regards his conduct or behavior; though possibly he may have been a little better behaved this month. Yet he is always inclined to be easily excited & irritable. —

July 31 July 1/94. Wt 160 #s. Pulse 72. July 31/94. On 3 or 4 different occasions, he has provoked and been engaged in fights with fellow patients, during the month. On one occasion, had to be secluded. Fits still continue; 41 being reported (rightly) for this month. In all respects, is about the same.

Aug 16 Aug 1/94. Wt 160 #s. Pulse 86. Patient had 44 Convulsions, during the night. Aug 10/94. The following nocturnal Convulsions reported since last note. 2 on 2nd Inst; 2 on 3d Inst; 3 on 4th Inst. 2 on 5th Inst; 1 on 7th Inst; 1 on 9th Inst. " 14 Aug 14/94. Had some trouble, today, with a fellow-patient, (A. McDonald) & struck him on the eye; Fait having no provocation, whatever. " 31 Aug 31/94. Behavior is fairly good. He stays in his room, nearly all the time. Is very easily provoked & is always ready to fight, if in the least provoked by patients. Thinks that they all ought to do as he wants them to. Subject to these "nocturnal Convulsions", which are quite frequent was never known to have one in the daytime. Works a little on ward. Habits are neat & clean.

Sep 30 Sep 3/94. Wt 158 #s. (Has lost some, during past month; no known cause). Pulse 72. Sep 30/94. Only 5 nocturnal Convulsions have been reported during this month. Otherwise about as usual.

Oct 1/31 Oct 1/94. Wt 157 #s (is regaining some of lost flesh). Pulse 78. Oct 2/94. Yesterday, he had some trouble with a fellow-patient (D. Bush). Became very angry; could not control himself; got into one of those "Spells" he generally has, when finds he has to submit to some one else's authority. In such "Spell" he lies, apparently unconscious & will not move or get up. — " 31 Oct 31/94. 13 nocturnal Convulsions reported for the month. Still quite often gets into trouble & fights with his fellow patients, he generally being the aggressor. Otherwise no change.

Nov 30 Nov 1/94. Wt 163 #s. Pulse 69. Nov 30/94. According to attacks and notes, patient has had 30 convulsions, during the night, in this month. Had also a very severe one, on 26th in daytime. Had them, & he carried to his room & laid on the bed. Appetite keeps good. Is very easily provoked, and makes himself officious towards his fellow-patients; at times injures them by sticking & hurting them. Has been in bed quite often, during last 8 days, off & on. Works a little on ward. Habits clean.

Dec 31 Dec 1/94 Wt 153 #s. (Last lot some in flesh, during past month). Pulse 94. Dec 31/94. Only 8 nocturnal Convulsions reported, for this month. Otherwise, he keeps about as usual. Jan 1/95 (18th Year) Wt 151 #s. Pulse 94. " 31 Jany 31/95. Had only 5 nocturnal Convulsions, this month. Fought a couple of times. Otherwise no change —

Carried to Transfer Book "A" Page 158 —

Personal and Medical History of Albert F. Meyette

GIBERT, FULLER & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3579

Residence, Rochester, Minn.

Date Admission, 5th December 1893.

Admitted by, Dr. Kilbourne Hour, 5.30 P.M.

How Sent, Thomas Fraser, Jof C. Olmsted County

Sex, Male

Age, 40.

Civil Condition, married

Children, 3

Age Youngest Child, —

Occupation, Laborer

Degree Education, Common School

Profession Religion, Universalist

Habits, not stated

Nativity, Illinois (Parents born in Canada).

Physicians Committing, E. W. Cross & Chas J. Granger

Correspondents, (wife) see — Wm Meyette.

Family Physician H. A. Allen. Rochester. Minn. —

No. for Year, 1149.

Insane Relatives, none (but father intemperate).

Cause Exciting, Loss of a child

Cause Predisposing, Chronic

Form, acute melancholia

Accompanying Bodily Disorder, none given in history.

Suicidal or Not, not

Date of this Attack, 2 years ago

Duration, about 2 years. —

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 38.

Time of Leaving, ~~Camp~~ Dec 23, 93

Time in Hospital, 18 ~~11~~ days.

Result, Rec'd.

Crossed from Incurable List, April 1st, 1891, because ill, still committed.

EXAMINATION ON ADMISSION.

Exa by Dr Herzog, Dec 13/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, normal

MEMORY:

Past Events, good

Recent Events, good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, quite good

Own Mental State, Always considered himself all right — Does not know why he was sent here. Expects to be discharged up.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

see attached slip ⊘

EMOTIONAL STATE:

Normal, Calm, Yes

Indifferent,

Exalted,

Depressed,

DELUSIONS: Denies those mentioned in history.

Systematized or Not, none detected now.

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none brought out

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, quite free.

Personal and Medical History of Albert F. Meyette

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10 in WEIGHT, 132 pds. NUTRITION, below normal

WOUNDS OR ABNORMALITIES, right hand off (cut off by drilling machine about 6 years ago).

TONGUE, Tremors, slight Coatings, whitish about [illegible] Promptness Movement, prompt

PUPILS, Equality, equal — (Paresis left eye, inner angle)

Response Light, ready Accommodation, normal.

HEIGHT, good

Facial Muscles, Gener[illegible]

REFLEXES, Patellar, unequal

Other

HABITUAL EXPRESSION

MENTALITY, Memory, Judgment, Will, Conduct, Habits

LABORATORY EXAMINATIONS

URINE,

SPUTUM,

BLOOD,

PSYCHOPHYSICAL EXAMINATIONS

TEMP.,

HISTORICAL.

MODE OF INVASION, SHORT GRADUAL OR SUDDEN

Hereditary (Specify—"Insanity," "Hysteria," "Epilepsy," "Neurasthenia," or "Inebriety,")

Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Exa by Dr Herzog, Dec 13/93.

Response to commands prompt and correct. Can read and write. Knows the month, day of week, year, and place. Can tell correctly the number of days in a week, months in a year, and days in a month. Can tell correctly the number of days in a week, months in a year, and days in a month. Can tell correctly the number of days in a week, months in a year, and days in a month

Personal and Medical History of Albert F. Meyette

Whole No. 3579

Residence, Rochester, Minn.

Date Admission, 5th December 1893.

Admitted by, Dr. Kilbourne Hour, 530 PM

How Sent, Thomas Fraser, Jof P. Olmsted Co.

Sex,

Age,

Civil C

Childre

Age Yo

Occupa

Degree

Professi

Habits,

Nativity,

Physicia

Correspo

Family C

Evd by D

MENTAL

Clear or

Quick or

MEMORY

Past Ever

Recent Ev

Special Su

PERCEPTI

Alert or D

Correct or

REASONING

Ordinary Su

Own Mental

Special Subj

GENERAL D

See att

No. for Year, 149.

Insane Relatives, None (but father intemperate).

Cause Exciting, Loss of a child

Cause Predisposing, Chronic

⊗

Says that he was much dejected & downcast at time he was in Court, which he explains by the fact that his home was being broken up. He also states that the Sheriff & others told him that he would not be here (at hospital) long, & would, in the mean time, be allowed to go down town & see his people. - He denies any drink-habits.

Dec 14/93.

Mrs Mayette (his wife) gave the following information today. - States patient had the idea that his friends were plotting against him & accused his wife of knowing all about this & got quite angry when she would not tell him. Patient never offered to harm his wife. She thinks he has forgotten a great many things (in regard to the delusions he has had) but during wife's frequent visits he has not mentioned to her anything about these delusions. Never had suspicions beyond the fact that he thought his wife knew these matters & things & would not tell him. He has always been a quiet, hard-working man; never offered violence to anyone. These delusions were the only cause & reason for having him Committed here. These "plottings" seemed to come in the form of fear that some one would arrest him. Patient seemed to have gradually grown worse since death of his little boy. Never uttered a word against wife or made accusations against her until this happened.

Personal and Medical History of Albert F. Meyette

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10 in WEIGHT, 132 pds. NUTRITION, below normal

WOUNDS OR ABNORMALITIES, right hand off (cut off by drilling machine about 6 years ago).

TONGUE, Tremors, Slight Coatings, whitish at back & middle Promptness Movement, prompt

PUPILS, Equality, equal - (Panus on left eye, uniform size,

Response Light, ready Accommodation, normal.

SIGHT, good

HEARING, Normal

COORDINATION, Arms, not much impaired; fingers, nose, eyes shut, fairly good.

Legs, Standing, eyes shut, sways slightly; turning quickly, fairly good.

TREMORS, Hands, none Tongue, slight

Facial Muscles, none General, none.

REFLEXES, Patellar, unequal; right + - left about 3.

Other Reflexes,

ARTICULATION, Hesitating, no Slurred, no - quite clear.

FACIAL EXPRESSION, normal.

SENSIBILITY,

HEART, Action rapid; strong; no murmurs; apex a little displaced, downward, & left.

LUNGS, seem good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Record kept

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, See history ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

No history of any heredity

Personal and Medical History of Albert F. Meyette.

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Sheriff C.H. Stewart, attended by Wm Meyette, with the following history. — Here is no history of either Consanguinity or heredity. This is 1st attack; symptoms manifested 2 years ago; then entertained delusions. The disease seems increasing, but is variable & there are paternal intervals, occurring mostly at night. Derangement now shown by the idea that friends are plotting against him. Patient is neither disposed to injure others, no suicidal, no filthy or destructive. He has been opposed to the presence of certain persons. His father was addicted to intemperance. Has not been subject to any severe disease &c or injury to head. Has been constantly watched at his home. Supposed cause of the disease is loss of a child. On personal examination: Was crying at time of examination. Complains of indefinite pains. Appearance and manner were dejected & down-cast. Here is also the testemony of witnesses that they are unable to care for him at his home.

Dec 5 Dec 5/93. The patient, on admission, is in poor physical condition. Has pulse C 7 / S.R. Complexion dark; hair brown; eyes blue; condition of skin good; Right hand off; no scars, hernia &c. Bodily condition clean. Behavior good. Complains of pain through the back, and of headache). Pulse 76. R 20. T (o) 98.8. — Shortly after coming onward, became quite restless, continually walking about. Talks quite freely about his home & family. Appetite is fairly good, but bowels are not in very good condition. Coughs a little, at times.
" 6 PM. Pulse 64. R 20. T (o) 98.6. Dec 6/93. Slept fairly well, last night. AM. Pulse 84 R 22. T 99. Says he has had gravel and passed 2 stones. PM. Pulse 82. Was visited by his wife, today. Dec 7/93. Slept but 2 hours, last night. AM. Pulse 96 R 22 T (o) 99.4. Seems very much excited today; wants to go home. PM P 96
" 8 R 22 T (o) 99.2. Visited, today, by niece. Dec 8/93. Rested very poorly, again, last night, sleeping only 2 hours. AM. Pulse 76 R 20 T 100. Appetite good; bowels regular. Still coughs some, at times. PM Pulse 90
" 9 R 24 T (o) 99.4. Dec 9/93. Again restless and sleeping very poorly last night. AM. Pulse 88 R 22 T (o) 100. Very restless today. Continually walking the floor. PM. Pulse 76 R 20 T 99. Visited by his wife;
" 10 Dec 10/93. Was restless for 4 hours, out of bed frequently & slept but 4 hours, last night. AM. Pulse 84 R 20 T (o) 99.6. Seems very discontented ill-at-ease; is restless & nervous for some time after these
" 11 visits from relatives & friends. Dec 11/93. Passed last night about as the preceding one; was very restless. AM. Pulse 104. Complains of his bowels not being in good condition. Appetite is good. Went out walking
" 12 today. PM. Pulse 100. Dec 12/93. Slept 5 hours, last night, but was restless for 3 hours or so & often out of bed.
" 13 AM. Pulse 92. Continually talking to and telling his fellow patients about his troubles. Dec 13/93. Still continues restless at night for from 3 to 4 hours; slept but 5 hours, last night. AM. Pulse 90. Says "he knows he was not right in his mind, when he came here, but thinks he is rapidly improving". PM. Pulse 90.
" 14 Dec 14/93. Slept 6 hours; restless 2 hours or so, last night. Pulse (Am) 108. Visited by wife today. While she talked and reasoned with him, he seemed very much excited & wanted to go home with her. Is very
" 15 discontented here. PM. Pulse 70. Dec 15/93. Was more quiet & restful & slept 7 hours, last night.
" 16 AM. Pulse 88. Appetite good; bowels fairly regular. PM. Pulse 88. Dec 16/93. More restful, sleeping 7
" 17 hours, last night. AM. Pulse 95. PM. Pulse 96. Visited by wife & daughter, today. Dec 17/93. Again passed a fairly quiet & restful night. AM. Pulse 92. Seems more contented, of late. Goes out walking. Plays games
" 18 as is more at ease. PM. Pulse 70. Dec 18/93. Was restless a couple of hours & out of bed but slept 6 hours, last night. AM. Pulse 102. Appetite good; bowels regular. Talks quite freely & more sensibly, than at first. PM. P 68.
" 19 Visited by relatives, today. Dec 19/93. Quiet & restful, sleeping 7 hours last night. Quiet & well-behaved, today.

Personal and Medical History of Albert F. Meyette

1894

Dec 20 Dec 20/93. See attached slip (on page 305), it being a statement recently made by his wife.
" 23 Dec 23/93. Patient has been quite frequently visited by his wife & relatives who seemed to think that he had improved sufficiently, so that they could take him out on a trial. This afternoon he was permitted to go home with his sister.

Crossed off the records; was illegally committed.

Room 276. Richard A. Jeffery

26-829.

DETAILED HISTORY OF SICKNESS OF MR. Richard A. Jeffery
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
Aug.									Takes medicine at 7 A.M. 12 & 7 P.M. daily.
24	7	3	100	96					
25	7	3	80	80					
26	7	3	100	82					Complains of severe pains in abdomen. Bowels moved freely.
27	7	3	84	80					Appetite very poor.
28	7	3	104	80					Appears failing daily.
29	7	3	84	80					Abdomen swollen and more tympanitic
30	7	3	86	80	22	26			Has taken but little nourishment today
31	7	3	88	102	28		101		Complains of severe pains in stomach, feet cold. Applied hot bottles to feet & body. Rubbing back & bowels with liniment.
									Visited by brother
									2.30 P.M. Respiration labored, pulse failing
									Died

Corpse sent to Rock Island

Personal and Medical History of

1893

Dec 21

" 13

" 14 Dec 14.

" 15

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" 19

history. —
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rational
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Says
Slept but 2
go home. PM Pulse 90
night, sleeping only 2
home, at times. PM Pulse 90
last night. AM. Pulse 88 R. 22
90 R. 20 P. 99. Visited by his wife;
pt but 4 hours, last night. AM. Pulse 84
restless & nervous for some time after these
st night about as the preceding one; was very restless
in good condition - Appetite is good. Went out walking
, last night, but was restless for 3 hours or so & often out of bed.
telling his fellow patients about his troubles. Dec 13/93. Still continues
hours; slept but 2 hours, last night. AM. Pulse 90. Says "he knows he
was
d, when he came here, but thinks he is rapidly improving". PM Pulse 90
restless 2 hours or so, last night. Pulse (Am) 108. Visited by wife today. While she
talked a
ned with him, he seemed very much excited & wanted to go home with her. Is very
discontented here. PM. Pulse 70. Dec 15/93. Was more quiet & restful & slept 7 hours, last night.
AM. Pulse 88. Appetite good; bowels fairly regular. PM. Pulse 88. Dec 16/93. More restful, sleeping 7
hours, last night. AM. Pulse 95. PM. Pulse 94. Visited by wife & daughter, today. Dec 17/93. Again passed
a fairly quiet & restful night. AM. Pulse 92. Seems more contented of late. Goes out walking. Plays games
as is more at ease. PM. Pulse 70. Dec 18/93. Was restless a couple of hours & out of bed but slept 6 hours, last
night. AM. Pulse 102. Appetite good; bowels regular. Talks quite freely & more sensibly, than at first. PM. 88.
Visited by relatives, today. Dec 19/93. Quiet restful, sleeping 7 hours last night. Quiet & well-behaved, today.

1894

Decr 23 Dec 20/93. See attached slip (on page 305), it being a Statement recently made by his wife.

Dec 23/93. Patient has been quite frequently visited by his wife & relatives who seemed to think that he had improved sufficiently, so that they could take him out on a trial - This afternoon he was permitted to go home with his sister.

Crossed off the records; was illegally committed.

Form 276. Richard A. Jeffers

329

DETAILED HISTORY OF SICKNESS OF MR. Richard A. Jeffers
DIAGNOSIS.

1894 C 2 E.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Aug 1	7	5	20	20					2 and 12 at 5 P.M. Medicine. 2 P.M. Passage
2	7	5	88	72					2 12 at 5 and 6 at 9 Medicine. Weight 131½ lbs.
3	7	5	84	76					2 1 at 2 7 Medicine. 3 Bowel moved.
4	7	5	80	74					Night Bowels moved 9 A.M. Medicine.
5	7	5	80	58					
6	7	5	88	72					
7	7	5	80	78					
8	7	5	86	72					
9	7	5	80	72					Appetite good. Bowels fairly regular. Always Complains of Stomach
10	7	5	80	78					2 Powders took last night at 9 & Complains of feeling sick & nausea
11	7	5	84	80					
12	7	5	80	80					
13	7	5	84	90					Complains of feeling sick & Stomach
14	7	5	86	84					8 A.M. Bath
15		5		84					Bowels moved
16	7	5	84	84					Does not appear very well of late.
17	7	5	88	92					Complains of feeling sick & nausea. Is Opii M. II. Enlarge to 4. 5 P.M. Still Complaining of Stomach. Put on following: Tebrodyn Oz I Alcohol Oz I M. 2 oz. Teaspoon every hour if pain con.
18	7	5	84	74					
19	7	5	84	88					Bowels moved freely
20	7	5	96	86					Abdomen appears swollen. Complains of continual pain
21	7	5	96	70					Appears some better than A.M. Taken but little nourishment
22	7	5	92	84					Abdomen still swollen
23	7	5	92	96					Bowels moved freely per Enl.

1894

Dec 5 Dec 5/93. Hepatic[a] dark; hair brown; Eyes clear. Behavior good. Shortly after coming onwar[d] home & family - Appetite is

" 6 PM. Pulse 64. R 20. T(o) 98.6

" 7 he has had gravel and passed s[ome] hours, last night. AM. Pulse 96 R

" 8 R 22 T(o) 99.2. Visited, today, by m[y] hours. AM. Pulse 76 R 20 T(o) 100.

" 9 R 24 T(o) 99.4. Dec 9/93. Again r[e] T(o) 100. Very restless today. Continually

" 10 Dec 10/93. Was restless for 4 hours, out of bed frequently & slept but 4 hours, last night. AM. Pulse 84 R 20 T(o) 99.6. Seems very discontented ill-at-ease; is restless & nervous for some time after these

" 11 visits from relatives & friends. Dec 11/93. Passed last night about as the preceding one; was very restless. AM. Pulse 104. Complains of his bowels not being in good condition - Appetite is good. Went out walking

" 12 today. PM. Pulse 100. Dec 12/93. Slept 5 hours, last night, but was restless for 3 hours also often out of bed.

" 13 AM. Pulse 92. Continually talking to and telling his fellow patients about his troubles. Dec 13/93. Still continues restless at night for from 3 to 4 hours; slept but 5 hours, last night. AM. Pulse 90. Says he knows he was not right in his mind, when he came here, but thinks he is rapidly improving. PM. Pulse 90.

" 14 Dec 14/93. Slept 6 hours; restless 2 hours or so, last night. Pulse (Am) 108. Visited by wife today. While she talked and reasoned with him, he seemed very much excited & wanted to go home with her. Is very

" 15 discontented here. PM. Pulse 70. Dec 15/93. Was more quiet & restful & slept 7 hours, last night.

" 16 AM. Pulse 88. Appetite good; bowels fairly regular. PM. Pulse 88. Dec 16/93. More restful, sleeping 7

" 17 hours, last night. AM. Pulse 95. PM. Pulse 94. Visited by wife & daughter, today. Dec 17/93. Again passed a fairly quiet & restful night. AM. Pulse 92. Seems more contented of late. Goes out walking. Plays games

" 18 as is more at ease. PM. Pulse 70. Dec 18/93. Was restless a couple of hours & out of bed but slept 6 hours, last night. AM. Pulse 102. Appetite good; bowels regular. Talks quite freely & more sensibly, than at first. PM. P 68.

" 19 Visited by relatives, today. Dec 19/93. Quiet & restful, sleeping 7 hours last night. Quiet & well-behaved, today.

1894

Dec 20 Dec 20/93. See attached slip (on page 305), it being a Statement recently made by his wife. -

" 23 Dec 23/93. Patient has been quite frequently visited by his wife & relatives who seemed to think that he had improved sufficiently, so that they could take him out on a trial. This afternoon he was permitted to go home with his sister.

Crossed off the records; was illegally Committed.

Room 276.

Richard A. Jeffrey

[illegible] swollen & patient complains of Continual pain. Aug 21/94. Seems somewhat better this morning; " 22 takes however but little nourishment. Aug 22/94. Abdomen is still swollen; bowels moved. " 23 Aug 23/94. Complains of severe pains in abdomen; bowels have moved freely. Appetite very poor. - " 24/25 Aug 24/94. Appears to be failing daily. Aug 25/94. Abdomen swollen & more than usual today. " 30/31 Aug 30/94. Has taken but little nourishment, today. Aug 31/94. Complains of severe pains in his stomach; feet are cold; hot sandbags applied. 7.30 Am. Vomiting dark brown stuff; 8 Am again vomiting dark brown matter. 10 Am. Visited by brother. 6.30 Pm. Respiration labored. - Patient is failing rapidly. 8.05 Pm. Continued to sink rapidly & died at this Hour. - (See Nurses-record attached for further details) -

= Died =

Personal and Medical History of Henry Whitehead alias John Ryan #2

Whole No. 3580
Residence, Minneapolis, Minn.
Date Admission, 6th December 1893.
Admitted by, Dr Kilbourne Hour, 7 Pm
How Sent, John H Steele, Jail Hennepin County
Sex, male
Age, 43 years
Civil Condition, married
Children, none
Age Youngest Child,
Occupation, cloth-finisher
Degree Education, only fair -
Profession Religion, Episcopalian
Habits, probably not good; intemperate -
Nativity, England (Parents also born there)
Physicians Committing, A E Laty and A J Irwin
Correspondents, (his wife / but don't know where she is
no family physician

No. for Year, 150
Insane Relatives
Cause Exciting,
Cause Predisposi
Form, guver
Accompanying B
Suicidal or Not,
Date of this Attac
Duration,
No. of Attack,
No. of Admissions
Age First Attack,
Time of Leaving,
Time in Hospital,
Result, Died

Henry Whitehead
Can stand on
one foot.
My father brought
bound in 5-3
43 years ago and
gave me to me
when I was 2
years old.

Simple sprinting
1/2/93

EXAMINATION ON ADMISS

Exa by Dr Edgar Herzog. Dec 8/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused and
Quick or Sluggish, Sluggish
MEMORY:
Past Events, poor
Recent Events, bad
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, correct
REASONING POWER:
Ordinary Subjects, bad
Own Mental State, Does not know Why sent here.
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Exalted
Depressed,
DELUSIONS:
Systematized or ~~Not~~, of wealth
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, More or less incoherent
Voluble or Reticent, fairly voluble

GENERAL DESCRIPTIVE REMARKS:
Says "owns fancy horses (14) trotters &c." Has ideas of wealth &c. Does not know what sort of an institution this is. Denies any drunk habit. Denies any Syphilis or kindred diseases, any headaches &c. (Later, seemed to realize where he was & says now "this is an Asylum")

Personal and Medical History of Henry Whitehead alias John Ryan #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5 in WEIGHT, 145 pds NUTRITION, Fairly good -
WOUNDS OR ABNORMALITIES, none; some ptosis of upper Eyelids -
TONGUE, Tremors, some Coatings, no; large; tooth-marks Promptness Movement, somewhat prompt
PUPILS, Equality, unequal; right the large Size,
Response Light, prompt Accommodation, slow
SIGHT, only fair
HEARING, somewhat impaired
COORDINATION, Arms, right arm, slightly impaired; of left arm, seems about normal.
[illegible] Does well; Jumping quickly, very poor

Case No. 3580 Henry Whitehead. Vol. 25
alias John Ryan #2
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, yes Slurred, yes
FACIAL EXPRESSION, somewhat blank
SENSIBILITY,
HEART, Sounds regular, strong; slight roughness.
LUNGS, Seem good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,		Clean,	Careless,
BOWELS, Normal,		Constipated,	Irregular,
APPETITE, Good,	Poor	Medium,	Poor,
SLEEP, Good,	kept	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 Henry Whitehead alias John Ryan #2

Whole No. 3580.
Residence, Minneapolis, Minn.
Date Admission, 6th December 1893.
Admitted by, Dr Kilbourne Hour, 7 Pm
How Sent, John A Steele, Jail, Hennepin County
Sex, Male
Age, 43 years
Civil Condition, married
Children, none
Age Youngest Child,
Occupation, cloth-finisher
Degree Education, Highschool
Profession Religion, Episcopalian
Habits, Probably not good; intemperate.
Nativity, England (Parents also born there)
Physicians Committing, A E Lazy and A J Irwin
Correspondents, (his wife / but don't know where she is
Family physician

No. for Year, 150.
Insane Relatives, unknown
Cause Exciting, Alcoholism
Cause Predisposing, not stated -
Form, general paresis
Accompanying Bodily Disorder, no history of any
Suicidal or Not, not
Date of this Attack, not stated
Duration, not stated
No. of Attack, not given
No. of Admissions, 1st
Age First Attack, not given
Time of Leaving, 29th November 1894
Time in Hospital, 11 months. 21 Days.
Result, Died; exhaustion in General paresis.

EXAMINATION ON ADMISSION.

Exd by Drs Edg Herzog, Dec 8/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused and
Quick or Sluggish, Sluggish
MEMORY:
Past Events, poor
Recent Events, bad
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, correct
REASONING POWER:
Ordinary Subjects, bad
Own Mental State, Does not know Why sent here.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Says "owns fancy horses (14) trotters &c." Has ideas of wealth &c. Does not know what kind of an institution this is. Denies any drink habit. Denies any Syphilis or kindred diseases, any headaches &c. (Later, seemed to realize where he was & says now "this is an Asylum.")

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Exalted
Depressed,
DELUSIONS:
Systematized or ~~Not~~, of wealth
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, More or less incoherent
Voluble or Reticent, fairly voluble

...l and Medical History of Henry Whitehead alias John Ryan #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

WEIGHT, 145 lbs NUTRITION, Fairly good -
...LITIES, none; Some ptosis of upper Eyelids -
... Coatings, no; large; tooth-marks Promptness Movement, somewhat prompt
...e; right the larger — Size,
...nt Accommodation, slow
...hat impaired.
..., slightly impaired; of left arm, seems about normal.
...Sol. & Bass reflex. Memory quickly, very poor.

...nry Whitehead. Vol. 25
...lias John Ryan #2
...3 having been declared
...tient was recommitted.
...n box file in vault with ...ment.

FA... Yes Slurred, Yes
SENS... Somewhat blank —
HEART, Sounds regular, strong; slight roughness.
LUNGS, Seem good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

Kept Record

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 Henry Whitehead alias John Ryan #2

Whole No. 3580.
Residence, Minneapolis, Minn.
Date Admission, 6th December 1893.
Admitted by, Dr Kilbourne Hour, 1 PM
How Sent, John A Steele, Jof P. Hennepin County
Sex, male
Age, 43 years
Civil Condition, married
Children, none
Age Youngest Child,
Occupation, cloth-finisher
Degree Education, middl'g fair -
Profession Religion, Episcopalian
Habits, Probably not good; intemp
Nativity, England (Parents also born here.
Physicians Committing, A. E. Laty & A. J. Irwin
Correspondents, (his wife / but don't know where she is
no family physician

No. for Year, 150
Insane Relatives
Cause Exciting,
Cause Predisposi
Form, gener
Accompanying B
Suicidal or Not,
Date of this Attac
Duration,
No. of Attack,

Henry Whitehead
Can stand on
one foot.
My father born
bound in 50
4 years a
and

Double printing
1/8/93

EXAMINATION ON ADMISS

Exam by Dr Edgar Sternberg, Dec 8/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused and
Quick or Sluggish, Sluggish
MEMORY:
Past Events, poor
Recent Events, bad
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, correct
REASONING POWER:
Ordinary Subjects, bad
Own Mental State, Does not know Why sent here.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Says "owns fancy horses (14) trotters &c." Has ideas of wealth &c. Does not know what sort of an institution this is. Denies any drink habit. Denies any Syphilis or kindred diseases, any headaches &c. (Later, seemed to realize where he was & says now "this is an Asylum")

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Exalted
Depressed,
DELUSIONS:
Systematized or ~~Not~~, of wealth
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, More or less incoherent
Voluble or Reticent, fairly voluble

Personal and Medical History of Henry Whitehead alias John Ryan #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5 in WEIGHT, 145 lbs NUTRITION, Fairly good -
WOUNDS OR ABNORMALITIES, none; some ptosis of upper Eyelids -
TONGUE, Tremors, some Coatings, no; large; tooth-marks Promptness Movement, somewhat prompt
PUPILS, Equality, unequal; right the large — Size, —
Response Light, none Accommodation, slow
SIGHT, only fair
HEARING, somewhat impaired.
COORDINATION, Arms, of right arm, slightly impaired; of left arm, seems about normal.
Legs, Standing, eyes shut, does well; Turning quickly, very poor
TREMORS, Hands, some Tongue, none
Facial Muscles, none General, none
REFLEXES, Patellar, equal; absent; only 1 obtained by reinforcement.
Other Reflexes,
ARTICULATION, Hesitating, Yes Slurred, Yes
FACIAL EXPRESSION, somewhat blank —
SENSIBILITY,
HEART, Sounds regular, strong; slight roughness.
LUNGS, Seem good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, kept	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good, Record	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 Henry Whitehead alias John Ryan #2

BRIGHT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Deputy Sheriff Adolf Peterson, with the following history of case. As to consanguinity or heredity, nothing known. No. of attack is not given. Has been at Workhouse 3 times, within a year, for terms of 10 days, 15 days & 60 days, respectively. It is not stated when first symptoms of attack were manifested: there were, however, hallucinations. Disease seems increasing; is variable (that is the hallucination), as a horse dealer. "That Tom Lowry owes him" & different other things. Derangement is now shown by the idea of his being a millionaire & owner of 13 horses, worth $1000 a piece; dogs, worth $50 apiece. While at Workhouse, has struck one or two men with whatever he had in his hand. Suicide has not been attempted; propensity not active. Is of filthy habits. There is no history of any severe disease or injury to head. Supposed Cause of the disease is Alcoholism. Has had no medical treatment.

On personal examination, there is noticed the condition of the patient; incoherent speech. He said "that he was worth $8.000.000; had drawn it out of the Guaranty Loan Building; was an owner of the 13 horses, valued $1000 a piece; owner of a bank & 3 farms in England". Appearance & manner those of an imbecile. The Superintendent of Workhouse has confined him a number of times, for violence.

Dec 6 - 7 — Dec 6/93. On admission, temperature 103. (S.R. Complexion sandy; hair, light red; eyes blue; condition of skin, good. Has mark of a scar or cut on head. Bodily condition, dirty. Is well-behaved). Dec 7/93. Was restless for 2 hours but slept 7 hours, last night. Appetite fairly good; bowels have moved; no cough noticed. AM. Pulse 110. R. 18. T. @ 99.2. Quietly behaved; speaks very little. Shows delusions - "Thinks he owns several large buildings in Minneapolis, including the West-Hotel". Says the scar on head was caused by his being struck on head with a revolver. - Dec 8/93. Slept 7 hours last night. Was restless for 2 hours or so; was up during the night, wanting to put on his clothes. AM. Pulse 110. T. @ 100. Dec 9/93. Has now been quiet & restful last night, sleeping 8 hours. AM. Pulse 72. T. @ 99.6. Is, evidently, quite paretic. Dec 10/93. Restless 2 hours or so, but slept 7 hours, last night. AM. Pulse 104. T. @ 99. Appetite good; bowels moved. Dec 11/93. Was restless for 5 hours last night, sleeping but 4 hours. AM. Pulse 120. T. @ 100. Dec 12/93. AM. Pulse 120. T. @ 99.8. - Dec 13/93. AM. Pulse 100. Last night & night before, patient was fairly quiet & restful, sleeping 7 hours each. Appetite continues good. Bowels seem regular. Dec 20/93. During this, the 2nd week, patient, has as a rule been more or less restless at night, but sleeping about 7 hours, in each. Pulse has ranged from 90 to 120; Temperature has also shown a range, during the week, from 99.4 to 100 4. (T. today 99.4). Appetite has been quite good; bowels normal. Is quietly behaved though somewhat inclined to be stubborn. Hardly ever speaks to any one; spends his time chiefly in reading. Patient is quite paretic. —

Dec 21 — Dec 21/93. Slept 6 hours, during last night; was restless for 3 hours. AM. Pulse 114. T. @ 100. —

Dec 22 — Dec 22/93. " 4 " " " ; Restless 5 hours or so. AM. " 106. T. @ 99.9. -

Dec 23/24 — Dec 23/93. AM. Pulse 136. T. @ 99.4. Dec 24/93. Restless for 4 hours, sleeping 5 hours, last night.

Dec 25/26/27 — Dec 25/93. AM. " 78. (T. @ 99.4. Dec 26/93. AM. Pulse 120. T. @ 99.4. Dec 27/93. AM. Pulse 100 T. @ 99.4

Dec 28/29/30 — Dec 28/93. AM. " 96 T. @ 99.4. Dec 29/93. AM " 108. T. @ 99. Dec 30/93. AM " 114 T. @ 99.2.

Dec 31 — Dec 31/93. Was restless for 5 hours, sleeping but 4 hours, last night. AM. Pulse 120. T. @ 100.2. Appetite good. Bowels regular. Talk is fairly rational, though he still shows delusions. Habits clean. Does no work.

1894 Jan 1 — Jan 1/94. Slept but 4 hours last night, being restless for 5 hours or so. AM. Pulse 120 T. @ 99.4.

" 2 — PM. Pulse 102. T. @ 99. Jan 1/94. Wt 166 lbs. (a gain of 11 pounds, since coming) - Pulse 108. -

" 3/13 — Jan 3/94. Pulse 106. T. @ 98.6. Jan 13/94. Sleep continues more or less disturbed, each night. Last

Henry Whitehead alias John Ryan #2

[illegible] 3 hours. Jan 15/94. Appetite good. Bowels regular. [illegible] provoked & quite often gets into trouble with the [illegible] or anything he gets hold of. Shows delusions. [illegible] physical health. Jan 31/94. No noticeable change. [illegible] lbs, in past month). Pulse 102. Feb 2/94. Appe- [illegible] behaved. Very easily provoked. Still shows delusions. [illegible] habits are clean. He does no work at ward. [illegible] under the "Law of 1893" recently declared incu- [illegible] and RETURNED under "new Warrant" from [illegible] change to note. —

[illegible] weight). Pulse 72. Mar 15/94. Apparently, [illegible] regular. Quietly behaved. Sleeps a good deal [illegible] delusions. Habits inclined to be filthy. Does [illegible] first month to month. - Mar 31/94. Seems [illegible] be quietly behaved. Talks but very little; still [illegible] the right); does not work any. —

[illegible] become more cleanly in habits - having been [illegible] treated, there is no noticeable change - [illegible] good; bowels regular. Behaves fairly well; Still [illegible] himself; urine keeps continually dripping from [illegible] - is violent; does not work any. —

May 1/31 — [illegible] June 30/94. No change), calling for remark, during the month. -

June 2/30 — [illegible]

July 2/31 — [illegible] " " 78. July 31/94. Above general notes, for third month, still hold good.

Aug 1/31 — Aug 1/94. Wt 157½ " " 78. Aug 31/94. Behavior quiet. Talks incoherently. Otherwise no change.

Sept 3/30 — Sept 3/94. Wt 151 " " 78. Sept 10/94. No change. Transferred to the Annex to-day. -

" 30 — Sept 30/94. No change noticeable, except that he is becoming weaker & gait more staggering) -

Oct 1/30 — Oct 10/94. Patient is failing quite perceptibly. Oct 20/94. Patient has been failing quite markedly, both mentally & physically, the past 10 days. Walks with a staggering, uncertain gait. Very filthy in his habits. Skin on right hip is inflamed (probably from effects of urine).

" 27 — Oct 27/94. Is quite severely marked & bruised, the result of repeated falls down stairs. Moved to C4. On coming to this hall (C4), patient was scarcely able to walk & fell, repeatedly, on floor (which is waxed). Lies in the me position, all day. Oct 29/94. Confined to bed, today, on account of inability to

" 29 — walk & general weakness. Oct 31/94. Appetite fairly good; bowels restive; no complaint noticed. He appears to be paretic & is quite unable even to feed himself, or to walk: has some bed sores; Behavior is good; he makes no complaints. Talks none at all (Was dirty 4 days up till date).

" 31 — Nov 1/94. Wt 131½ lbs. (in underclothes). He shows quite a loss in flesh. Pulse 81. Nov 15/94. Patient has been confined to bed since 29th ult. Bed sores have broken out in various parts of his body: and these are rapidly increasing in size - Appetite continues good - He is gradually growing weaker. Is quietly

Nov 1/15 — behaved; talks none; is very dirty in his habits. Nov 23/94. Patient has continued to fail & his nose is

" 23 — weak, that it is with difficulty, he can swallow his food. Pat. R 21. T. @ 98 4/5ths. - Nov 27/94 Patient has been

(Carried to 316)

1893.

Dec. 27

Friend Wills send this down to the place that I have named and have I sent to me. they money you have despoiled of but the express office Boston'd find [illegible] does this is to be called for me. While I was [illegible] to John Ryan Whitehead Henry

Address J Henry Whitehead or John Ryan Brown

Personal and Medical History of Henry

LEIGHT, FOLEY & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Deputy Sheriff Adolph Peterson, w
or heredity, nothing known. No. of attack is not given
terms of 10 days, 15 days & 90 days, respectively. His not
-fected; there were, however, hallucinations. Disease de
me, as a horse dealer. That Tom Lowry owes him"
by the idea of his being a millionaire owner of 13
While at Workhouse, has struck me a two occa
not been attempted; propensity not active. I
disease or injury to head. Supposed Cause of the
On personal examination, there is noticed
said "that he was worth $8.000.000; had drawn
an owner of the 13 horses, value $1000 a pa
Appearance & manner those of an imbeci
him a number of times, for violence.

Dec 6 Dec 6/93. On admission, temperature 98³. (S
" 7 Skin, good. Has mark of a sore or cut on he
restless for 2 hours but slept 7 hours, last night. A
Pulse 110. R 18. T (c) 99.2. Quietly behaved; s
buildings in Minneapolis, including the U
" 8 struck on head with a revolver. Dec 8/93.
" 9 the night, wanting to put on his clothes. AM. Pulse 110.
" 10 night, sleeping 5 hours. AM. Pulse 72. T (c) 99.6. Is, evidently, quite qua
" 11 but slept 7 hours, last night. AM. Pulse 104. T (c) 99. Appetite good; bowels moved. Dec 11/
" 12 5 hours last night, sleeping but 4 hours. AM. Pulse 120. T (c) 100. Dec 12/93. AM. Pulse 120. T (c) 99.8. —
" 13 Dec 13/93. AM. Pulse 100. Last night & night before, patient was fairly quiet & restful, sleeping 7 hours each
" 20 Appetite continues good. Bowels seem regular. Dec 20/93. During this the 2nd week, patient, has as a rule
been more or less restless at night, but sleeping about 7 hours, in each. Pulse has ranged from 90 to 120;
Temperature has also shown a range, during the week, from 99.4 to 100 4. (T (c) today 99.4). Appetite has
been quite good; bowels normal. Is quietly behaved though somewhat inclined to be stubborn. Hardly
ever speaks to any one; spends his time chiefly in reading. Patient is quite paretic. —
" 21 Dec 21/93. Slept 6 hours, during last night; was restless for 3 hours. AM. Pulse 114. T (c) 100. —
" 22 Dec 22/93. " 4 " " " ; Restless 5 hours or so. AM. " 106. T (c) 99.9. —
" 23 Dec 23/93. AM. Pulse 136. T (c) 99.4. Dec 24/93. Restless for 4 hours, sleeping 5 hours, last night.
" 25 Dec 25/93. AM. " 78. (T (c) 99.4. Dec 26/93. AM. Pulse 120. T (c) 99.4. Dec 27/93. AM. Pulse 100 T (c) 99.4
" 28 Dec 28/93. AM. " 96 T (c) 99.4. Dec 29/93. AM " 108. T (c) 99. Dec 30/93. AM " 114 T (c) 99.2
" 31 Dec 31/93. Was restless for 5 hours, sleeping but 4 hours, last night. AM. Pulse 120. T (c) 100.2. Appetite
good. Bowels regular. Talk is fairly rational, though he still shows delusions. Habits clean. Does no work.
Jan 1 Jan 1/94. Slept but 4 hours last night, being restless for 5 hours or so. AM. Pulse 120 T (c) 99.4.
" 2 PM. Pulse 102. T (c) 99. Jan 2/94. Wt 166 pds. (a gain of 11 pounds, since coming) — Pulse 108. —
" 3/13 Jan 3/94. Pulse 106. T (c) 98.6. Jan 13/94. Sleep continues more or less disturbed, each night. Last

Knife Fork
Kept down by
St James Hotel
3 rd floor South
Lawrence
Kan

Personal and Medical History of Henry Whitehead alias John Ryan

Jan 15 night, was restless for 6 hours, sleeping but 3 hours. Jan 15/94. Appetite good. Bowels regular.
Is usually, quietly behaved, but is very easily provoked & quite often gets into trouble with the
other patients. When angry, he will throw spittoons or anything he gets hold of. Shows delusions.
" 31 Habits are clean. Seems in quite good physical health. Jan 31/94. No noticeable change.
Feb 1/13 Feb 1/94. Wt 165½ pds; (a further gain of 9½ pds, in past month). Pulse 102. Feb 7/94. Appe-
-tite good; bowels regular. Is fairly well behaved. Very easily provoked. Still shows delusions.
Physical condition has much improved. Habits are clean. He does no work as yet.
" 14 Feb 14/94. This patient was committed here under the "Law of 1893" recently, declared uncon-
-stitutional. He was, today, Taken out and Returned under "new Warrant" from
" 28 Olmsted County. Feb 28/94. No material change to note. —
Mar 1/13 Mar 1/94. Wt 170½ pds; (a further gain in weight). Pulse 72. Mar 15/94. Apparently,
rests well, at night. Appetite good; bowels regular. Quietly behaved. Sleeps a good deal
" 31 of the time. Is very easily provoked. Shows delusions. Habits inclined to be filthy. Does
not do any work. No improvement noticed from month to month. — Mar 31/94. Seems
to sleep well, at night. Appetite good; bowels regular. Is quietly behaved. Talks but very little; still
shows delusions. Habits are dirty; (wets the bed during the night); does not work any. —
April 1/30 April 2/94. Wt 168½ pds. Pulse 76. April 30/94. Has become more cleanly in habits — having been
dirty only one day during the month — In other respects, there is no noticeable change —
May 1/31 May 1/94. Wt 167 pds. Pulse 80. May 31/94. Appetite good; bowels regular. Behaves fairly well; still
manifests delusions: filthy in habits; at times soils himself; urine keeps continually dripping from
him & makes a bad & offensive odor about him, always. Violent; does not work any. —
June 1/30 June 1/94. Wt 163 pds. Pulse 84. June 30/94. No change, calling for remark, during the month. —
July 1/31 July 1/94. Wt 160 " " 78. July 31/94. Above general note, for third month, still holds good.
Aug 1/31 Aug 1/94. Wt 157½ " " 78. Aug 31/94. Behavior quiet. Talks incoherently. Otherwise no change.
Sept 3/30 Sept 3/94. Wt 151 " " 78. Sept 10/94. No change. Transferred to the Annex to-day. —
" 30 Sept 30/94. No change noticeable, except that he is becoming weaker & gait more staggering) —
Oct 1/30 Oct 1/94. Patient is failing quite perceptibly. Oct 30/94. Patient has been failing quite
markedly, both mentally & physically, the past 10 days. Walks with a staggering, uncertain
gait. Is very filthy in his habits. Skin on right hip is inflamed (probably from effects of urine).
" 27 Oct 27/94. Is quite severely marked & bruised, the result of repeated falls down stairs. Moved to C.H.
On coming to this hall (C.H.) patient was scarcely able to walk & fell, repeatedly, on floor (which is waxed)
" 29 Sits in the one position, all day. Oct 29/94. Confined to bed, today, on account of inability to
" 31 walk & general weakness. Oct 31/94. Appetite fairly good; bowels costive; no cough to-day.
He appears to be paretic & is quite unable even to feed himself, or walk: has some bed sores;
Behavior is good; he makes no complaints. Talks none at all. (Was dirty 4 days up till date).
Nov 1/30 Nov 1/94. Wt 131½ pds. (in underclothes). His bones quite evident in flesh. Pulse 81. Nov 15/94. Patient
has been confined to bed since 29th ult. Bed sores have broken out in various parts of his body: and these
are rapidly increasing in size. Appetite continues good. He is gradually growing weaker. Is quietly
" 23 behaved; talks none; is very dirty in his habits. Nov 23/94. Patient has continued to fail & his sores
" 29 look, that it is with difficulty, he can swallow his food. Pat. R 21. T at 98 2/10 ths. Nov 27/94. Patient has been

(Carried to 316)

Personal and Medical History of Wm. A. McCullough

SUBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3582.
Residence, Alms-House, Ramsey County.
Date Admission, 6th December 1893.
Admitted by, Shilbourne Hour, 7 PM
How Sent, John B. Oliver, Jof P, Ramsey County
Sex, Male
Age, 45
Civil Condition, Widowed
Children, — (says he has 4 children 1st wife)
Age Youngest Child, — " about 16 "
Occupation, Night-Watchman
Degree Education, Common
Profession Religion, Presbyterian
Habits, Intemperate
Nativity, Scotland (Parents also born there).
Physicians Committing, J.T. Murphy & G.F. Hanley
Correspondents, None given in papers
No Family Physician.

No. for Year, 152
Insane Relatives, unknown
Cause Exciting, Intemperance
Cause Predisposing, not given -
Form, Alcoholic dementia
Accompanying Bodily Disorder, none known
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, 45 years
Time of Leaving, March 14' 94
Time in Hospital, 3 mo 8 d
Result, Imp.

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

EXAMINATION ON ADMISSION.

Evelyn D. Herzog, Dec 23/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, } Impaired; particularly, recent things
Recent Events, }
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, } Poor
Own Mental State, }
Special Subjects, }

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, + Indifferent
DELUSIONS: } None brought out by Examination
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Somewhat incoherent
Voluble or Reticent, Normal

GENERAL DESCRIPTIVE REMARKS:
Was night-watch at Ramsey County Alms-House - Admits some drink-habits. Has a scar over left temple, also fracture of left clavicle, caused by a fall (about 5 or 6 years ago) out of a wagon, while he was drunk. Says he now feels all right but a little nervous yet; but does not feel himself able to work very hard. He fails to comprehend questions put to him.

Personal and Medical History of Wm. A. McCullough

EXAMINATION ON ADMISSION.—(Continued.)

ERISTICS.

NUTRITION, Decidedly poor.
temple; fracture of left clavicle -
Promptness Movement, prompt
normal
tion, Yes

Legs, Some good - fingers tremor, eyes shut, finite good. (very slight impairment during finger)
TREMORS, Hands, Slight Tongue, Slight
Facial Muscles, Some of eyelids General, Tremor
REFLEXES, Patellar, Equal - about q - Dr O's scale -
Other Reflexes, Slight ankle - clonus -
ARTICULATION, Hesitating, Hesitating Slurred,
FACIAL EXPRESSION, Rather pinched & haggard -
SENSIBILITY,
HEART, Action strong - No murmurs -
LUNGS, Seems good; (as far as tested) -
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations, Father, Senile Dementia
Brothers or Sisters,

Personal and Medical History of Wm. A. McCullough

HERBERT, PUGAN & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3582.

Residence, Alms-House, Ramsey

Date Admission, 6th December 1893.

Admitted by, Dr Kilbourne Hour, 7 Pm

How Sent, John. B. Oliver, Jof P, Ram

Sex, Male

Age, 45

Civil Condition, widowed

Children, — (says he has

Age Youngest Child, — " about

Occupation, Night-Watchman

Degree Education, Common

Profession Religion, Presbyterian

Habits, Intemperate

Nativity, Scotland; (Parents also born there).

Physicians Committing, J.H. Murphy & G.F. Hanley

Correspondents, None given on papers

No family Physician.

God save the Governor of Minnesota 264 372 421

Specimen of handwriting of Wm A. McCollough when asked. He spells governor correctly 105-7

Age First Attack, 45 Years

Time of Leaving, Mch 14 '94

Time in Hospital, 3 mo 8 d

Result, Imp.

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

EXAMINATION ON ADMISSION.

Endorsed Dr. Herzog, Dec 23/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, } Impaired; particularly recent things

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, } Poor

Own Mental State, }

Special Subjects, }

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, + Inoffensive

DELUSIONS: } None brought out by Examination

Systematized or Not, }

Special Subjects, }

Transitory or Not, }

HALLUCINATIONS: }

ILLUSIONS: }

CONVERSATION:

Coherent or Incoherent, Somewhat incoherent

Voluble or Reticent, Normal

GENERAL DESCRIPTIVE REMARKS:

Was night-watch at Ramsey County Alms-House - Admits some drink-habits. Has a scar over left temple, also fracture of left clavicle, caused by a fall (about 5 or 6 years ago) out of a wagon, while he was drunk. Says he now feels all right but a little nervous yet; but does not feel himself able to work very hard. He fails to comprehend questions put to him.

Personal and Medical History of Wm. A. McCullough

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 131½ pds NUTRITION, Decidedly poor.

WOUNDS OR ABNORMALITIES, Scar (an inch long) over left temple; fracture of left clavicle.

TONGUE, Tremors, Slight Coatings, some in middle Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, normal

COORDINATION, Arms, Quite good - fingers true, eyes shut, quite good.

Legs, some impairment; standing, eyes shut, considerable swaying. Very slight impairment during finger-

TREMORS, Hands, Slight Tongue, Slight

Facial Muscles, some of eyelids General, some

REFLEXES, Patellar, Equal - about - Dr Pt scale -

Other Reflexes, Slight ankle - clonus -

ARTICULATION, Hesitating, Hesitating Slurred,

FACIAL EXPRESSION, rather pinched + haggard -

SENSIBILITY,

HEART, Action strong - No murmurs -

LUNGS, Sounds good; (as far as tested) -

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good, Poor kept	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, senile Dementia

Brothers or Sisters,

Personal and Medical History of Wm. H. McCullough

1893 EBERT, FIDLAR & KNAEBEL, DAVENPORT, IOWA

Was brought here by Deputy Sheriffs Ch. Haas & M. N. Goss, attended by E. H. McCullough, with the following history. There is no history of consanguinity; as to heredity, unknown. This is 1st attack; has not been in hospital. First symptoms were manifested 3 weeks ago. Disease seems increasing, continually; not variable; no rational intervals. Derangement is now shown by melancholy; hearing voice of God; he is neither disposed to injure others, nor suicidal, nor filthy nor destructive. He had, previously, been intemperate; as to family history of intemperance, unknown. As to any severe disease &c or injury to head, also unknown. He has not been restrained or confined. Supposed cause of the disease is intemperance. Has had no medical relief. — —

On personal examination, he is melancholy; refuses to eat; "hears the voice of God"; Says this. Appearance & manner those of an insane person.

Dec 6 Dec 6/93. On admission, is in poor condition. Was put on C². (S.R. Complexion light; hair brown; eyes blue; Skin has some pimples; body dirty & covered with vermin; Restless & will not stay in bed; very weak.)
" 7 Pulse 92. R 22. T. 99.2. Talks but little. Dec 7/93. Was restless in the early part of the night; afterward, slept fairly well. AM. Pulse 84 R 24 T. 98. Ate no breakfast. Bowels fairly regular. Coughs a little, at times. Is in bed, today, but continually getting out, when awake, though he says he does not feel well enough to get up. Shows delusions; "thinks he is going to be taken somewhere". PM. Pulse 84
" 8 R 20 T. 99.4. Dec 8/93. Was somewhat restless, but slept 5 hours, last night. AM. Pulse 104 R 20
" 9 T. 101.2. Appetite not very good; bowels costive. PM Pulse 99 R 21 T. 101.4. Dec 9/93. More quiet, and restful, sleeping 7 hours, last night. AM. Pulse 84 R 22 T. 99.8. Says "he feels fairly well".
" 10 Appetite is improving — Bowels have moved — PM " 72 " 22 " 99. — Dec 10/93. Somewhat restless for 3 hours or so, during the night, but slept 6 hours. AM. Pulse 96 R 20 T. 98.8. Does not appear as well
" 11 as usual today. Ate but very little. Dec 11/93. Restless, sleeping but 6 hours, last night. AM. Pulse 66 R 20 T. 99.6. Appetite good. Bowels regular. Seems somewhat improved. Says "he wants to get up." —
" 12 PM. Pulse 60 R 21 T. 99. Dec 12/93. Slept poorly during last night, only 5 hours. Was restless and
" 13 much disturbed. AM. Pulse 72. Dec 13/93. Again passed a poor night, sleeping only 5 hours or so. — AM. Pulse 60. PM. Pulse 72. Says "he can sleep better in the day time than he can, at night. —
" 14 Dec 14/93. AM. Pulse 68. PM. Pulse 56. Complains in regard to his urine; says "he has but little
" 15 control over it". Dec 15/93. AM. Pulse 70. Is up, on ward, today; appears fairly strong. PM. Pulse 62.
" 16 Dec 16/93. AM. Pulse 80. Is quite restless, today; Always asking if he will be let stay on this ward.
" 17 PM. Pulse 88. Dec 17/93. AM. Pulse 86. PM. Pulse 72. Appetite good; bowels regular. Talks quite freely
" 18 and rationally. Dec 18/93. AM. " 112 PM " 80. Still seems to fear that he is going to be
" 19 taken somewhere. Dec 19/93. AM " 100. PM " 70. Talks quite freely. Says "he likes to be doing
" 20 something in the line of work". Works on the ward. Dec 20/93. Is up, on ward, daily. Appetite quite good.
" 21 Bowels fairly regular. AM. Pulse 88. PM. Pulse 95. Dec 21/93. During the past week, sleep & rest, at night, have somewhat improved, he having been sleeping 6 to 7 hours in each; only on one or 2 occasions being somewhat restless. He has been quiet & well — behaved by day; Talking quite freely & pleasantly. Is clean,
" 29 tidy & of good personal habits. — Dec 29/93. Bowels costive; given Cascara; ate no dinner nor
" 30 supper, today. Says "he does not feel so well as usual". Dec 30/93. Bowels have moved.
1894 Jan 1 Jan 1/94. At 2 PM, was vomiting; complains of stomach giving him distress & of feeling weak. Put to bed
" 2 5 PM & now up, on ward; says "he feels better" — Jan 2/94. Wt 129½ pds — (a very slight loss in flesh)

Personal and Medical History of Wm. H. McCullough.

1894
Jan 7 Jan 7/94. Continually asking to get out, & wants to know if he is going to be left on the ward.
" 9 Seems to think he is going to be moved. Jan 9/94. Very restless all day; continually walking about.
" 11 Asked to be moved. Jan 11/94. Says he wants to get out of this place, as he is well enough to take care
" 13/15 of himself. Jan 13/94. Complains of bowels troubling him. Given laxative. Jan 15/94. At times, he is very restless and frequently asks to be moved to some other ward. Appetite good. Bowels regular.
" 19/31 Jan 19/94. Bowels badly constipated, the past few days. Has to take a laxative daily. Jan 31/94. He does not change much from what is noted above. Bowels constipated at times. Seems very discontented at being kept here. Is very anxious to go out.
Feb 2/9 Feb 2/94. Wt 136 pds. (Has gained some in flesh, in the past month.) Feb 9/94. Was, today,
" 28 transferred to W3. — Feb 28/94. Continues about as recently above described. —
Mar 2 March 2/94. Wt 144 pds. (a gain of 8 pounds in the past month.) — Physical health has
" 14 improved a good deal, since coming. Pulse 90. March 14/94. For some time, has been very anxious to get out and go to work.

Left, this evening, to go to his home near Winnebago City, Minn.

Crossed off the records; was illegally committed.

1894 Dec 31 From 312 Henry Whitehead (alias John Ryan #2).

Now 29 unable to swallow any solids or liquids for 2 days. Kidneys have become larger and more numerous & he is failing rapidly, this morning. PM. Patient has been steadily and rapidly sinking and died at 4.40. this afternoon —

Efforts had been made to ascertain whereabouts of relatives or friends, but none could be found — (Remains buried here)

Died.

Personal and Medical History of Jeremiah Sullivan

1/6/94 Say name is Dennis Sullivan

KEBERT, PICKER & CRAWFORD, DAVENPORT, IOWA

Whole No. 3583.
Residence, Chicago.
Date Admission, 6th December 1893
Admitted by, Dr. Kilbourne Hour, 7 PM
How Sent, John B. Oliver, Jof C, Ramsey County
Sex, male
Age, 40 (?)
Civil Condition, married
Children, Yes (?)
Age Youngest Child,
Occupation, Laborer
Degree Education, none.
Profession Religion, Catholic
Habits, probably bad —
Nativity, Ireland (?) (Parents also born there).
Physicians Committing, Wm J. Hanley & M J O'Brien
Correspondents, wife in Chicago —
no family physician.

No. for Year, 153.
Insane Relatives, no knowledge
Cause Exciting, Syphilis
Cause Predisposing, not stated.
Form, Syphilitic dementia.
Accompanying Bodily Disorder, Tertiary Syphilis.
Suicidal or Not, not
Date of this Attack, as far as known 2 months (must be longer)
Duration, as far as known, 2 months
No. of Attack, no knowledge
No. of Admissions, 1st
Age First Attack, (?)
Time of Leaving, March 26 '94
Time in Hospital, 3 mo 20 ds.
Result, Rec.

Crossed out — I'm sorry I'm late, Feb. 1st, 1893, because the milk delivered

EXAMINATION ON ADMISSION.

End by Dr Herzog, Dec 9/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events,
Recent Events,
Special Subjects,
} Very poor; does not remember anything
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Illusive
REASONING POWER:
Ordinary Subjects,
Own Mental State, Poor
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Much confused; says "he came from St Louis here" — Does not know how old he is; cannot tell when he came here. It seems hard to get anything out of him. He says "he forgets everything". Complains a good deal of head ache — (pain found on percussion). —

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Yes
Exalted,
Depressed, somewhat
DELUSIONS:
Systematized or Not, none detected
Special Subjects,
Transitory or Not,
HALLUCINATIONS: none detected
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, apparently Coherent
Voluble or Reticent, Reticent; Quite so

Personal and Medical History of Jeremiah Sullivan

Mr. Jerry Sullivan
348 Lillman av
Detroit
Mich.
(Father)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

WEIGHT, 145 lbs. NUTRITION Poor; hands & cold; ends of fingers clubbed; surfaces of nails somewhat irregular
(see S.K. next page); anchor tattooed right forearm.
Coatings, none Promptness Movement, somewhat slow.
Left somewhat larger than right Size, abnormally large
Accommodation, yes, a little too much; mobile.

normal

COORDINATION, Arms, very much impaired; finger nose, eyes shut, readily inaccurate
Legs, somewhat impaired; standing, eyes shut, Romberg some. turning quickly shows impairment
TREMORS, Hands, None Tongue, none
Facial Muscles, none General, none
REFLEXES, Patellar, equal — abnt —
Other Reflexes, very slight ankle-clonus.
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Stupid & blank
SENSIBILITY,
HEART, action weak; systolic murmur at apex; apex beat displaced to left.
LUNGS, Right - few scattering moist rales.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Record kept

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,
} Cannot get any information of these points, "Forgets Everything"

Personal and Medical History of Jeremiah Sul[illegible]

1/5/94 day name is

EBERT, FIDLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3583.
Residence, Chicago.
Date Admission, 6th December 1893
Admitted by, Dr. Silbourne Hour, 7 P.M.
How Sent, John B. Olivier, Jail, Ramsey County
Sex, male
Age, 40 (?)
Civil Condition, married
Children, yes (?)
Age Youngest Child, —
Occupation, Laborer
Degree Education, none.
Profession Religion, Catholic
Habits, probably bad —
Nativity, Ireland (?) (Parents also born there).
Physicians Committing, Geo. J. Hanley & H. P. O'Brien
Correspondents, wife in Chicago —
no family physician.

No. for Year, 153
Insane Relatives,
Cause Exciting
Cause Predisp.
Form, syphilitic
Accompanying Bodily Disorder,
Suicidal or Not, not
Date of this Attack, as far as known 2 months (belongs)
Duration, as far as known, 2 months
No. of Attack, no knowledge
No. of Admissions, 1st
Age First Attack, (?)
Time of Leaving, March 26 '94
Time in Hospital, 3 mos 20 ds.
Result, Rec.

Crossed off from the register Feb. 1831 because ill... not committed.

EXAMINATION ON ADMISSION.

Exd by Dr Herzog, Dec 9/93. MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events,
Recent Events,
Special Subjects,
} very poor; does not remember anything

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

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

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

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

HALLUCINATIONS: none detected

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, apparently Coherent
Voluble or Reticent, reticent; quite so

GENERAL DESCRIPTIVE REMARKS:

Much confused; says "he came from St Louis here" — Does not know how old he is; Cannot tell when he came here. It seems hard to get anything out of him. He says "he forgets everything" Complains a good deal of headache — (Pain found on percussion). —

Personal and Medical History of Jeremiah Sullivan

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9½ WEIGHT, 145 lbs. NUTRITION Poor; hands cold; ends of fingers clubbed; surfaces of palms somewhat irregular
WOUNDS OR ABNORMALITIES, (See S. B. next page); anchor tattooed on right forearm.
TONGUE, Tremors, none Coatings, none Promptness Movement, somewhat slow.
PUPILS, Equality, unequal; left some larger than right Size, abnormally large
Response Light, normal Accommodation, yes; allotted too much; mobile.
SIGHT, Impaired
HEARING, Seems normal
COORDINATION, Arms, very much impaired; finger to nose, eyes shut, readily inaccurate
Legs, somewhat impaired; standing, eyes shut, sways some. Turning quickly shows impairment
TREMORS, Hands, none Tongue, none
Facial Muscles, none General, none
REFLEXES, Patellar, equal — about 0 —
Other Reflexes, very slight ankle-clonus.
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Stupid & blank
SENSIBILITY,
HEART, action weak; systolic murmur at apex; apex beat displaced to left.
LUNGS, Hyp. - few scattering moist rales.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

Clean kept

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,
} Cannot get any information of these points "Forgets Everything"

Personal and Medical History of Jeremiah Sullivan

LOBERT, FISLER & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriff P.C. Hass, attended by M.N. Goss, with the following history, which is rather meagre. Patient seems to belong to the "Genus Tramp". Of consanguinity; heredity, number of attacks, duration of same, if ever in hospital, previous peculiarities, history of intemperance, disease or head injury, true seems to be no knowledge, though history states that the supposed cause of the disease is Syphilis, and patient's commitment recommended here on account of tertiary Syphilis producing mental degeneration. First symptoms of this attack were manifest, to examiner's knowledge, two (2) months ago; but it must be of longer standing. Disease seems to be increasing; not variable; no rational intervals. Derangement is now shown by hallucinations, delusion, and almost total aberration of mental faculties. Has attempted, w accomplished, rape. Is not suicidal, nor filthy nor destructive. He has been confined in jail 2 months. Has had no treatment save K.I. On personal examination he complains greatly of headaches; is dull and stupid; there is a tendency to wander without purpose. Lymphatics unusually enlarged; tibial gummata; many scars on head; alopecia.

Dec 6 Dec 6/93. On admission, is in good physical condition. Was put on 13ss (S.R. Complexion, sandy; hair, dark; eyes blue; condition of skin good; he has a bunch on right elbow & has had his nose broken; there are scars all over his head. Bodily condition dirty. Is well-behaved). Dec 7/93. Was restless for 3 hours, sleeping 6 hours, last night. AM. Pulse 102. R 19. Te 99. Appetite good; bowels seem regular.
" 7 " 8 no cough noticed. Is quiet; hardly ever speaks; does not seem to realize where he is. Dec 8/93. Slept 6 hours, was restless for 3 hours, last night. AM. Pulse 100. Te 99. Complained of headache today.
" 9 Dec 9/93 Was quite restless for 4 hours, sleeping but 5 hours, last night. AM. Pulse 92 Te 98.6.
" 10 Dec 10/93. Slept 5 hours; was restless for 4 hours, last night. AM. Pulse 90 Te 99 Complains of having headache all last night.
" 11 Appetite good. Bowels have moved quite regularly. Dec 11/93. Was more restful, sleeping 7 hours, last night.
" 12 AM. Pulse 98 Te 98.6. Dec 12/93. Passed last night about as the previous one. AM Pulse 98 Te 99.
" 13 Dec 13/93. Was quite restless for 3 hours, but slept 6 hours, last night. AM. Pulse 104. Te 99. Complains, quite frequently, of pains in head & almost always keeps it covered with a handkerchief.
" 14/15/16 Dec 14/93. AM Pulse 120. Te 99.4 Dec 15/93. AM. Pulse 90. Te 99. Dec 16/93. AM. P 104 Te 98.6.
" 17 Dec 17/93. AM " 90. " 98.6. His left eye is, today, low & somewhat inflamed; holds a handkerchief over it all the time. His face also appears to be more red than usual. Dec 18/93. AM. 96.
" 18 " 20 Te 98.6. Dec 20/93. Patient continues nightly, more or less restless for from 2 to 3 hours, sleeping, however, 6 or 7 hours each night. Appetite good; bowels regular. Is very dull & indifferent; steadily so. Habits are clean. Dec 21/93. Was restless 2 hours, but slept 7 hours, last night.
" 21 AM. Pulse 96. Complains of being sick & has been lying down most of the time, during day. Also
" 22 Coughs Occasionally, at times. Dec 22/93. Slept but 5 hours, was restless 4 hours, last night; Otherwise quiet.
" 23/24/25/26/27 Dec 23/93. AM. Pulse 88. Dec 24/93. AM. Pulse 114. Dec 25/93. AM. Pulse 95. Dec 26/93. AM Pulse 84. Dec 27/93. P 90.
" 31 Dec 31/93. Appetite good. Bowels regular. Is quietly behaved. Sits or lies down in a bench, in the same place, nearly all the time. Is continually complaining of his head. Is on medicine. Habits are clean.

1894

Jan 2/10 Jan 2/94. Wt 152 pds. (a gain of 7 pounds, since coming). Pulse 102. Jan 10/94. Still takes Potassium
" 13 Iodide gr. xxx t.i.d. Jan 13/94. Has much improved in intelligence & can now write his own name. Answers questions quite readily. Has some illusions, also. This morning kicked a fellow-patient, (R.J. Ford), & fractured his zygoma. Ford had spoken to him about littering up the floor, which he (Ford)

Personal and Medical History of Jeremiah Sullivan

1894

Jan 13 Cond. " 16 had just swept. Patient is showing an Iodide acne; ordered discontinued and given fl. Ext. of Ergot mx t.i.d; increase m 5 daily. Jan 16/94. Appetite good; bowels are regular. Seems to be improving both as to his mental & physical condition. Still, however, has illusions.
" 21 Personal habits are clean. Jan 21/94. Eloped this evening by unlocking a screen and jumping out through the window. Two other patients (Walter Moses & Thomas Grady) also escaped at same time, with him. Diligent search was made for them but without results.
" 23 Jan 23/94. Was returned today by a farmer; patient's feet were badly frozen. Feet received due
" 24 treatment & were bandaged up. Patient was then put to bed. Jan 24/94. Did not sleep any, last night; was given hypodermic, but without effect. Says his feet are paining him very
" 25 much. Eats fairly well; has some cough. Jan 25/94. Was again given hypodermic, last night, yet did not sleep any. Bowels are badly constipated; no movement for 3 or 4 days.
" 26 Refused his breakfast, this morning. Jan 26/94. Was given hypodermic; slept but 1 hour last night.
" 27/28/29 Jan 27/94. Did not sleep any last night; sleeps a little during the day. Jan 31/94. Has been restless for 7 hours or so, in each of last 4 nights & has slept very poorly; about 2 hours each night. His sore feet are improving but he still remains in bed. Talks rationally; no delusions noted. Reads a good deal. Habits are clean & tidy.

Feb 1/2 Feb 1/94. Wt 144½ pds. Pulse 76. Feb 2/94. Patient has been kept in bed since his return on account of his frozen feet. Has remained there quietly, though somewhat anxious to get up
" 9 and be about. Was got up today. Feb 9/94. For the past week, has been sleeping very poorly, only about 3 hours each night; hypodermics given did not seem to have any effect.
" 28 Feb 28/94. Has remained up daily since 2d inst. Appetite good; bowels regular. Toes on one of his feet still seem somewhat sore & tender; on this account he finds some difficulty in moving about. Habits are neat & clean. Patient's health is good.

Mar 1/6 Mar 1/94. Wt 148½ pds. Pulse 96. March 6/94. Remains up & about, sore toes are much improved & he gets about more easily & helps willingly with the work. Is quiet & always now
" 21 well-behaved. Talks fairly freely; shows no delusions. Habits are neat and clean.
" 26 Mar 21/94. Was provoked by another patient (Wm Brown) today and struck him, bruising said Brown's face & blacking his eye. March 26/94. Apparently has been resting & sleeping well, at night, for some time. Appetite has been good; bowels regular. Has also been well-behaved; talks rationally, no delusions noted. Works in ward; habits are clean and neat.

Patient has continued steadily to improve. Was allowed to leave, today.

Crossed off the records; was illegally committed.

Personal and Medical History of Mathis Kouth

"Kauth" he says

HERBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3584.

Residence, 624 Audebon St. St Paul

Date Admission, 6th December 1893.

Admitted by, Dr Kilbourne Hour, 7 PM

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

Sex, male

Age, 35

Civil Condition, married

Children,

Age Youngest Child,

Occupation, Laborer

Degree Education, not educated

Profession Religion, R. Catholic

Habits, unknown

Nativity, Germany, (parents also born there)

Physicians Committing, Geo. F. Hanley & A. Macdonald

Correspondents, (wife) Mary Kouth, 624 Audubon

No. for Year, 154.

Insane Relatives, none

Cause Exciting, not known

Cause Predisposing, not stated. prob. previous attk

Form, dementia

...panying Bodily Disorder, none mentioned.

...al or Not, not.

...f this Attack, unknown

...ion, not known.

... Attack, 2nd

... Admissions, 1st here (was at St Peter in 1885).

...irst Attack, about 2y.

...of Leaving, Apr. 26 1900

...in Hospital,

..., Transferred to Hastings.

6 PM

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog Dec 9/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, good

Recent Events, good

Special Subjects, (see note below).

PERCEPTIVITY: (see note below)

Alert or Dull, —

Correct or Illusive, —

REASONING POWER:

Ordinary Subjects,

Own Mental State, good (see note)

Special Subjects,

EMOTIONAL STATE:

Normal, Calm, normal, calm

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, None

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS: None

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Answers questions

GENERAL DESCRIPTIVE REMARKS:

Has the idea he must wear his hair like a woman; now has it long & tied up at the back. He says here is witchcraft; that he does not think the patients in St Peter are insane, merely weak, ott men. If they had their strength they would be all right. Denies being examined before a judge of Probate, (this may refer to the fact that he does not understand). He does not believe this & he can't explain. Has talked to Dr. Herzog & shows no evidence of insanity or even feeble-mindedness (except the long hair) beyond that to be expected of a man of his social position. He made no objection & may be kept at

Personal and Medical History of Mathis Kouth

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6½ WEIGHT, 147 lbs. (?) NUTRITION, Seems quite fair; circulation fair. Ed of fingers somewhat cold.

WOUNDS OR ABNORMALITIES, apparently beginning hematoma of right Ear.

TONGUE, Tremors, none Coatings, Pale yellowish Coating in back part Promptness Movement, prompt

PUPILS, Equality, Equal Size, dilated

Response Light, excessively mobile Accommodation, excessively mobile

SIGHT, Fair

HEARING, Good

...t, Marked impairment.

...quickly, always sane. —

Case No. 3584. Mathis Kouth or Kauth. Vol. 25.

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

...rare.

Other Reflexes,

ARTICULATION, Hesitating, / Slurred, somewhat

FACIAL EXPRESSION, somewhat dull

SENSIBILITY, —

HEART, Sounds are good; strong.

LUNGS, Slight evidence of consolidation of right apex

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Probably long ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") No history obtained

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Mathis Koutt

"Kauth" he says

HERBERT, FULLAS & CRAMBERS, DAVENPORT, IOWA

Whole No. 3584.
Residence, 624 Audubon St. St Paul
Date Admission, 5th December 1893.
Admitted by, Dr Kilbourne Hour, 7 PM
How Sent, John. B. Olivier, Jo P, Ramsey County
Sex, male
Age, 35
Civil Condition, married
Children,
Age Youngest Child,
Occupation, Laborer
Degree Education, not educated
Profession Religion, R. Catholic
Habits, unknown
Nativity, Germany; parents also born
Physicians Committing, Geo. J. Hanley & A. Macd
Correspondents, (wife) Mary Koutt, 624 Audubon

No. for Year, 154
Insane Relatives, none
Cause Exciting, not known
Cause Predisposing, not stated, prob previous attk
Form, dementia
...panying Bodily Disorder, none mentioned.
...al or Not, not.
...f this Attack, unknown
...ion, not known.
Attack, 2nd
Admissions. 1st h. - /



6 PM

Evly Dr. Herzog Dec 6/93.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, good
Recent Events, good
Special Subjects, (see note below).

PERCEPTIVITY: (see note below)
Alert or Dull, –
Correct or Illusive, –

REASONING POWER:
Ordinary Subjects,
Own Mental State, good (see note)
Special Subjects,

EMOTIONAL STATE:
Normal, Calm, normal, calm
Indifferent,
Exalted,
Depressed,

DELUSIONS:
Systematized or Not,
Special Subjects, None
Transitory or Not,

HALLUCINATIONS:
ILLUSIONS: None

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Answers question

GENERAL DESCRIPTIVE REMARKS:

Has the idea he must wear his hair like a woman; now has it long tied up at the back. He says he is reticuscus; that he does not think the patients in B[th] are insane, merely weak, ill men. If they had their strength they would be all right. Denies being examined before a Judge of Probate, this may be due to the fact that he does not understand. He does not believe that he can name Stephens. Has asked to stay. Does not show no evidence of insanity or even feeble mindedness (except the long hair) beyond that to be expected of a man of his social position. He made no objection to having his hair cut.

Personal and Medical History of Mathis Koutt

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6½ WEIGHT, 147 pds (?) NUTRITION, Seems quite fair; circulation from ends of fingers somewhat bad.
WOUNDS OR ABNORMALITIES, apparently beginning hematoma of right Ear.
TONGUE, Tremors, none Coatings, Pale yellowish Coating in Coloct part Promptness Movement, prompt
PUPILS, Equality, Equal Size, dilated
Response Light, excessively mobile Accommodation, Excessively mobile
SIGHT, Fair
HEARING, Good
COORDINATION, Arms, shows impairment. Finger to nose, eyes shut, Marked impairment.
Legs, Standing, eyes shut, sways slightly; turning quickly, sways some.
TREMORS, Hands, none Tongue, none
Facial Muscles, none General,
REFLEXES, Patellar, equal – about q – D[r] O[s] Scale.
Other Reflexes,
ARTICULATION, Hesitating, / Slurred, somewhat
FACIAL EXPRESSION, somewhat dull
SENSIBILITY, –
HEART, Sounds are good; strong.
LUNGS, slight evidence of consolidation of right apex
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Probably long ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") } no history obtained
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Mathis Kouth (Kauth)

EBERT, FOLEY & EHAMBERS, DAVENPORT, IOWA.

1893

Was received here at the hands of Deputy Sheriff Haas, attended by Wm. H. Goss, with the following history. As to consanguinity unknown; no history of heredity. This is, probably, the 2nd attack; had one before, when he was sent to St Pete Hospital for 7 months (from Feby 6/88 to Sept 11/88). When first symptoms of this attack were manifested is unknown; he is a man unable to take care of himself. Disease seems stationary; is not variable; no rational interval. Derangement now shown in that he will not work; thinks people want to hurt him. Talks foolishly. Unable to take care of himself. Thinks he must wear his hair like a woman. He has threatened his wife. Is not suicidal, nor filthy nor destructive. There were no peculiarities of temper &c previously shown. As to any history of intemperance unknown. No severe disease or injury to head. Supposed cause of the disease is unknown. Patient has had no medical treatment. On personal examination he is found to be stupid; will not answer questions in an intelligent manner. Appearance and manner those of an insane person.

Dec 6 — Dec 6/93. On admission, patient is in fair condition. Has sputum 1 Oct (S.R. Complexion dark; hair dark brown; eyes blue; condition of skin good; bodily condition dirty; behavior good). Pulse 64. R 16.
" 7 — no injuries or peculiarities noted. Dec 7/93. Slept well (9 hours) last night. Appetite fair; bowels regular. No cough noticed. Is quiet & well-behaved. Talks little, but answers promptly any questions put to him, in a sensible manner. No complaints or injuries to note. Dec 8/93. Again reported & slept well last night. Appetite fair; bowels normal. Pulse (am) 84. R 20. No complaints.
" 8 — Conduct & behavior by day, as usual. Dec 9/93. AM. Pulse 102. R 18. Sleeps well at night. —
" 9 — Dec 10/93. Pulse 96. R 22. Dec 11/93 AM. Pulse 96. Appetite fair; bowels seem regular.
" 10 — Dec 12/93. AM. Pulse 104. Dec 13/93. AM " 94. Has continued to sleep uniformly well, each
" 11 — night. Has been quiet & well-behaved by day. Talks little, but in a sensible manner. Habits are clean.
" 12 — Dec 20/93. During this, the 2nd week, patient's rest & sleep, at night, have been uniformly good. Pulse,
" 13 — taken each morning, has been somewhat above normal. He talks little but answers questions promptly & intelligibly. Appetite has been good & bowels regular. Is quiet & well-behaved: no delusions or hallucinations observable. Patient, by his manner, shows a carelessness of being here; a quiet ignoring of all appearances; a lack of questioning about self, his own affairs. A quiet, unquestioning satisfaction that could hardly proceed from anything but a quiet dementia.
" 31 — Dec 31/93. Appetite continues good. Bowels are free; no cough noticed. Is quiet & harmless. Talks little, but answers questions promptly. Derangement shown more by his manner, than anything he does. — Is willing to work and do anything that is asked of him. No complaints or injuries to report. Appears to be in sound bodily health. Habits are cleanly. —

1894
Jan 1/94 — Jany 1/94. Pt. 145 pds. Pulse 84. Jan 15/94. Appetite good. Bowels regular. No cough noticed. Behavior is good: he makes no complaints. Answers questions promptly; does not however, originate any conversation. Sits in the ante place, when not at work, in the ward. Works well & willingly & seems to understand what
" 31 — is required to be done. Is somewhat surly in manner. In good bodily health. Jan 31/94. No change to note.
Feb 1/94 — Feb 1/94. Wt 140 pds. Pulse 80. Feb 22/94. Does not change any from month to month. Quietly
" — behaved; sitting in ante place, when not at work; takes little or no interest in his surroundings. Talk is coherent but he will only answer when spoken to. Habits are cleanly. In good physical condition
" 23 — Feb 23/94. This patient was committed here under "Law of 1893" recently declared unconstitutional.

Personal and Medical History of Mathis Kouth (Kauth)

1894 Cont'd

Feb 23 — Feb 23/94. Patient was to-day. Taken out and Returned under "new Commitment papers" from Olmsted County. Feb 28/94. Appetite good; bowels regular. Health seems good.
" 28 — Is well-behaved: makes no complaints. Talks very little, but is a quiet self-contained manner. — Heretofore, & until recently, it was his habit to sit, moping, in one place nearly all the time, saying nothing. Of late, he walks leisurely about the hall. Is very desirous of being allowed to go home to St Paul. He appears to be somewhat weak-minded. Is cleanly in his habits. ——

Mar 1/30 — Mar 1/94. Keeps in good flesh. — March 15/94. No noticeable change in patient's condition. —
" 31 — Mar 31/94. Keeps about as described in Feb 28th note, above. Is quiet & peaceable; talks very little, but what he does say is reasonable. Works willingly; habits cleanly. Health good. Is anxious to go home.

April 1/30 — April 1/94. Wt 151 pds. (shows some gain in flesh); Pulse 72. April 30/94. About as lastly described; still talks very little, but sensibly. Still wishes to be allowed to go home.

May 1/31 — May 1/94. Wt 145 pds; Pulse 74. May 31/94. Appetite good; bowels regular; appears to be in good bodily health. He is quiet & well-behaved; makes no complaints: has received no injuries; talks very little, but in a sensible manner. Inclined to be restless & very anxious to get away from hospital. Is cleanly in his habits. He works well & willingly on the ward. —

June 1/30 — June 1/94. Wt 146 pds. Pulse 70. June 30/94. No change regarding his condition noticed during month. —
July 2/31 — July 2/94. Wt 150 " " 80. July 4/94. Complained of having a cold & remained in bed, to-day.
" 15/15 — July 15/15/94. Is still sick in bed, but is now nearly well & is taking his meals regularly again.
" 19/31 — July 19/94. Has fully recovered from his sick attack & is up to-day. July 31/94. No special change to report. —

Aug 1/31 — Aug 1/94. Wt 146 pds. Pulse. Aug 31/94. Apparently rests & sleeps well. Appetite good; bowels regular. Behavior is good. No complaints or injuries to report. Talks in a sensible manner & appears to have recovered his rational faculties. Is cleanly in his habits and works some in the ward.

Sept 1/30 — Sept 1/94. Wt 148 pds. Pulse. Sept 10/94. On account of repairs &c at this ward, patient moved to Annex.
" 30 — Sept 30/94. Patient is quiet & well-behaved. Usually stands up most of the time, while in the ward, seldom speaks. Works some outside. Habits clean. Appears in good physical health.

Oct 1/94 — Oct 1/94. Keeps in good flesh & physical condition. Oct 31/94 No apparent change noticeable.
Nov 30 — During this period, there is no apparent change. He is quiet; well-behaved; works outside; when
Dec 31 — on wards, is somewhat unwieldy, walking the floor. Never speaks. Health apparently, is good.
Jany 31/95

Feb 1/95 — During this quarter, no change noticeable. Seems contented here. Works outside, most of
to Apl 30 — the time: quiet & well-behaved. Habits are clean. Health apparently good.

May 1/95 — During this quarter, no change to note in patient's condition. He is quiet; melancholy,
to July 31 — seldom speaks, unless spoken to. Habits clean: health seems good. He works in the farm.

Aug 1/95 — During this period, patient has shown no change. Quiet; seeming despondent: seldom
to Sept 30 — speaking: works outside quite regularly; habits clean: health apparently is good.
Oct 31

Nov 1/95 — Nov 1/95. Wt 141 pds. Pulse 88. Nov. Dec 1st to Jany 31/96. Still quiet & rather melancholy. —
Dec 1894 to Jany 31 — Works outside: seldom speaking. Habits clean. Health seems to be good. —

Feb 1/96 to March 1st to Apl 30/96 — Feb 1/96. Wt 140 pds. Pulse. Feb. March 1st to Apl 30/96. No special change noted. Quiet & rather melancholy: seldom speaking: works outside, most of the time. Habits clean: dress neat. Health apparently good. —

May 1/96 to Aug 1/96 — Summary Notes by Dr. Phelps. Patient a case of terminal dementia: No variation in physical condition during period
Works a considerable portion of the time: Wt. 130 to 139 lbs.

See Folio 378. Transfer Book A.

Personal and Medical History of Joseph Wilcox

Whole No. 3585.
Residence, Austin, Mower Co. Minn
Date Admission, 6th December 1893.
Admitted by, Dr Kilbourne Hour, 7 PM
How Sent, E. E. Washburn, Jof C. Mower County
Sex, male
Age, 63
Civil Condition, Widower
Children, none
Age Youngest Child, —
Occupation, Farmer
Degree Education, not educated
Profession Religion, Not a Church membe
Habits, Says been very intemperate
Nativity, Canada, (Parents born in Englan
Physicians Committing, Ed Washburn and Alex MacDonald
Correspondents, (Sister) Eliza A. Dutcher, Austin, Minn
No family Physician —

No. for Year, 155.
Insane Relatives, Father was insane
Cause Exciting, Inebriety
Cause Predisposing, heredity & previous attacks
Form, Alcoholic dementia
nying Bodily Disorder, None mentioned in history
r Not, not.
is Attack, November 27/93
about 10 days —
tack, many probably (here before as "inebriate")
missions, 2nd here
Attack, 31 —
eaving, Jan. 22. 1897
Hospital, 3 yrs. 1 mo. 16 ds.
Dis- Pthisis Pulmonalis



EXAMINATION ON ADMISSION.

Exd by Dr Herzog Dec 9/93 (Dr Phelps present)

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Impaired, marked
Recent Events, Not very good
Special Subjects, much confus

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

REASONING POWER:
Ordinary Subjects, poor
Own Mental State, very poor: does not know W
Special Subjects, = only came to visit some friends —

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, somewhat

GENERAL DESCRIPTIVE REMARKS:

Says he is here with reference to his being here before & also to straighten up some business with his brother in law; expects to go away in about a week or so. Has come quite a distance, walking this morning". Says he drinks some but has not drunk to excess since leaving here. Says he never was here as a patient, only came here on his way by" - then contradicts himself & says he was here on C. as an "Inebriate" in the fall of the year, but does not remember the year. Seems much confused - Says was at last night & staid with some friends & went out walking to the

× Continued
Lake this morning" - Emphasizes the fact that Dr. Dunn because his appearance (no white shirt &c) but he has been cleaning horses &c. Denies ever in his life drinking hardly - "never was arrested for Drunkenness (This does not agree with previous history). Patient is very markedly paretic both as to motor symptoms, also by reason of typical mental condition - Self satisfied & unconscious of any mental defect. —

Personal and Medical History of Joseph Wilcox

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 141 lbs NUTRITION, Quite good for one of his age; though somewhat weak
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, Marked Coatings, Too large Tooth mark Promptness Movement, prompt
PUPILS, Equality, Equal Size, Normal
Response Light, prompt Accommodation, very marked.
SIGHT, fairly Good.
HEARING, somewhat impaired
COORDINATION, Arms, [illegible] o. Finger to nose, eyes shut, considerably wrong finger
[illegible] neural
[illegible] t - Knee abnt 1 -

Case No. 3585 Joseph Wilcox Vol. 25.
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, no; fairly distinct, but some hesitation at times -
FACIAL EXPRESSION, slightly impaired. —
SENSIBILITY,
HEART, Sounds are a little raped; slight roughness of 1st sound at apex.
LUNGS, Seem all right -
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably some time ONSET GRADUAL OR SUDDEN, Gradual -
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations, Father, he says, was partially insane a few times before was never in Asylum -
Brothers or Sisters, No further history of heredity attained, tho' some slight history of hysteria or neurasthenia in one of sisters —

Personal and Medical History of Joseph Wilcox

GIBERT, FIDLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3585.
Residence, Austin, Mower Co. Minn
Date Admission, 6th December 1893.
Admitted by, Dr. Kilbourne Hour, 7 PM.
How Sent, S.S. Washburn, Jof C. Mower County
Sex, male
Age, 63
Civil Condition, Widower
Children, none
Age Youngest Child, —
Occupation, Farmer
Degree Education, uneducated
Profession Religion, not a church member
Habits, have been very intemperate
Nativity, Canada (Parents born in England)
Physicians Committing, Ed Washburn and Alex Macdonald.
Correspondents, (Sister) Eliza A. Dutcher, Austin, Minn
No family Physician.



No. for Year, 155.
Insane Relatives, Father was insane
Cause Exciting, Inebriety
Cause Predisposing, heredity & previous attacks
Form, alcoholic dementia
...nying Bodily Disorder, None mentioned in history
...r Not, not.
...is Attack, November 27/93
about 10 days —
...ack, Many probably (has before was "Inebriate")
...missions, 2nd here
... Attack, 31 —
...eaving, Jan. 22. 1897
...Hospital, 3 yrs. 1 mo. 16 da.
... Dis. Phthisis Pulmonalis

Ex'd by Dr Herzog Dec 9/93 (Dr Phelps present)

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, somewhat sluggish
MEMORY:
Past Events, Impaired, markedly
Recent Events, Not very good
Special Subjects, much confused
PERCEPTIVITY:
Alert or Dull, quite dull
Correct or Illusive, Illusive
REASONING POWER:
Ordinary Subjects, poor
Own Mental State, very poor, does not know why he is here
Special Subjects, = only came to visit some friends - not a patient.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, somewhat
Depressed,
DELUSIONS:
Systematized ~~or Not~~, None noted
Special Subjects,
Transitory or Not,
HALLUCINATIONS: probably has some
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Incoherent
Voluble or Reticent, voluble

GENERAL DESCRIPTIVE REMARKS:
Says he is here with reference to his being here before + also to straighten up some business with his brother in law; Expects to go away in about a week or so. "Has come quite a distance, walking this morning". Says he drinks some but has not drunk to excess since leaving here. Says he never was here as a patient. Only came here on his way by" - then contradicts himself & says he was here in C' as an Inebriate" in the fall of the year, but does not remember the year. Seems much confused - Says he was out last night + stood with some friends + went out walking with

Personal and Medical History of Joseph Wilcox

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in. WEIGHT, 141 lbs. NUTRITION, Quite good for one of his age; though somewhat wiry
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, marked Coatings, no; large fissures Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, prompt Accommodation, very marked.
SIGHT, fairly Good.
HEARING, Somewhat impaired.
COORDINATION, Arms,

Case No. 3585 Joseph Wilcox Vol. 25.
The Law of 1893 having been declared unconstitutional, this patient was recommitted. New commitment papers in box file in vault with the original ones.

...Rigid brows, eyes shut, ...considerably. Turns quickly ...

...neral ...t - Flew about 1 —

...tinct, sometimes hesitation, at times — ...ried. —

light roughness of 1st sound at apex.

...kept

Clean,	Careless,
Constipated,	Irregular,
Medium,	Poor,
Poor,	Irregular,
RESP.,	TEMP.,

...SUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably some time ONSET GRADUAL OR SUDDEN, Gradual —
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations, Father, he says, was partially insane a few times later was never in Asylum —
Brothers or Sisters, No further history of heredity obtained, tho' some slight history of hysteria or neurasthenia in one of sisters —

Personal and Medical History of Joseph Wilcox

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3585.

Residence, Austin, Mower Co. Minn

Date Admission, 6th December 1893.

Admitted by, Dr. Kilbourne Hour, 7 PM

How Sent, E. A. Washburn, Jof C., Mower County

Sex, Male

Age, 63

Civil Condition, Widower

Children, none

Age Youngest Child, —

Occupation, Farmer

Degree Education, uneducated

Profession Religion, not a church membe

Habits, has been very intemperate

Nativity, Canada (Parents born in Englan

Physicians Committing, E. A. Washburn and Alex MacDonald.

Correspondents, (Sister) Eliza A. Dutcher, Austin, Minn

No family Physician.

No. for Year, 155.

Insane Relatives, Father was insane

Cause Exciting, Inebriety

Cause Predisposing, heredity & previous attacks

Form, alcoholic dementia

nying Bodily Disorder, None mentioned in history

r Not, not.

is Attack, November 27/93

about 10 days —

ack, many probably (has before was "alcoholic")

EXAMINATION ON ADMISSION.

End by Dr Herzog Dec 9/93 (Dr Phelps present)

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, somewhat sluggish

MEMORY:

Past Events, Impaired, marked

Recent Events, not very good

Special Subjects, much confus

PERCEPTIVITY:

Alert or Dull, Quite dull

Correct or Illusive, Illusive

REASONING POWER:

Ordinary Subjects, Poor

Own Mental State, very poor: does not know w

= only came to visit some friends —

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, somewhat

GENERAL DESCRIPTIVE REMARKS:

Says he is here with reference to his being here before + also to straighten up some business with his brother in law; Expects to go away in about a week or so." Has come quite a distance, walking this morning". Says he drinks some but has not drunk to excess since leaving here. Says he never was here as a patient, only came here on his way by" - then contradicts himself & says he was here in Dec as an "inebriate" in the fall of the year, but does not remember the year. Seems much confused - Says he was out last night & stood with some friends & went out walking with the

+ Continued

Lake this morning" - Emphasizes the fact that Dr Dunteroure his appearance (no white shirt &c) but he has been cleaning horses &c. Denies ever in his life drinking early - "never was arrested for drunkenness (this does not agree with previous history). Patient is very markedly paretic both as to motor symptoms, also by reason of typical mental condition - Self satisfied & unconscious of any mental defect. —

Personal and Medical History of Joseph Wilcox

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in. WEIGHT, 141 lbs. NUTRITION, Quite good for one of his age; though somewhat bloated

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, Marked Coatings, too: large tooth mark Promptness Movement, prompt

PUPILS, Equality, Equal Size, Normal

Response Light, prompt Accommodation, very marked.

SIGHT, fairly Good.

HEARING, Somewhat impaired.

COORDINATION, Arms, Somewhat impaired; of legs, more so. Inges Romb, eyes shut, Legs, some inaccuracy. Standing, eyes shut, always considerably. Turning quickly much unbalanced.

TREMORS, Hands, Marked Tongue, Marked.

Facial Muscles, Some General, Some general

REFLEXES, Patellar, Equal — none, without re-inforcement — Plew abent 1 —

Other Reflexes,

ARTICULATION, Hesitating, no; fairly distinct, Slurred, Some hesitation at times —

FACIAL EXPRESSION, slightly impaired. —

SENSIBILITY,

HEART, Sounds are a little rapid; slight roughness of 1st sound at apex.

LUNGS, Seem all right —

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably some time ONSET GRADUAL OR SUDDEN, Gradual —

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

Mother or Mat. Relations,

Father or Pat. Relations, Father he says, was partially insane a few times later was never in Asylum —

Brothers or Sisters, No further history of heredity obtained, tho' some slight history of hysteria or neurasthenia in one of sisters —

Personal and Medical History of **Joseph Wilcox**

LINDLEY, FISLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Sheriff's Deputy Edson Bassett, with following history. There is no history of consanguinity nor known of heredity, his father having been insane. Has probably had many attacks. First Symptoms of this one manifested Nov 27th 1893, (about 10 days ago); disease seems stationary; not variable; no rational intervals. Patient is neither disposed to injure others, nor filthy, nor destructive, nor suicidal. Has used alcohol & tobacco to excess; he has had no severe disease or injury to head. Was in this hospital before for about 6 months (see note below ®). Supposed cause of the disease is Inebriety. On person ably exam^n. He is found he has had delusions for some time & now has hallucinations. He spoke of being at the street today, and meeting his sisters, who are dead, whereas he had been in bed all day; seemed rather suspicious as to his appearance; seemed to realize he was not himself. From other sources, it is learned that he has wandered around at night, and, on several occasions, narrowly escaped freezing to death

Note ® This patient was here before, from Nov 9/91 to May 14/92. At that time, was Committed as an "Inebriate" and put on C. Hall. Was always quiet & well-behaved. Worked some. Mind, however, was somewhat impaired. Complained, while here, of various minor ills. Physical health was somewhat improved, on his leaving. (See Vol 18. Page 85. No. 2867).

Dec 6 Dec 6/93. On admission, was put on B^r. (SR. Complexion dark; hair dark turning gray; Eyes blue; condition of skin good; bodily condition clean; behavior good. Is weakly). Pulse 96. Dec 7/93. Slept but 5 hours, last night. Was quite restless for 3 hours or so. AM. Pulse 92. Appetite medium. Bowels probably regular. Some cough noticed. Is restless & nervous today; continually asks the same questions over & over. Seems to have no memory. "Thinks he is in Austin". Again, talks Considerably & says he is merely here visiting; "has some business to transact & then is going back home". No complaints.

" 8 PM. Pulse 94. Dec 8/93. Slept poorly, only 5 hours, last night; quite restless for 3 hours or so. AM. Pulse 86. Nervous and restless, walking aimlessly about the hall. Talks some. Seems to have no memory; asks for his watch about every 5 minutes. Dec 9/93. Was restless the greater part of last night; slept but 4 hours. AM. Pulse 84. Appetite fairly good. Cannot remember anything for even a few minutes. Does not yet realize where he is. —

" 10 Dec 10/93. Again passed a restless and poor night. AM. Pulse 86. Conduct & behavior by day about as above.

" 11 Dec 11/93. Restless 3 hours or so, sleeping only 5 hours, last night. AM. Pulse 84. Nervous & restless during the day; walking aimlessly about; talks quite freely but always about some business he imagines he is here to attend to"; "then going home", he says. Makes no complaints.

" 12 Dec 12/93. Was restless a good deal of last night, sleeping but 4 hours. AM. Pulse 86. Appetite fairly good. Talks incessantly, plainly showing delusions. Memory still very poor. Not yet able to realize where he now is.

" 13 Dec 13/93. Was fairly restful, sleeping 5 hours, last night. AM. Pulse 84. Is about as usual, by day.

" 20 Dec 20/93. During past week, patient has, as a rule, been nightly, more or less restless; sleeping poorly only from 4 to 6 hours each night. Pulse has been about normal. Appetite good. Continues restless & nervous, by day, walking the floor a good deal of the time. Memory very poor. Still manifest delusions. Talks freely with his fellow-patients; "thinks they are all his neighbors". Does not yet seem to realize where he is. Recently, when asked when he was replied "In Waterloo, Iowa; had some business to attend to; was in a great hurry to transact it & was then going back to his farm near Austin". Works some in the dining-room. — Patient talks in a pleasant way, coherently, as to many answers, but is very rambling as to whole

" 28 Conversation. Is very demented. Habits are clean. Dec 29/93. Has apparently been sleeping somewhat better, of late; though, last night, he was restless for 3 hours or so, sleeping but 5 hours. Is quiet & well behaved

Personal and Medical History of **Joseph Wilcox**

1893

Dec 31 Dec 31/93. Patient is very nervous. Memory is poor. He does not yet seem to realize where he is. Shows many delusions. "Thinks everyone is a neighbor of his". Works in dining room. Makes no complaints. Seems quite contented here.

1894

Jan 2 Jan 2/94. Wt 134½ pds. (Has lost 6½ pounds in flesh; caused probably by his extreme nervousness & worrying over himself); Pulse 82. Jan 12/94. Was restless for 6 hours or so, last night; slept but

" 15 2 hours. Jan 15/94. Slept only 3 hours last night; was very restless for 5 hours. Complains continually, of pain in stomach &c. Appetite medium. Memory very poor: Cannot remember for 5 minutes. Still "thinks he is just visiting here". Is full of Incessant delusive ideas;

" 18 is very demented. Jan 18/94. Has been restless the past 2 nights for from 4 to 5 hours, sleeping

" 23 only 3 or 4 hours, in each. Jan 23/94. A slight redness, on nose, was noticed this morning. It

" 24 spread gradually. Patient was ordered to be isolated at 9 PM. Jan 24/94. Slept but 2½ hours, last

" 25/27 night; was extremely noisy for 4 hours or so. Jan 25/94. Pulse 86. Te 99.4. Jan 27/94. Pat.

" 28 Te 99.2. Was up out of bed & pounding the door last night. Jan 28/94. Was noisy for 5 hours, sleeping but 3 hours, last night. AM. Pulse 88. Te 99.2. Is out of bed, the greater part of the time.

" 29/30 Jan 29/94. Was restless & very noisy, last night. Jan 30/94. Has been kept in isolation since the 23rd inst, on account of this attack of Erysipelas. Is to-day, out on ward again. —

Feb 1 Feb 1/94. Was noisy 4 hours, sleeping but 4 hours, last night. Wt today 132 pds. Pulse 82. —

" 10 Feb 10/94. Since last noted, has been very restless at night, sleeping only from 1 to 4 hours;

" 20 and on 2 nights, none at all, being restless all night. Feb 20/94. Patient is very nervous and restless; continually complaining of some ill-feeling - memory is very poor. He is full of delusive ideas. Very demented. (Having been Committed under the "new Law" now declared unconstitutional, patient was today taken out).

" 21 Feb 21/94. Patient was returned to day under "new Commitment Papers" from Mower County. Was put on B^r. Feb 28/94. Occasionally restless at night; sleeping poorly. Is well-behaved. Works some on the ward. Is very forgetful. Still full of Delusive Ideas. —

" 28

Mar 7 Mar 7/94. Wt 129 pds. (a slight loss). Pulse 90. Mar 7/94. Was restless & noisy, during the night, for

" 14 7 hours & slept but 1 hour. Mar 14/94. Slept only 2 hours, last night; was restless & noisy for 5 hours.

" 15/23 Mar 15/94. Continues well behaved. Otherwise no material change to note. Mar 23/94. Has been

" 31 restless for from 4 to 7 hours, in each of past four nights & has slept very poorly. Mar 31/94. Lets or stands idly about on the ward: Goes out walking sometimes. Complains considerably of some ill-feeling (probably imaginary); still full of delusive ideas. Habits are clean.

Apl 2/30 April 2/94. Wt 127½ pds. Pulse 100. April 30/94. No material change to note, from what is above reported. Is very much confused at times; memory poor. Still much deluded.

May 1/15 May 1/94. Wt 129 pds. Pulse 84. May 15/94. Restless & somewhat noisy the past 2 nights; slept poorly.

" 18/31 May 18/94. Was, today, transferred to B^r. May 31/94. Quiet & well-behaved. Is quite talkative; very forgetful. Is much inclined to wander away, while out walking. Easily excited; very nervous

June 1/30 June 1/94. Wt 128 pds. P 72. June 30/94. Always about the same. Has "crying & laughing spells" at times

July 4/31 July 4/94. Wt 127½ " " 94. July 31/94. Does not seem to change any, from month to month —

Aug 1/31 Aug 1/94 Wt 124½ " " 95. Aug 31/94. Is becoming quite helpless, very forgetful, seems

(carried to page 390)

Personal and Medical History of Richard A. Jeffrey

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3586.
Residence, Winona, Minn
Date Admission, 5th December 1893.
Admitted by, Dr Kilbourne Hour, 7 PM
How Sent, H L Buck, Jof P, Winona County
Sex, Male
Age, 76.
Civil Condition, widower
Children, 4, living
Age Youngest Child,
Occupation, White-washing
Degree Education, Not educated
Profession Religion, not a Church-member
Habits, not known.
Nativity, Connecticut, (Parents also born there).
Physicians Committing, Franklin Staples & Edw. D. Keyes
Correspondents, (Son) F. A. Jeffrey, Winona, Minn
No family Physician -

No. for Year, 156
Insane Relatives, None, so far as known
Cause Exciting, Cerebral degeneration
Cause Predisposing, Chronic
Form, chronic melancholia simple
Accompanying Bodily Disorder, Some general paresis
Suicidal or Not, Suicidal & propensity now active.
Date of this Attack, about 1½ years ago
Duration, about 1½ years
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 74.
Time of Leaving, August 31/94
Time in Hospital, 8 mos - 25 Days.
Result, Died; Chronic Bright's Disease

EXAMINATION ON ADMISSION.

Exd by Dr Herzog Jany 22/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, sluggish
MEMORY:
Past Events, } Good
Recent Events, }
Special Subjects,
PERCEPTIVITY:
Alert or Dull, fairly alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, fair
Own Mental State, faulty.
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Depressed
DELUSIONS:
Systematized or Not, Believes that the Spirit of God has
Special Subjects, left him & he is therefore lost -
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, fairly coherent
Voluble or Reticent, somewhat reticent -

GENERAL DESCRIPTIVE REMARKS:

Patient is much depressed & always afraid something to worry about. His chief trouble is his costiveness - He is always afraid he will not have a movement of the bowels. His reason for attempting suicide is as follows: he thought he had soiled his underclothing & did not want his caretakers to clean him up & consequently cut his throat - In point of fact, he had not so soiled himself -

Personal and Medical History of Richard A. Jeffrey

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6½ in WEIGHT, 141 lbs NUTRITION, poor; atheromatous arteries
WOUNDS OR ABNORMALITIES, Chronic rheumatism, amounting almost to arthritis deformans
TONGUE, Tremors, slight Coatings, slight grayish on back Promptness Movement, fairly prompt
PUPILS, Equality, yes Size, contracted
Response Light, Yes; quite mobile Accommodation, yes - quite mobile
SIGHT, Good, considering age
HEARING, slightly impaired
COORDINATION, Arms,

Case No. 3586. Richard A. Jeffrey. Vol.25.

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, yes Slurred,
FACIAL EXPRESSION, Despondent
SENSIBILITY,
HEART, P. 60. No murmurs.
LUNGS, good.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, } No history obtainable
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Richard A. Jeffrey

SUBLETT, PUGLAR & SHARPLESS, DAVENPORT, IOWA

Whole No. 3586. No. for Year, 156.

Residence, Winona, Minn. Insane Relatives, none, so far as known

Date Admission, 5th December 1893. Cause Exciting, cerebral degeneration

Admitted by, Dr Kilbourne Hour, 7 PM. Cause Predisposing, Chronic

How Sent, H L Buck, Jof P, Winona County. Form, chronic melancholia simple

Sex, Male. Accompanying Bodily Disorder, Some general paresis

Age, 76. Suicidal or Not, Suicidal & propensity now active.

Civil Condition, widowed. Date of this Attack, about 1½ years ago

Children, 4, living.

Age Youngest Child,

Occupation, White - washing. Time of Leaving,

Degree Education, Not educated. Time in Hospital, 8 mos - 25 Days.

Profession Religion, not a Church - member. Result, Died; Chronic Bright's Disease

Habits, Not known.

Nativity, Connecticut; (Parents also born there).

Physicians Committing, Franklin Staples & Edw^d D. Keyes

Correspondents, (Son) F. A. Jeffrey, Winona, Minn

No family Physician -

EXAMINATION ON ADMISSION.

Exd by Dr Kenyon Jany 22/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, sluggish

MEMORY:

Past Events, } good

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, faulty.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Patient is much depressed & always finds something to worry about. His chief trouble is his costiveness - He is always afraid he will not have a movement of the bowels. His reason for attempting suicide is as follows: he thought he had soiled his underclothing & did not want his caretakers to clean him up & consequently cut his throat. In point of fact, he had not soiled himself -

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Depressed

DELUSIONS:

Systematized or Not, Believes that the Spirit of God has

Special Subjects, left him & he is therefore lost -

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, fairly coherent

Voluble or Reticent, somewhat reticent -

Personal and Medical History of Richard A. Jeffrey

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6½ in. WEIGHT, 141 lbs. NUTRITION, poor; atheromatous arteries

WOUNDS OR ABNORMALITIES, Chronic rheumatism, amounting almost to arthritis deformans

TONGUE, Tremors, slight Coatings, slight grayish on bk^s Promptness Movement, fairly prompt

PUPILS, Equality, yes Size, contracted

Response Light, yes; quite mobile Accommodation, yes - quite mobile

SIGHT, good, considering age

HEARING, slightly impaired

COORDINATION, Arms, } Tests omitted; patient aged -

Legs, }

TREMORS, Hands, slight Tongue, no

Facial Muscles, no General, no

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, yes Slurred,

FACIAL EXPRESSION, Despondent

SENSIBILITY,

HEART, P. 60. No murmurs.

LUNGS, good.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, kept Constipated, Irregular,

APPETITE, Good, poor Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual

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

Mother or Mat. Relations, } No history obtainable

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Richard A. Jeffrey

LUDDEN, FITCH & CHAMBERS, DAVENPORT, IOWA.

1893

Has received here at the hands of Deputy Sheriff E. V. Bogart, 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. Attack came on gradually since about a year & a half ago, by hallucinations & melancholy. Disease seems increasing; is variable & there are rational intervals, but at irregular periods. Derangement now shown by imaginary ailments & general melancholia. Patient is not disposed to injure others; has attempted suicide, by cutting his throat; propensity now active. Is not particularly filthy or destructive. No peculiarities as were previously manifested, so far as known. No history of intemperance given nor of any severe disease or injury to head. He has not been restrained or confined. Supposed cause of the disease is cerebral degeneration. Has received very little medical treatment, except for occasional functional derangements. On personal exam^n Patient shows passive indifference. He answered questions readily; said he had cut his throat, because he had passed his bowels in his clothes, (which was not true). He sat in a stupid & indifferent way. Appearance & manner was that of a man suffering from partial dementia & melancholia. There is also noticed some general paresis, especially affecting some of the muscles of the arms and face.

Dec 6 Dec 6/93. On admission, is in poor condition. Pac^t on 6^th. (S.R. Complexion light; hair gray; Eyes blue; Condition of Skin good. Has a cut on throat; thumbs deformed. Bodily Condition clean; is well-behaved. Has rheumatism). Pulse 84. R 22. This cut is on throat under the Chin; about 2 inches long;
" 7 had been recently sewed up; no other injuries noted. Dec 7/93. Was quiet and slept 8 hours, last night. Am. Pulse 94. R 14. Appetite fair; bowels free. No cough observed. Is quiet & well-behaved. Talks little, but answers questions promptly & sensibly. "I'm sorry he cut his throat." No delusions or hallucinations noted.
" 8 No complaints or injuries to report, further. Dec 8/93. Again rested and slept well, last night. AM. Pulse 76. R 18. Appetite fair; had a slight passage of the bowels last night; bowels, however, are somewhat costive. Has a slight cold.
" 9 Dec 9/93. Slept 8 hours, last night. AM. Pulse 76. R 20. Appetite poor; bowels constipated. He has a slight cold & complains of being cold & unable to sit up. Was put to bed. Continues quiet & well-behaved. Talks little, but
" 10 answers correctly. Dec 10/93. Rested & slept well, last night. AM. Pulse 70. Appetite poor; ate but little at
" 11 breakfast this morning. Bowels free. Quiet & remains in bed. Dec 11/93. Again slept well, last night. AM. Pulse 70. Appetite still poor: ate sound breakfast. Bowels are free. He has no cough but a slight
" 12 hoarseness. Is quiet but querulous; talks despondingly of his condition. Dec 12/93. AM. Pulse 76. Appetite still poor; bowels constipated. Is well-behaved, but feeble; talks a little, but in a rambling manner.
" 13 Is under the delusion that some one wishes to hurt him. Dec 13/93. AM. Pulse 70. Eats now a little at every meal. But bowels are still badly constipated. Complains that food does him no good, as he has no discharge.
" 14 Well-behaved. Talks in a rather childish manner. Dec 14/93. AM. Pulse 70. Appetite fair. Bowels constipated.
" 15 quiet but generally despondent. Dec 15/93. AM. Pulse 74. Was given pills last night & salts this morning. Fears he
" 16 will require to have an injection. Dec 16/93. AM. Pulse 68. Bowels free today. Appetite is improving. Lies quietly in bed. Talks quite rationally. Is very depressed in spirits. Always wanting something, but does not seem to know
" 17 exactly what it is. Dec 17/93. AM. Pulse 92. Takes a little food at every meal. Bowels are now free. Talks
" 18 incoherently, & in a very melancholy way, about his health. Dec 18/93. AM. Pulse 66. Appetite rather poor. Bowels are fairly free, (though he had no passage yesterday). Talks in a childish, weak-minded way. Complains about
" 19 his health generally, though he makes no specific complaint. Dec 19/93. AM. Pulse 84. Bowels again free.

Personal and Medical History of Richard A. Jeffrey.

1893

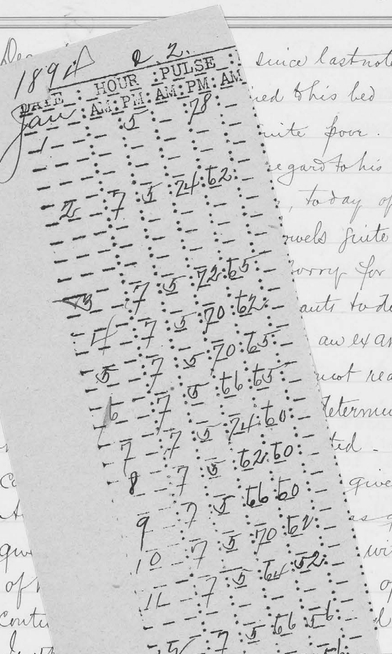
Dec 20 Dec 20/93. Pulse 84. Since last noted, continues to rest & sleep well, at night; uniformly 9 hours
" 21 [illegible] ed this bed since the 9th inst & has remained there quietly ever since.
" 22 [illegible] nite poor. Patient is well-behaved. Talks coherently but in a very
" 23 [illegible] regard to his health & condition. Is feeble, weak-minded & childish
" 24 [illegible], today of a pain in his hip. Bowels are quite badly constipated. —
" 25 [illegible] wels quite costive. Habits clean. Patient is well-behaved. Talks quite
" 26 [illegible] orry for what he has done; (Cutting his throat). Dec 26/93 Seems
" 27 [illegible] nts to die". Is still confined to his bed. Eats fairly well, now.
" 28 [illegible] amination; the following noted; find a Stricture of the rectum
" 29 [illegible] not reach the upper limits of the Stricture. The rectum is dilated
" 30 [illegible] termine whether the stricture was malignant or not. His bowels
" 31 [illegible] ted - Attendant (nurse) reports that, in given an enema, some blood

1894

Jan 1 Jan 1/94. [illegible] transferred to 6^2 (the "Sick-ward"). Appears (as noted by the
" 2 Asst. [illegible] es phlegm; says "he has to vomit up everything he eats";
" 3 also "th[illegible]". Is kept in bed. Jan 2/94. Wt (in underclothes) 118 pounds.
" 4 (Has bee[illegible]ly & rapidly losing in flesh, since coming). Still complains of bowels being
" 5 Constipated. Again given laxatives. Said "these made him sick at his Stomach". —
" 6 Jan 3/94. Bowels have moved. Jan 4/94. Is coughing a good deal, today, & raising large quan-
" 7 tities of phlegm of a light color. Jan 5/94. Again coughing & raising phlegm. Appetite fairly good.
" 8 Bowels again constipated. Jan 6/94. Gave enema; bowels moved but little. Jan 7/94. Bowels
" 9 have moved. Jan 8/94. Appetite is improving. Jan 10/94. Bowels have moved freely. —
" 11 Jan 11/94. Complaining, all the time, of his bowels. Appetite fairly good. Says "he wants to die".
" 12 Jan 12/94. Given Laxatives. Jan 13/94. Bowels have moved. Jan 15/94. Has slept nightly,
" 13 since 1st inst, on the average of 6 hours. Appears to be getting somewhat stronger. (See Record
" 26 of Pulses attached). Jan 26/94. Complains of not feeling as well as usual; vomits after eating.
" 31 Refuses medicine; says "it makes him sick to his Stomach". Jan 31/94. During past two
weeks, he has been sleeping, on the average, 7 hours nightly. Is always complaining of bowels.

Feb 2 Feb 2/94. Wt 121½ pds. Is still confined to his bed. Feb 4/94. Appetite not very good; bowels have
" 11 a tendency to constipation. Raises a great deal of phlegm, at times. Feb 11/94. Is quite
" 18 frequently complaining of his stomach & bowels. Feb 18/94. Says "he thinks he is going to die
" 24 before a great while". Feb 24/94. Is quite weak. Talks fairly rationally. Says "he has worked
" 28 very hard, during his life". Feb 28/94. Bowels seem persistently constipated. Has been given
enemata regularly. Eats some better of late. Lies in bed steadily. Has slept fairly well, during
the month; on the average 6½ hours, nightly. —

(carried to 276)



1893

Was received here at the hands o[illegible]
There is no history of consanguinity [illegible]
never been in Hospital. Attack, ca[illegible]
incuations & melancholy. Disease de[illegible]
irregular periods. Derangement now [illegible] ...colia. Patient
is not disposed to injure others; has a[illegible] ...; propensity now active.
Is not particularly filthy or destructive [illegible] ...previously manifested, so far as
known. No history of intemperance given; [illegible] ...disease injuring the head. He has not been
restrained or confined. Supposed cause [illegible] ...disease is cerebral degeneration. Has received very
little medical treatment, except for occasional functional derangements. On personal exam^n
patient shows passive indifference. He answered questions readily; said "he had cut his throat,
because he had passed his bowels in his clothes, (which was not true)". He sat in a stupid & indifferent
way. Appearance & manner was that of a man suffering from partial dementia & melancholia.
There is also noticed some general paresis, especially affecting some of the muscles of the arms
and face. ——

Dec 6 Dec 6/93. On admission, is in poor condition. Wasputon 6^t. (S.R. Complexion light; hair gray; Eyes
blue; Condition of skin good. Has a cut on throat; thumbs deformed. Bodily condition clean; is well
- behaved. Has rheumatism). Pulse 84. R 22. This cut is on throat under the Chin; about 2 inches long.
" 7 had been recently sewed up; no other injuries noted. Dec 7/93. Was quiet and slept 8 hours, last night.
AM. Pulse 74. R 18. Appetite fair; bowels free. No cough observed. Is quiet & well - behaved. Talks little, but
" 8 answers questions promptly & sensibly. "Is sorry he cut his throat". No delusions or hallucinations noted.
No complaints or injuries to report further. Dec 8/93. Again rested and slept well, last night. AM. Pulse 76. R 18.
" 9 Appetite fair; had a slight passage of the bowels last night; bowels, however, are somewhat costive. Has a slight cold.
Dec 9/93. Slept 8 hours, last night. AM. Pulse 76. R 20. Appetite poor; bowels constipated. He has a slight cold &
" 10 complains of being cold & unable to sit up. Was put to bed. Continues quiet & well - behaved. Talks little, but
" 11 answers correctly. Dec 10/93. Rested & slept well, last night. AM. Pulse 70. Appetite poor; ate but little at
breakfast this morning. Bowels free. Quiet & remains in bed. Dec 11/93. Again slept well, last night.
" 12 AM. Pulse 70. Appetite still poor: ate some breakfast. Bowels are free. He has no cough but a slight
hoarseness. Is quiet but querulous; talks despondingly of his condition. Dec 12/93. AM. Pulse 76. Appetite
" 13 still poor; bowels constipated. Is well - behaved, but feverish; talks a little, but in a rambling manner.
Is under the delusion that some one wishes to hurt him. Dec 13/93. AM. Pulse 70. Eats now a little at every
" 14 meal. But bowels are still badly constipated. Complains that food does him no good, as he has no discharge.
Well - behaved - Talks in a rather childish manner. Dec 14/93. AM. Pulse 70. Appetite fair. Bowels constipated.
" 15 quiet but generally despondent. Dec 15/93. AM. Pulse 74. Was given pill last night & eats this morning. Fears he
" 16 will require to have an injection. Dec 16/93. AM. Pulse 86. Bowels free, today. Appetite is improving. Lies quietly
in bed. Talks quite rationally. Is very depressed in spirits. Always wanting something, but does not seem to know
" 17 exactly what it is. Dec 17/93. AM. Pulse 92. Takes a little food at every meal. Bowels are now free. Talks
" 18 feverishly, & in a very melancholy way, about his health. Dec 18/93. AM. Pulse 86. Appetite rather poor. Bowels are
fairly free, (though he had no passage yesterday). Talks in a childish, weak - minded way. Complains about
" 19 his health generally, though he makes no specific complaint. Dec 19/93. AM. Pulse 84. Bowels again free.

1893

" 20 Dec 20/93. Patient has, since last noted, continued to rest & sleep well, at night; uniformly 9 hours
a each. Has been confined to his bed since the 9^th inst & has remained there quietly ever since.
Appetite has continued quite poor. Patient is well - behaved. Talks coherently but in a very
despondent manner, in regard to his health & condition. Is feverish, weak minded & childish
in his ways. Complains, today of a pain in his hip. Bowels are quite badly constipated. —
" 21 Dec 21/93. Appetite poor. Bowels quite costive. Habits clean. Patient is well - behaved. Talks quite
" 23 rationally. Claims he is sorry for what he has done; (Cutting his throat). Dec 23/93 Seems
to be failing some. Says "he wants to die". Is still confined to his bed. Eats fairly well, now.
" 28 Dec 28/93. Dr. A. today, made an examination; the following noted; "find a stricture of the rectum
1½ to 2^in above the anus; cannot reach the upper limits of the stricture. The rectum is dilated
below the stricture. Could not determine whether the stricture was malignant or not. His bowels
have been obstinately constipated. Attendant (Nixon) reports that, in given an enema, some blood
came away. (This enema was given with an ordinary piston syringe, holding 8 oz). ——
" 29 An injection of Castor oil & was given patient this morning. Dec 29/93. Patient was
given an enema, of soap & water, with a Bulb Syringe, this morning. He is subsequently reported
" 31 of having passed about a pint of hard matter during the afternoon. Dec 31/93. Patient
continues about as above described. Complains of feeling sick & weak, tho' appetite quite good.
Is still confined to his bed. ——

1894
Jan 1 Jan 1/94. Was at 1 P^m today, transferred to C^2 ("the Sick-ward"). Appears (as noted by the
Attd^t in C^2) very weak; coughs & raises phlegm; says "he has to vomit up everything he eats";
" 2 also "that his bowels are costive". Is kept in bed. Jan 2/94. Wt (in underclothes) 118 pounds.
(Has been markedly & rapidly losing in flesh, since coming). Still complains of bowels being
constipated. Again given laxatives. Said "these made him sick at his stomach". ——
" 3/4 Jan 3/94. Bowels have moved. Jan 4/94. Is coughing a good deal, today, & raising large quan-
" 5 tities of phlegm of a light color. Jan 5/94. Again coughing & raising phlegm. Appetite fairly good.
" 6/7 Bowels again constipated. Jan 6/94. Gave enema; bowels moved but little. Jan 7/94. Bowels
" 8/9 have moved. Jan 8/94. Appetite is improving. Jan 10/94. Bowels have moved freely. ——
" 11 Jan 11/94. Complaining, all the time, of his bowels. Appetite fairly good. Says "he wants to die".
" 12/13/15 Jan 12/94. Given Laxatives. Jan 13/94. Bowels have moved. Jan 15/94. Has slept, nightly,
since 1^st inst, in the average of 6 hours. Appears to be getting somewhat stronger (See Record
" 26 of Pulses attached). Jan 26/94. Complains of not feeling as well as usual; vomits after eating.
" 31 Refuses medicine; says "it makes him sick to his stomach". Jan 31/94. During past two
weeks, he has been sleeping, in the average, 7 hours nightly. Is always complaining of bowels.
Feb 2/4 Feb 2/94. Wt 121½ pds. Is still confined to his bed. Feb 4/94. Appetite not very good; bowels have
" 11 a tendency to constipation. Raises a great deal of phlegm, at times. Feb 11/94. Is quite
" 18 frequently complaining of his stomach & bowels. Feb 18/94. Says "he thinks he is going to die
" 24 before a great while". Feb 24/94. Is quite weak. Talks fairly rationally. Says "he has worked
" 28 very hard, during his life". Feb 28/94. Bowels seem persistently constipated. Has been given
enemata regularly. Eats some better of late. Lies in bed steadily. Has slept fairly well, during
the month; in the average 6½ hours, nightly. —

(carried to 276)

Personal and Medical History of Peter Rondo (Rondeau)

SHIRLEY, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3587.
Residence, White-Bear Lake, Minn
Date Admission, 7th December 1893.
Admitted by, Dr Kilbourne Hour, 1.30 P.M.
How Sent, Malcolm Kennedy, Jo. Co. Wabasha Co.
Sex, male
Age, 25 - (?)
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Farmer
Degree Education, not known
Profession Religion, not a church member
Habits, intemperate probably
Nativity, Minnesota (Father's, Minnesota; mothers, not known)
Physicians Committing, J. A. Low and J. B. Cole
Correspondents, Frank Rondeau, White Bear Lake, Minn.

No. for Year, 157.
Insane Relatives, none known
Cause Exciting, probably self-abuse
Cause Predisposing, " previous attack
Form, chronic mania
Accompanying Bodily Disorder, syphilis (?)
Suicidal or Not, not
Date of this Attack, probably continuous from last June
Duration, about 6 months.
No. of Attack, 1st; probably Continuous
No. of Admissions, 2nd
Age First Attack, 25 (?)
Time of Leaving, June 29. 1894
Time in Hospital, 3 yr. 6 mo. 22 d.
Result, Transferred to Fergus Falls

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog Dec 9/93.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, } Impaired -
Recent Events, }
Special Subjects,

PERCEPTIVITY:
Alert or Dull, very dulled
Correct or Illusive, Incorrect

REASONING POWER:
Ordinary Subjects,
Own Mental State, Cannot tell why he is here; Needs by defective.
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Says "was made to be Christ & did some things he could not help doing & was put in Jail for it" — Denies any Drink habit — Says he has seen his Brother up on the board, but his Brother did not know him"?

EMOTIONAL STATE:
Normal, Calm, yes & inclined
Indifferent, yes
Exalted,
Depressed,

DELUSIONS:
Systematized ~~or Not~~, of wealth; has money all over the room
Special Subjects, } $3000.000 also 14 horses he owns.
Transitory or Not, }

HALLUCINATIONS: ~~none~~ (?)
ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, very incoherent
Voluble or Reticent, reticent

Personal and Medical History of Peter Rondo (Rondeau)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8½in WEIGHT, 165 pds. NUTRITION, seems good, but circulation is not very good; ends of fingers cold
WOUNDS OR ABNORMALITIES, None - (see S.R. next page)
TONGUE, Tremors, some marked Coatings, Yes; slight gray in middle Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes; somewhat slow Accommodation, Yes; normal.
SIGHT, Good
HEARING, Good
COORDINATION, Arms, } quite good; fingers to nose, eyes shut, seems good.
Legs, }

Case No.3587. Peter Rondo. Vol. 25.

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, some
FACIAL EXPRESSION, somewhat blank —
SENSIBILITY, —
HEART, normal, except slight roughness of 1st sound at apex.
LUNGS, seems good
EXAM. URINE.

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

HISTORICAL.

LENGTH OF INVASION, Continuous probably ONSET GRADUAL OR SUDDEN, —
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, } Cannot get any information at this
Father or Pat. Relations, } point —
Brothers or Sisters,

Personal and Medical History of Peter Rondo (Rondeau)

GIBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3587.

Residence, White-Bear Lake, Minn

Date Admission, 7th December 1893.

Admitted by, Dr Kilbourne Hour, 1.30 P.M.

How Sent, Malcolm Kennedy, Sh't, Wabasha Co.

Sex, Male

Age, 25 - (?)

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Farmer

Degree Education, Not known

Profession Religion, Not a church member

Habits, Intemperate (probably)

Nativity, Minnesota Father's, Minnesota; Mother's

Physicians Committing, J. A. Low and J. B. Cole

Correspondents, Frank Rondeau, White Bear Lake, Minn.

No. for Year, 157.

Insane Relatives, None known

Cause Exciting, probably self-abuse

Cause Predisposing, " previous attack

Form, chronic mania

Accompanying Bodily Disorder, Syphilis (?)

Suicidal or Not, Not

Date of this Attack, (probably continuous from last June

Duration, about 6 months.

No. of Attack, 1st; probably, Continuous

EXAMINATION ON ADMISSION.

Exd by Dr Herzog Dec 9th 3.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, somewhat sluggish

MEMORY:

Past Events, } Impaired.

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, very dull

Correct or Illusive, Incorrect

REASONING POWER:

Ordinary Subjects,

Own Mental State, Cannot tell why he is here, decidedly defective.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Says: was made to be Christ & did some things he could not help doing & was put in Jail first." — Denies any drink habit. — Says he has seen his brother up on the board, but his brother did not know him"?

EMOTIONAL STATE:

Normal, Calm, yes & inclines

Indifferent, yes

Exalted,

Depressed,

DELUSIONS:

Systematized ~~or Not~~, } of wealth; has money all over the world

Special Subjects, } $3,000,000 also 14 horses he owns.

Transitory or Not, }

HALLUCINATIONS: ~~None~~ (?)

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, very incoherent

Voluble or Reticent, reticent

Personal and Medical History of Peter Rondo (Rondeau)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8½in WEIGHT, 165 lbs. NUTRITION, Seems good, but emaciation is noticed; good; ends of fingers cold

WOUNDS OR ABNORMALITIES, None - (see S.R. next page)

TONGUE, Tremors, Some, marked Coatings, Yes; slight gray, in middle Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal Largest, not marked

Response Light, Yes; somewhat slow Accommodation, Yes; normal.

SIGHT, Good

HEARING, Good

COORDINATION, Arms, } quite good; fingers to nose, eyes shut, seems good.

Legs, } standing, eyes shut, quite steady —

TREMORS, Hands, None Tongue, Some, marked.

Facial Muscles, None General, None

REFLEXES, Patellar, equal — about 9 - (Dr P's Scale) -

Other Reflexes, no ankle clonus

ARTICULATION, Hesitating, seems good Slurred,

FACIAL EXPRESSION, somewhat blank —

SENSIBILITY, —

HEART, normal, except slight roughness of 1st sound at apex.

LUNGS, seems good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Kept Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Continuous probably ONSET GRADUAL OR SUDDEN, —

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") } Cannot get any information

Mother or Mat. Relations, } on this point —

Father or Pat. Relations, }

Brothers or Sisters,

LUELST, TIDLAN & CHAMBERS, DAVENPORT, IOWA

1893 Was received here at the hands of Sheriff's deputy P.L. Wennerskirch, attended by Homer Stauff, with the following history. "Not known as to consanguinity or heredity. This is probably 1st attack (continuous); says he was at St. Peter (?) insane hospital six months ago & ran away from there. Disease seems to be increasing; his symptoms vary; sometimes, he is quite rational; at others, he is very hard to control. Derangement now shown as no particular subject. Inclined to be ugly at times. Is filthy & destructive. Is not, however, suicidal. Patient is probably intemperate. Has confined in Hospital at St. Peter, six months (2.2) Cannot find out cause of disease, but think self-abuse. Not known if he has been under medical treatment. On personal examination, appears well nourished, but inclined to be filthy & ugly. He would not talk much; seems very much depressed; cannot rely upon what he says. Was calm; would not talk unless asked questions.

Dec 7 Dec 7/93. On admission, is in good condition. Was put on B's. Note. Records show that patient was here before in the short period of 10 days (June 15th - 25th - 1893), at which latter date he escaped. During his then stay he was very reticent; inclined to be stubborn. Full of queer ways and queer ideas. Evidently a "Defective", who had been made worse by circumstances. (see Vol 23. Page 77. No. 3379).- (S.R. Complexion dark; hair black; eyes brown; condition of skin good; has a mole between the shoulders and one on left side; bruises on forehead. Bodily condition dirty. Behavior good). Pulse 118. R. 16. Te. 100-8. Appetite poor. Bowels seem regular. No cough noticed. Shortly after coming upon ward was restless, inclined to be ugly & contrary.

" 8 Dec 8/93. Slept well (9 hours) last night. A.M. Pulse 92. (Refused to have his temperature taken). Was very

" 9 stubborn & ugly. Threatened to strike the attendant who took his pulse. Dec 9/93. Probably slept

" 10 fairly well, last night. A.M. Pulse 90. Dec 10/93. Was restless a couple of hours, but slept 7 hours,

" 11 last night. A.M. Pulse 120. Dec 11/93. Was very restless the greater part of last night & slept but 3 hours or so.

A.M. Pulse 96. Remained in bed this morning; did not eat any breakfast. Complains of a bad cold. P.M.

" 12 Has been in bed all day. Dec 12/93. Was restless for 3 hours; slept 6 hours, last night. A.M. Pulse 120.

Did not partake of any food, all day yesterday. At breakfast this morning. Says he is somewhat better.

" 13 Refuses medicine. P.M. Is again up & around. Dec 13/93. Slept 6 hours, restless 3 hours or so, last night.

" 20 A.M. Pulse 96. Appetite now good. Bowels regular. Dec 20/93. Patient continues, nightly, more or less restless, sleeping only from 5 to 6 hours. Pulse has, within the past few days, become about normal. Appetite good; bowels regular. Is at times, very contrary; will not wear any underclothes & will not keep his clothing in shape. Inclined to be ugly; refuses his medicine. The last day or so, he has had a bad cold & has coughed some. Though he has brightened up some since coming, yet he is still quite

" 21 odd & stubborn. He seems quite intelligent, but unwilling to converse. Dec 21/93. Slept 9 hours,

" 22 during the night; pulse 96. Dec 22/93. Again, rested & slept well, last night. A.M. Pulse 80.

" 23/24/25/26 Dec 23/93. A.M. Pulse 90. Dec 24/93. A.M. Pulse 76. Dec 25/93. A.M. Pulse 120. Dec 26/93 A.M. P. 90.

" 31 Dec 31/93. Appetite not very good, and, at times, does not eat anything. Bowels apparently are regular. Patient appears to be dull & stupid; hardly ever speaking to any one. Is not very tidy about his clothing; occasionally, wets his bed, at night. Physical health is good.

1894 Jan 2/15 Jan 2/94. Wt 154 pds. Pulse 72. Jan 15/94. Apparently rests & sleeps well, at night. Appetite fairly good. Bowels seem regular. Continues quite dull & stupid & at times, is

1894 Jan 15 (cont'd) inclined to be "cranky" & even ugly. Rather untidy about his dress. Habits are clean. —

" 31 Jan 31/94. No material Change in patients' condition. Habits are occasionally dirty. Health good.

Feb 1/30 Feb 1/94. Wt 163½ pds. Pulse 88. Feb 20/94. Was quarrelsome & ugly, while in dining room today and was

" 27 fighting with some of the other patients. Attendant (Justice) tried to quiet him when this patient struck him on the head. Some of the other patients interfered and there was considerable trouble made. Feb 27/94. Continues about as recently described in above notes. —

Feb 27/94. Patient had been committed here under the "law of 1892" recently declared unconstitutional. He was today Taken out and Returned under "new Commitment papers" from Wabasha County.

Mar 1/ March 1/94. Wt 165 pds. Pulse 72. Mar 7/94. Engaged in a fight with a fellow patient (James

" 15 Coughlin) today and received quite severe bruises in the face. Mar 15/94. Continues more or less troublesome, and ugly, at times, fighting with the other patients & occasionally attacks the attendants. Is subject, occasionally, to a "spell", when he appears dull & stupid & does not speak to any one; will then also sit in one place & will not move unless made to do so. Talks a good deal about going away; has to be closely watched as he is always trying the doors and looking for an opportunity to escape. Is untidy about his clothing. Habits inclined to be filthy. Does no work. There is no improvement noticed in his condition. —

" 31 March 31/94. Does not seem to change, in any degree. Is untidy in dress; habits filthy.

Apr 2/ April 2/94. Wt 160 pds. (some slight loss); Pulse 120. April 25/94. Started to run away, today

" 25 when out walking; got some distance but was finally overtaken & brought back. April 28/94. Today,

while out walking, had a fight with a fellow patient (A. Tait); no injuries done to either of them.

" 30 April 30/94. Keeps about the same, from month to month, and as about described in Mar 15th note above. Always requires very close watching. Is a very mean disposition, quarrelsome &c.

May 1/31 May 1/94. Wt 154 pds. Pulse 80. May 31/94. As a rule, seems to eat & sleep well, at night. Behavior is dull & very stupid, at times; at other times, he will be quite active; is also inclined to be stubborn & contrary; habits, at times, are dirty & he is untidy about his clothing. (Was one day dirty during Month). Has not been to quarrelsome of late. Still requires close watching.

June 1/ June 1/94. Wt 154 pds. Pulse 78. June 25/94. Slept only 4 hours; restless 5 hours, last night.

" 25/30 June 26/94. Restless & noisy 5 hours; sleeping but 4 hours, last night. June 30/94. No special change.

July 1/31 July 1/94. Noisy restless & how, slept only 2 hours, during night. July 2/94. Wt. 143 pds. Pulse 96.

" 31 July 31/94. General notes as this patients' condition for past few months still hold good, at this date.

Aug 1/ Aug 1/94. Wt 155 pds. P 60. Aug 20/94. Kicked, without any provocation (Chas Bloomquist +?) a fellow

" 31 patient, while out walking today, leaving a mark on him. Aug 31/94. Does not seem to improve. Is occasionally ugly & will fight; also noisy. Does not appear to have much mental power. Habit, filthy & occasionally dirty. Is idle & indolent. Does not keep with the work.

Sept 3/ Sept 3/94. Wt 155 pds. P 90. Sept 30/94. No change noted. Continues behavior & disposition, as usual.

Oct 1/6 Oct 1/94. Wt 154 " " 82. Oct 6/94. Was very ugly & vicious this morning. Attacked attendant Jessup & struck at him. Attendant Nelson came to Jessup's assistance & they were able in time to get patient under control. Oct 11/94. Attempted with another patient (Sam Olson) to run away, today. They were caught & brought back. Oct 31/94. No change or important notes.

Nov 1 Dec 1 Nov 1/94. Wt 158 pds. Pulse 80. Dec 1/94. Wt 155 pounds. Pulse 84. —

(Carried to 220)

Personal and Medical History of Edward Johnson #2

EBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3588.
Residence, Minneapolis.
Date Admission, 8th December 1893.
Admitted by, Dr. Phelps Hour, 7 PM
How Sent, John A. Steele, Jas O. Kennedy
Sex, Male
Age, 41
Civil Condition, married
Children, 1 (Girl).
Age Youngest Child,
Occupation, Laborer
Degree Education, Limited reading writing.
Profession Religion, Lutheran
Habits, not stated.
Nativity, Sweden; (parents also born there).
Physicians Committing, Chas G. Weston & H. A. Jones.
Correspondents, (friend) Alfred Andersen
405 - 9th St. SE.

Year, 158
Relatives, none so far as known
Exciting, Unknown
Predisposing, previous attack probably
, chronic melancholia
Accompanying Bodily Disorder, see history papers.
Suicidal or Not, not.
Date of this Attack, some months ago
Duration, some months.
No. of Attack, 1st, so far as known; (this has been in Asylum in Sweden).
No. of Admissions, 1st here
Age First Attack, (?)
Time of Leaving, 16th June 1895
Time in Hospital, 1 year: 6 mos: 8 Ds.
Result, Dispd. Nov 6/95 - Improved.

EXAMINATION ON ADMISSION.

Exd by Drs Herzog & Ely Dec 11/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, somewhat confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, good
Recent Events, seems to be good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, probably Correct
REASONING POWER:
Ordinary Subjects, quite fair
Own Mental State, says he is not right - not sure
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Yes; markedly
DELUSIONS:
Systematized or Not, none noted
Special Subjects,
Transitory or Not,
HALLUCINATIONS: ?
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, answers questions fairly freely.

GENERAL DESCRIPTIVE REMARKS:
Patient cannot talk English. Examination conducted through an Interpreter (Attst Swissa). Says he has been sickly nearly all his life. Has not been in Asylum in Sweden, he states. Has 4 children, matters a good deal to him, about his poverty; leaving wife & children in old Country &c.

Personal and Medical History of Edward Johnson #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in WEIGHT, 146 pds NUTRITION, only fair
WOUNDS OR ABNORMALITIES, None.
TONGUE, Tremors, Some Coatings, No: pale, tooth marked Promptness Movement, prompt X
PUPILS, Equality, Equal Size, normal
Response Light, Excessively Mobile Accommodation, Abnormally rapid.
SIGHT
HEARING

Case No. 3588. Edward Johnson #2 Vol. 25.

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

Fairly accurate. Answers quite steady.

REFLEXES, Patellar, Equal - about 7 - Dr P's scale.
Other Reflexes,
ARTICULATION, Hesitating, somewhat Slurred, not
FACIAL EXPRESSION, Sad.
SENSIBILITY,
HEART, Some roughness of 2d sound, at the Apex.
LUNGS,
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Previous attacks.
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") — no history of any heredity
Mother or Mat. Relations, — obtained
Father or Pat. Relations, — Xmas of con-
Brothers or Sisters, — sanguinity.

Personal and Medical History of Edward Johnson #2



Whole No. 3588.

Residence, Minneapolis.

Date Admission, 8th December 1893.

Admitted by, Dr Phelps Hour, 7 PM

How Sent, John A Steele, Jas P. Kennedy

Sex, Male

Age, 41

Civil Condition, married

Children, 1 (Girl).

Age Youngest Child,

Occupation, Laborer

Degree Education, Limited reading writi

Profession Religion, Lutheran

Habits, not stated.

Nativity, Sweden; Parents also born there

Physicians Committing, Chas G Weeton and W A Jones.

Correspondents (Friend) Alfred Anderson
405 - 9th St. SE.

for Year, 158.

ne Relatives, none so far as known

e Exciting, unknown

e Predisposing, previous attack probably

n, chronic melancholia

ccompanying Bodily Disorder, see history papers.

Suicidal or Not, not.

Date of this Attack, some months ago

Duration

Admitted, Minn. Nov 6/93 - Observed.

EXAMINATION ON ADMISSION.

Exd by Drs Herzog & Eby Dec 11/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, somewhat confused

Quick or Sluggish, sluggish

MEMORY:

Past Events, good

Recent Events, seems to be good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, dull

Correct or Illusive, probably correct

REASONING POWER:

Ordinary Subjects, quite fair

Own Mental State, says he is not right - not sure

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, yes; markedly

DELUSIONS:

Systematized or Not, none noted

Special Subjects,

Transitory or Not,

HALLUCINATIONS: ?

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, coherent

Voluble or Reticent, answers questions fairly freely.

GENERAL DESCRIPTIVE REMARKS:

Patient cannot talk English. Examination conducted through an Interpreter (Attorney Swiren). Says he has been sickly nearly all his life. Has not been in Asylum in Sweden, he states. Attributes, matters a good deal to Church, about his poverty; leaving wife & children in old Country &c.

Personal and Medical History of Edward Johnson #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in WEIGHT, 146 pds NUTRITION, only fair

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, some Coatings, No: pale, toothmarked Promptness Movement, prompt X

PUPILS, Equality, Equal Size, normal

Response Light, Excessively mobile Accommodation, Abnormally rapid.

SIGHT, Good

HEARING, Seems normal

COORDINATION, Arms, Quite good: finger to nose, Eyes shut, fairly accurate. Standing Legs, 5 foot, does well. Standing, Eyes shut, quite steady.

TREMORS, Hands, none Tongue, some

Facial Muscles, none General, none

REFLEXES, Patellar, Equal - about 7 - Dr F scale.

Other Reflexes,

ARTICULATION, Hesitating, somewhat Slurred, not

FACIAL EXPRESSION, Sad.

SENSIBILITY,

HEART, Some roughness of 2d sound, at the Apex.

LUNGS,

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Records kept Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, previous attacks.

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") no history of any heredity obtained for consanguinity.

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Edward Johnson #2

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy-Sheriff Adolph Peterson, with the following history. No history of consanguinity; and none of heredity, so far as known. This, so far as known, is 1st attack; probably continuous, as it is found that he was in an Asylum in Sweden, a few months. He has also been in the City Hospital, Minneapolis; negative results from treatment there. First symptoms of this attack were manifested some months ago in Sweden, by depression & delusions of poverty. Disease seems increasing; he is, at times, rational, but is always depressed. Derangement was shown by Constant depression; muttering; rubbing back of head; think he has done wrong. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. Nothing stated as to any history of intemperance. (Question 19 (as to any severe diseases etc) is answered merely by "patient + his father" – no mention being made of nature of disease, whether epilepsy, convulsions etc). The cause of the disease is unknown. Has had no medical treatment, except in an expectant way. On personal examination, the patient kept up a muttering; was depressed + talked of his wrong doing. Walked about also in a very depressed way. Appearance also depressed. This almost impossible to get any reliable history from him. Remembers old events, ladies, otherwise, stupid.

1893
Dec 8 Dec 8/93. On admission, was put on B3 { SR. Complexion fair; hair brown; Eyes blue; condition of skin good; has a mole on left shoulder; some pimples on back. Bodily Condition clean; is well-behaved. Dec 9/93. Was somewhat restless for a couple of hours, but slept 7 hours, last night. AM. Pulse 104 R 16. T. 98.6. Appetite is fairly good. Complains some of being sick. Restless, walking the floor + talking to himself a good deal of the time. Seems to talk quite sensibly (when addressed). Dec 10/93. Probably slept fairly well, last night. Am. P 88
" 9
" 10 T. 98.6. Appetite good. Bowels moved. Dec 11/93. Was restless for 3 hours, but slept 6 hours, last night. AM. P 92
" 11
" 12/13 T. 99. Dec 12/93. Was mad restful + slept 8 hours, last night. AM. Pulse 96. T. 98.6). Dec 13/93. Restless for 2 hours
" 14 or so, but slept 7 hours, last night. Appetite Continues good; bowels regular. Dec 14/93. Slept fairly well (8 hours) last night, though somewhat restless. AM. Pulse 120. T. 99. Is somewhat restless also today; hardly ever sitting down. Dec 15/93. Slept 7 hours, last night. AM. Pulse 80. T. 99.2. Appetite good; bowels regular.
" 15
" 16 Dec 16/93. AM. Pulse 120 T. 99.2; Dec 17/93. AM. Pulse 104 T. 99.2. Dec 18/93. AM. Pulse 100. T. 99.8
" 17/18
" 19/20/21 Dec 19/93. AM. " 72 " 99. Dec 20/93 AM. " 104 " 99. Dec 21/93. AM. " 90 " 98.8
" 22 Dec 22/93. AM. " 76 " 100. During past week, patient has been quiet restful, sleeping, almost uniformly, 8 hours each night. Conduct + behavior by day, does not change much, if any.
" 23 Appetite has continued good + bowels regular. Habits are clean. Dec 23/93. AM. Pulse 110 T. 99.
" 24/25 Dec 24/93. AM. Pulse 72 T. 100. Dec 25/93. AM. Pulse 76. T. 98.6. Dec 26/93 AM. " 90 T. 98.8.
" 28/29 Dec 28/93. AM " 96 T. 99. Dec 29/93. AM " 98 T. 98.8. Appetite good. Bowels regular.
" 31 Dec 31/93. Patient is always talking but in a very low tone + it is difficult to understand him. Talks about going home. Does not work any. Habits are clean.

1894
Jan 1/2 Jan 2/94. Wt 140 pds. (has lost some in flesh, since coming). Pulse 104. Jan 15/94. Appetite
" 31 good; bowels regular. Nearly all the time, is talking to himself. Habits clean. Jan 29/94. No very noticeable change. Is incoherent in speech. No delusions noted. Habits are clean. Does no work.
Feb 1/2 Feb 1/94. Wt 134 pds. (has lost some in weight). Pulse 72. Feb 22/94. Appetite good; bowels apparently regular. Is well-behaved. Nearly always lying upon the benches, sleeping; when awake is continually talking to himself. Appears somewhat feeble-minded. Does no work. Habits are clean
" 24 Feb 24/94. This patient was committed here under "Laws of 1893" recently declared unconstitutional.

Personal and Medical History of Edward Johnson #2

1894
Feb 24 Feb 24/94. He was today, Taken out and Returned under "new Warrant" from
" 28 Olmsted County. Feb 28/94. Continues about the same. " "
Mar 1/15 March/94. Wt 138 pds; (a slight gain in flesh). Pulse 81. March 15/94. No change to note.
" 31 March 31/94. Appetite good; bowels regular, talks rationally; has a very depressed feeling + manner; says "he would like to go back to the old Country". Physically, is weak. Habits clean. Does no work. —
April 2/30 April 2/94. Wt 141 pounds. Pulse 74. April 30/94. No noticeable change in his condition.
May 1/31 May 1/94. Wt 147 pds. Pulse 108. May 31/94. Is still restless + uneasy; wanting to go away; is always walking the hall, talking to himself. Appears somewhat depressed. Habits clean. Does no work.
June 2/30 June 2/94. Wt 142 pds. Pulse 8. June 30/94. No change to note in either his mental or physical condition. —
July 1/30 July 2/94 Wt 146 " " 72. July 16/94. Has continued about as above described. Was today,
" 31 transferred to the Annex. July 31/94. General note above. Still held good, to date. —
Aug 31 During these 3 months, there is little or no change noted. Is quiet + inoffensive. Talks a good
Sept 30 deal + quite rationally. Seems melancholy + despondent; cries, at times, over letters from home.
Oct 31 Did no work for some time, but, of late, has been working in Annex kitchen. Habits clean. Health good.
Nov 30 During this period, no special change noticeable. He is quiet; works in Annex kitchen. Worries about home
Dec 31 Continually; very despondent. Speech quite rational. Habits clean. Dress neat. Health apparently good.
Jan 31 '95
Feb 1 During this Quarter there has been seemingly, no change whatever to note. He still works in Annex
to Kitchen. Of late, has received a few letters from home; at such times, he is made demented + seems quite stupid.
Apr 30
May 31 May 31/95. Is quiet, stupid + melancholy. Talks to himself at times. Works in Annex kitchen, daily.
June 10 Habits clean. Dress neat. Health apparently good. June 10/95. Is about as usual.
" 16 June 16/95. Was allowed to go out on trial, with a farmer, today.

Discharged

Personal and Medical History of John Olson #3

ROBERT, PUGLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3589.
Residence, Litchfield; (Legal Settlement, Robbinsdale, Minn.)
Date Admission, 9th December 1893.
Admitted by, D. Phelps Hour, 7 PM
How Sent, John A. Steele, Jof P., Hennepin County
Sex, Male
Age, 20 years
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, Common School
Profession Religion, Methodist
Habits, not definitely stated
Nativity, St Peter (Parents born in Sweden).
Physicians Committing, R.P. O'Brien and J.M. Lewis
Correspondents, (Father) John Olson, Litchfield, Minn.

No. for Year, 159
Insane Relatives, not known (father intemperate)
Cause Exciting, unknown
Cause Predisposing, unknown
Form, stuporous melancholia
Accompanying Bodily Disorder, none mentioned in history
Suicidal or Not, not
Date of this Attack, probably recent
Duration, probably short
No. of Attack, not stated
No. of Admissions, 1st
Age First Attack, not given
Time of Leaving, Apr. 8' 95
Time in Hospital, 1 y, 3 m, 29 d.
Result, Imp.

(See page 364) note Pat. to Fergus Falls

EXAMINATION ON ADMISSION.

Exd by Dr Phelps, Dec 11th/93.
Dr Young + Dr Spratt present.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, } Seems fair
Recent Events, }
Special Subjects, }

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

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

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

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

HALLUCINATIONS: ✓

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, fairly free in answer questions

GENERAL DESCRIPTIVE REMARKS:
Complains of having had headache for some time; but cannot state positively for how long. He admits actions stated in history papers. Seems now to think they were not right. At date of this examination, patient has improved a good deal since his coming.

Personal and Medical History of John Olson #3

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5½ in. WEIGHT, 148½ pd. NUTRITION, fairly good; circulation somewhat impaired
WOUNDS OR ABNORMALITIES, Some scars on head.
TONGUE, Tremors, Some Coatings, ✓ Promptness Movement, Sluggish, slightly.
PUPILS, Equality, slightly unequal; right larger Size, ✓
Response Light, ready Accommodation, about normal.
SIGHT, Fairly good
HEARING, fairly good
COORDINATION, Arms, }

Case No. 3589 John Olson #3 Vol. 25.

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, Yes Slurred,
FACIAL EXPRESSION, Dull + melancholy
SENSIBILITY,
HEART, Sounds are fair
LUNGS, Sounds good, so far as noted.
EXAM. URINE. Sp. gr. 1064; cloudy from excess of phosphates; acid reaction; no albumen; no sugar.
May/94 Asstt

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal, Records kept	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,

PULSE, 40, at time for examination; having just walked up ~~stairs~~
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, See history ONSET GRADUAL OR SUDDEN, — —
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living — nervous — "out of her head" once in a while.
Father or Pat. Relations, Father living — claims healthy. Possibly some heredity
Brothers or Sisters,

Personal and Medical History of John Olson #3

HERBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3589.
Residence, Litchfield: (legal settlement, Robbinsdale, Minn.)
Date Admission, 9th December 1893.
Admitted by, D. Phelps Hour, 7 PM
How Sent, John H. Steele, Jail, Hennepin County
Sex, Male
Age, 20 years
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Laborer
Degree Education, Common School
Profession Religion, Methodist
Habits, not definitely stated
Nativity, St Peter (Parents born in Sweden).
Physicians Committing, R P O'Brien and J M Lewis
Correspondents, John Olson, Litchfield, Minn (Father)

No. for Year, 157.
Insane Relatives, not known (father intemperate)
Cause Exciting, unknown
Cause Predisposing, unknown
Form, stuporous melancholia
Accompanying Bodily Disorder, none mentioned in history
Suicidal or Not, not
[illegible] this Attack, probably recent
[illegible] short
Time of Leaving,
Time in Hospital, 4, 3, -,
Result, Imp.

(See page 364) note Pat. to Fergus Falls

EXAMINATION ON ADMISSION.

Exd by D. Phelps, Dec 14/93.
Dr Young + the present.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, } Seems fair
Recent Events, }
Special Subjects, }

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

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

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

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

HALLUCINATIONS: ✓
ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, fairly free in answer questions

GENERAL DESCRIPTIVE REMARKS:
Complains of having had headaches for some time; but cannot state positively for how long. He admits actions stated in history papers. Seems now to think they were not right. At date of this examination, patient seemed a good deal nicer this morning.

Personal and Medical History of John Olson #3

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5½ in. WEIGHT, 148½ lbs. NUTRITION, fairly good; circulation somewhat impaired
WOUNDS OR ABNORMALITIES, some scars on head.
TONGUE, Tremors, some Coatings, ✓ Promptness Movement, sluggish, slightly.
PUPILS, Equality, slightly unequal; right larger Size, ✓
Response Light, ready Accommodation, about normal.
SIGHT, Fairly good
HEARING, fairly good
COORDINATION, Arms, } Fairly good, by usual tests.
Legs, }
TREMORS, Hands, normal Tongue, some
Facial Muscles, ✓ General, none noted
REFLEXES, Patellar, equal; about normal - 5 — D F's scale.
Other Reflexes,
ARTICULATION, Hesitating, Yes Slurred,
FACIAL EXPRESSION, Dull + melancholy
SENSIBILITY,
HEART, Sounds are fair
LUNGS, Sounds good, so far as noted.
EXAM. URINE. Sp. gr. 1016; cloudy from excess of phosphates; acid reaction; no albumen; no sugar.
May/94 Stott

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Records kept Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 40, at time of examination; having just walked up ~~stairs~~
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, See history ONSET GRADUAL OR SUDDEN, - -
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living — nervous — "out of her head" once in a while.
Father or Pat. Relations, Father living — claims healthy. Possibly some heredity
Brothers or Sisters,

Personal and Medical History of John Olson #3

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893

This patient was brought here, in due form, by a Sheriff's officer, with the following history. As to consanguinity or heredity, not known; father, however, was a drinker. As to number of attack not stated; this one is probably recent, occurring at home in Robbinsdale; appearing before women naked, and making wild & intemperate remarks. Disease seemed stationary (while at his home). He is, at times, rational; again, wholly unfit to be at large. Derangement is now shown, by indecent exposure; appearing naked before woman; making strange suggestions & talking wildly on different subjects. Patient is not disposed to injure others, nor suicidal; previously, showed peculiarities of habits. He has not been restrained & confined, nor under medical treatment. Supposed cause of disease is unknown. On personal examination, there are noticed, a dull, stupid condition; loss of memory; hesitancy in answering questions &c &c. He is unable to explain unnatural acts & to account for himself during past 3 days; inability to remember any act during past 3 days; cannot account for disappearance of moneys. Appearance and manner were despondent, stupid, depressed. —

Dec 9 — Dec 9/93. On admission, was put on B^d (S.R. Complexion light; hair brown; Eyes blue; Condition of skin good; has some scars on head; bodily condition clean; behavior good). Dec 10/93. Seemed much disturbed, and slept but 4 hours, last night. S.W. Pulse 90. R 16. Appetite fair; bowels regular. No cough noticed. Patient is well-behaved, but nervous & excited. Difficult to keep him in bed. Talks but little. Is under the

" 11 — delusion that he hears his brother calling for him. No complaints or injuries to note. Dec 11/93. Fairly restful, though sleeping only 6 hours, last night. S.W. Pulse 90. R 18. Continues well-behaved. Rather

" 12 — reticent, but responds to questions asked him readily. Dec 12/93. Probably slept well, last night. A.M.

" 13 — Pulse 54. R 22. About as usual, by day. Dec 13/93. Restful, sleeping 8 hours, last night. A.M. P 52. Appetite fair; bowels free. Well-behaved. Is restless & nervous today, constantly walking up & down the hall.

" 14 — Dec 14/93. Slept well (9 hours) last night. A.M. Pulse 56. Still very nervous and restless in the day-time.

" 15 — Dec 15/93. Again slept well, last night. Appetite good; bowels regular. Is not so nervous & restless, as yesterday.

" 16 — Pulse 50. Dec 16/93. Somewhat restless, though sleeping 7 hours, last night. S.W. Pulse 46. Quiet & well-behaved.

" 17 — Dec 17/93. S.W. Pulse 46. Is quiet & inoffensive. Talks but little; seems absent minded and half-asleep

" 18 — most of the time. Dec 18/93. S.W. Pulse 60. Talks in a somewhat confused manner. Is well-behaved.

" 19 — Dec 19/93. S.W. Pulse 56. Dec 20/93. S.W. Pulse 60. Dec 21/93. Of late, has seemed quite stupid & confused;

" 20/21 — taking no interest in what is going on around him. Today, however, seems to be brightening up a

" 22 — little. Humming tunes most part of the day; seems more cheerful. Pulse 72. Dec 22/93. Does not talk unless spoken to. Answers questions in a slow, hesitating manner, though he is not so dull

" 23 — or moody, as when admitted. Pulse, this A.M., 50. Dec 23/93. Sleep has been uniformly good, since last noted, (about 9 hours) each night. Appetite also good & bowels regular. No cough has been noticed. Patient has been well-behaved. Stupid; seems to take no interest in his surroundings; at times, does not appear to know his name, when called for. For the past 2 weeks, he has been uniformly dull. Does not seem to improve. Dec 31/93. No material change in his condition.

" 31 / 1894 Jan 1/94 — Jan 1/94. Wt 147 lbs. Pulse 78. Jan 15/94. Appetite poor; bowels regular. No cough noticed. Patient is getting weaker, daily. Doesn't appear to take any interest in what is passing around him & is in a state of stupor, almost all the time; lying asleep or huddled up in a heap in one of the seats, all day. Talks none at all. Habits are occasionally dirty & the saliva, which is, almost constantly, dripping

Personal and Medical History of John Olson #3

1894

Jan 15/94 Cont'd — from his mouth, falls on his clothes, soiling them. Jan 24/94. Patient was ordered to

" 31 — be put to bed today. Jan 31/94. Has been kept in bed since 24th inst, and has continued in the same comatose state. Eats fairly well, but has to be fed, by hand, mostly. Does not talk & is quite oblivious, apparently, to all his surroundings. (Was dirty 6 days, in the month).

Feb 1/94 — Feb 1/94. Wt 145 lbs. Pulse 76. Feb 17/94. Appetite has, during the month, been fairly good. (He has been given milk, at regular intervals, during the day). Bowels, which had been quite badly constipated, have now become quite regular. Has remained steadily in bed, in a stuporous condition from which it was, at times, found difficult to arouse him for purpose of feeding him. Today (the 17th inst), he was ordered taken out of bed & dressed. Was subjected to electrical treatment (in the treating-room). Was seemingly thus improved & was able to sit up remainder of day.

" 23 — Feb 23/94. This treatment has been quite often given him & he has much improved under it. He is still somewhat dull & stupid. Talks more & after repeated questioning answers only in monosyllables. Habits are cleanly now; while in the "Stupor" they were dirty; but since he has remained up during the day, he has been quite clean. (Dirty, till 24th inst — 8 Days).

" 24 — Feb 24/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. He was, today, Taken Out and Returned under "new Warrant" from Olmsted County. Feb 28/94. Patient's appetite has gradually improved. Is on extra diet. Physical condition has also improved, though he is not much inclined to walk or move about. Generally found sitting or lying down on a bench, sleeping. Has been given some treatment by electricity & galvanism, which seemed to give some good results. His behavior is good; makes no complaints. Talks very little. When awake, he seems to be aware of his surroundings but takes no interest in them. Is cleanly in his habits. —

Mar 1/94 — Mar 1/94. Wt 141 lbs. Pulse 64. Mar 15/94. No material change. Is still being given occasional treatment, as above mentioned; they seem to have good effect for a time, but these soon

" 31 — wear off & he relapses into his former stupefied condition. March 31/94. No material change.

April 1/94 — April 1/94. Wt 135½ lbs. Pulse 48. April 17/94. Appetite poor; is fed extra diet; bowels slightly active; no cough observed; physical condition shows no improvement; was ordered to bed, by physician in charge.

" 20 — April 20/94. Refused to remain in bed, & was allowed to sit up, in ward. Is still dull & stuporous.

28/29/30 — April 28/29/30/94. Was again placed in bed by order of Physician (Dr. Herzog). His appetite continues poor and he has to be fed with spoon, to get him to eat anything. Bowels still constipated. No cough yet noticed. Talks none at all. Turns away his head, when spoken to, and he continues in the same lethargic state. Is cleanly in his personal habits. —

May 1/94 — May 1/94. Wt 124 lbs. (in bed). Pulse 66. May 8/94. Confined to bed during also first 7 days of the month, as he was unable to walk & fell frequently. Seeming now improved he was allowed to get up; was dressed & put out in the hall, today. He sleeps well. Has frequent nose-bleed. Pulse 70. R 16. His appetite is poor. May 31/94. Appetite keeps poor. Is on extra diet

" 31 — & has to be fed by nurse; bowels irregular; no cough observed — Physical condition is weak; gait staggering; does not look where he is going & is in a semi-stupefied state all the time. Is quietly behaved. When in hall, sits in no place & position all the time. Talks none. Is only half-awake during the day; appears much depressed — Is cleanly in his habits.

(Carried to page 364)

Personal and Medical History of Samuel Schyrock

EBERT, FICLAW & CHAMBERS, DAVENPORT, IOWA

Whole No. 3590
Residence, Minneapolis (nothing definite).
Date Admission, 9th December 1893.
Admitted by, O. Phelps Hour, 7 PM
How Sent, John A. Steele, Jof C. Hennepin County.
Sex, Male
Age, 25 32 Years
Civil Condition, Single
Children, None
Age Youngest Child,
Occupation, Laborer
Degree Education, Moderate; Can read & write -
Profession Religion, Not a church member
Habits, Not intemperate.
Nativity, Missouri (Don't know where parents born).
Physicians Committing, A.G. Irwin and C. Gilbreston
Correspondents, (brother) L.L. Schyrock, Moberly, Missouri.
Family Physician D. Thornton, Clinton, Missouri

No. for Year, 160
Insane Relatives, None, so far as known.
Cause Exciting, possibly from a blow on left side of head
Cause Predisposing, Previous attacks.
Form, acute mania (recurrent)
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, Not
Date of this Attack, 1 month ago
Duration, one month —
No. of Attack, Not 1st (probably several).
No. of Admissions, 1st here (was in Asylum in Missouri 6 yrs ago)
Age First Attack, probably about 17
Time of Leaving, May 14' 94
Time in Hospital, 6 m o d.
Result, Rec.

EXAMINATION ON ADMISSION.

Exd by Dr Herzog, Dec 13/93 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Quick
MEMORY:
Past Events, Slightly clouded
Recent Events, Seems fair
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Illusive, at times.
REASONING POWER:
Ordinary Subjects, Defective
Own Mental State, Seems fair
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Somewhat
DELUSIONS: That people are down on him: that he has seen all these people here before; knows them all but cannot recall their names.
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: /
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, incoherent
Voluble or Reticent, voluble

GENERAL DESCRIPTIVE REMARKS:

Admits being in Asylum at Fulton, Missouri, in 1876, (about 17 years ago) for 4 months: the 2d time for 2 months (about 5 or 6 months between these attacks). Caused by fall ahead. Was delirious, at times; then; delirium lasting some time; admits also being in Mills Workhouse - to 5 days - being brought from there here. Had delusions that people were after him, to slaughter him. The 1st attack came on about 3 months after this fall, ahead, upon sharp edge of a crock. Had another attack in 1885; was put in some Asylum for 4 months - This time, he says, is 4th attack. During it, he has been working all the time until sent to Workhouse (as above states) Says he has been much worse than he is now. Complains of pain in region of this scar. Holds his head to right side, on ask (he says) of pain. Before 1st attack, had typhoid fever: before 3d attack, had pneumonia. Thinks this is a guarantine Hospital. Thinks this place was brought here by people from the Asylum - Does not realize where he is - Forcibly mayhem Missouri

Personal and Medical History of Samuel Schyrock

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6½ in WEIGHT, 118½ lbs. (has weighed 140 lbs) NUTRITION, Poor; fingers somewhat clubbed.
WOUNDS OR ABNORMALITIES, Has (today) a black eye; was struck by fellow patient. Scar on left side of head (caused by fall - mentioned in history -
TONGUE, Tremors, none Coatings, anaemic - tip is marked by pimples - Promptness Movement, prompt
PUPILS, Equality, Equal Size, —
Response Light, normal & equal Accommodation, normal
SIGHT, Good
HEARING, Seems normal

Case No. 3590 Samuel Schyrock. Vol. 25.

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

to accurate. Standing, eyes favor left side a little.

Other Reflexes, no ankle clonus —
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Slightly cadaverous
SENSIBILITY, /
HEART, Sounds are normal
LUNGS, (examination to be made later)
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Previous attacks ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died when patient was very young } no history of heredity obtained
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Samuel Schyrock

HERBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3590

Residence, Minneapolis (nothing definite).

Date Admission, 6th December 1893.

Admitted by, Dr Phelps Hour, 7 PM

How Sent, John A Steele, Sof P. Hennepin County.

Sex, Male

Age, 25 32 years

Civil Condition, Single

Children, None

Age Youngest Child, —

Occupation, Laborer

Degree Education, Moderate; Can read & write

Profession Religion, Not a church member

Habits, Not intemperate.

Nativity, Missouri (Don't know where parents born).

Physicians Committing, A.F. Irwin and C.G. Weston

Correspondents, L.L. Schyrock (brother), Moberly, Missouri.

Family Physician Dr Thornton, Clinton, Missouri

No. for Year, 160

Insane Relatives, None, so far as known.

Cause Exciting, possibly from a blow on left side of head

Cause Predisposing, Previous attacks.

Form, acute mania (recurrent)

Accompanying Bodily Disorder, none mentioned

Suicidal or Not, Not

Date of this Attack, 1 month ago

Duration, one month —

No. of Attack 4th, 5th (illegible)

Result, Rec.

EXAMINATION ON ADMISSION.

Exd by Dr Herzog, Dec 13/93 — MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Slightly clouded

Recent Events, Seems fair

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Illusive, at times

REASONING POWER:

Ordinary Subjects, Defective

Own Mental State, Seems fair

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, somewhat

DELUSIONS: That people are down on him: that he has seen

Systematized or Not, all these people here before; knows them

Special Subjects, all but cannot recall their names.

Transitory or Not,

HALLUCINATIONS: /

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, incoherent

Voluble or Reticent, voluble

GENERAL DESCRIPTIVE REMARKS:

Admits being in Asylum at Fulton, Missouri, in 1876, (about 17 years ago) for 11 months. the 2d time for 2 months (about 5 or 6 months between attacks). Cause by fall ahead. Has delusions, at times, then; delusion lasting some time; admits also being in Napa Workhouse - 10 days - being brought from there here. Had delusions that people were after him, to slaughter him. The 1st attack came on about 3 months after this fall ahead, upon sharp edge of a crock. Had another attack in 1885, was put in same Asylum for 9 months - this then, he says, is 4th attack. During it, he has been working all the time until sent to Workhouse (as above stated). Says he has been much worse than he is now. Complains of pain in region of the ear. Struck his head on right side, on 4th (he says) of last June. Before 1st attack, had Typhoid fever: before 3d attack, had pneumonia. Thinks this is a guarantine Hospital. Thinks this place was brought here by people from the outside. — Does not realize where he is. — Possibly mayhem Missouri.

Personal and Medical History of Samuel Schyrock

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6½ in WEIGHT, 118½ lbs. (has weighed 140 lbs) NUTRITION, Poor; fingers somewhat clubbed.

WOUNDS OR ABNORMALITIES, Has (today) a black eye; by fall — medicine in history — was struck by a fellow patient. Scar on left side of head (caused

TONGUE, Tremors, none Coatings, anaemic — tip is markedly pointed Promptness Movement, prompt

PUPILS, Equality, Equal Size, /

Response Light, normal & equal Accommodation, normal

SIGHT, Good

HEARING, Seems normal

COORDINATION, Arms, } Quite good. finger to nose, eyes shut, quite accurate. Standing, eyes

Legs, } shut, quite steady. Turning quickly, seems to favor left side a little.

TREMORS, Hands, none Tongue, none

Facial Muscles, — General, none

REFLEXES, Patellar, Equal — about 4 or 9 — Dr Phelps Steele —

Other Reflexes, no ankle clonus —

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, slightly cadaverous

SENSIBILITY, /

HEART, Sounds are normal

LUNGS, (examination to be made later)

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Records Kept Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Previous attacks ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother died when patient was very young } no history of heredity obtained

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Samuel Schyrock

GIBERT, VOLAR & STAUBERG, DAVENPORT, IOWA

1893

Has brought here, in due form, by a Sheriff's officer, with the following history of case. Acts as Consan-guinity not known; no insane relatives, so far as known. Has had attacks, at various times, was in Asylum, at Fulton, Missouri, 8 years ago, for 2 or 4 months. Was also in Minneapolis Work-house for 5 days. Improved, when he left Asylum. Symptoms of this attack were manifested one month ago, by headache, dizziness "trances" and insomnia. Disease seems stationary; rational periods variable, though not definitely regular. Derangement is now shown by hallucinations & delusions. Patient is neither disposed to injure others nor suicidal, but has some destructive habits. There is no history of intemperance nor of any severe disease &c. Patient attributes cause to a blow on left side of head. Not known if he has had any medical treatment. On personal Exam. the following noted. He recognizes everyone as a friend or acquaintance. There is some nervous excitement manifested by constant movement of the limbs. He said "he meets acquaintances everywhere" and when excited, he rolls himself up in a ball and kicks like a Monkey". He is afraid that some one will laugh him. When asked if he could dance, he jumped into the centre of the floor & gave an Irish Jig. When visited at Workhouse, he was found in a ventilating shaft. Was excited when first seen, but was quiet when examined. Superintendent of Work house states that Patient tears his bedding sings & dances during the night.

Dec 9 Dec 9/93. On admission, was put on B³ (SR. Complexion dark; hair black; eyes brown; condition of skin good. Bodily condition clean. Behavior good). Seems to be quite happy & contented. Dec 10/93. Was " 10 quite restless for 6 hours, last night, sleeping but 3 hours. AM. Pulse 120 R. 13 T. 99.8. Appetite is good. " 11 Bowels have moved. Has some cough. Is restless today. No complaints or injuries to note. Dec 11/93. Was very restless, the greater part of last night and slept but 2½ hours. AM. Pulse 125. T. 100.6. Appetite fairly good; bowels seem regular. Ideas are confused. He is very forgetful. Does not seem to realize " 12 where he is. Climbed through transom over door into 6³ Ward, today - (Evidently through fear, as men-" 13 -tioned in history above). Dec 12/93. Slept 6 hours, restless about 3 hours, last night. AM. Pulse 116. T. 100. Bowels inclined to be constipated. Dec 13/93. Restless 3 hours, sleeping about 6 hours, last night. AM. Pulse 124. T. 99.8. Appetite fairly good; but bowels are constipated. Is very restless today; won't keep his clothing on; also climbing steams pipes &c (see as to his delusion). He has to be watched all the time. Was kicked by a fellow patient (J. O. Boyle) in the face today & received quite a severe cut under the eye, also other bruises. (See "General descriptive remarks" made on patients' Examination today in regard to, amongst other things, the strange ideas he holds in regard to this " 14 institution; also as to where he is). Dec 14/93. Passed a poor night, last night; restless for 4 hours, sleeping but 5 hours. AM. Pulse 90. T. 98.6. Bowels are still constipated. Patient appears somewhat " 15 better than yesterday; is more quiet. Dec 15/93. Has more quiet & restful, sleeping 7 hours, last night. AM. Pulse 84. T. 99.4. Appetite good. Bowels have moved. Has improved, apparently, a " 16 good deal & seems to be alright (after remarks). Dec 16/93. Was restless 3 hours or so, but slept 6 hours, " 17 last night. AM. Pulse 110. T. 99.4. Bowels becoming more regular. Dec 17/93. Slept somewhat better (7 hours) last night. Does not appear to be as well as he has been the past few days. Is more restless. - " 18 Pulse 102. T. 99.4. Dec 18/93. Passed a poor night, sleeping but 5 hours & was restless for 4 hours. - " 19 AM. - 108 - 99.6. Appetite keeps good. Bowels, now, quite regular. Dec 19/93. Was restless for 2 hours, but " 20 slept 7 hours, last night. AM. Pulse 90. T. 99.4. Dec 20/93. Fairly restful, sleeping 7 hours, last night.

Personal and Medical History of Samuel Schyrock

1893 Dec 20/93 (Cont'd) AM. Pulse 82. T. 98.6. Dec 21/93 Was restless for 3 hours, but slept 6 hours, last night. — Dec 21 AM. " 96 " 98.6. Dec 22/93 - Again slept poorly last night, being quite restless. Appetite is only fairly good. Patient complains of soreness across chest & says he is not well. Went to bed. " 23 Pulse 104. T. 103. Dec 23/93. Appetite poor; bowels regular. Patient remains in bed, but says he is somewhat better than he was yesterday. Pulse 102. T. 103.8. Patient exhibits no prominent " 24 symptoms. Probably influenza, though not very typical in form. Dec 24/93. Slept quite well " 25 all night. AM. Pulse 70. T. 98.8. Dec 25/93. AM. Pulse 96. T. 98.8. Dec 26/93 - AM. Pulse 102 " 27 T. 100. Dec 27/93. AM. Pulse 72. T. 98.6. Is sick & in bed, today. Coughs some. Complains of pains " 28 across chest. Appetite not very good today; drinks fairly of milk. Dec 28/93. Says "he is some better, this morning". Still is somewhat restless & does not lie quietly. Pulse 72. T. 99.2. " 29 Dec 29/93. AM. Pulse 72. T. 99.2. Dec 31/93. Has remained in bed, the past few days, but is up today. Is very restless, at times, & at other times, seems perfectly rational; but these periods are only of short duration. Appetite not very good. Bowels are, apparently, regular. Does not keep his clothing on when he is in one of these "spells" & is into everything & has 1894 to be constantly watched. Habits are clean.

Jan 1/94 Jan 1/94. AM. Pulse 82. T. 98.6. Jan 3/94. Wt 112 pds. (Has lost in flesh, since Coming). " 6 Pulse 78. Jan 6/94. Is occasionally restless at night sleeping only 2 hours or so. Last night, was very restless; threw his clothing about the room; would not stay in bed. Received a " 7 sleeping dose last night, but slept only 3 hours. Jan 7/94. Slept 6 hours last night; was restless. " 15 Jan 15/94. Continues to sleep poorly in sound nights. Appetite, at times, fairly good; at others, very poor. Receives extra diet. Is very restless by day also. Does not keep his clothing in shape; inclined somewhat to be ugly. Has some cough. Patient has been " 24 caught in the act of masturbation. Jan 24/94. Has, seemingly, improved a good deal in " 31 the past few days; talks quite rationally. Jan 31/94. Appetite fairly good. Bowels seem regular. No delusions noted. Talks to himself some. At times, restless, dancing & running about; at others, quiet and seemingly rational. Habits are clean.

Feb 1/94 Feb 1/94. Wt 119 pds. (has gained 7 pds, in past month). Pulse 72. Feb 19/94. Has seemed " 22 to improve considerably of late. Says "he has been in hospital, once before". Feb 22/94. At present, is very well-behaved & improvement seems to continue. Talks quite coherently. Works some. Habits clean. " 24 Feb 24/94. This patient was committed here under the "Law of 1892" recently declared unconstitutional. He was, today, Taken out and Returned under "new warrant" from Olmsted County. Feb 28/94. No noticeable change. " 28

Mar 1/94 March 1/94. Wt 125½ pds. (has gained 6½ pds. in past month). Pulse 82. Mar 1/94. Appe-tite good: bowels regular. Is well-behaved. Has had no "spell" for some time & at present, appears to be quite sensible. Works in dining-room. Habits neat & clean. Is in good health. - " 31 March 31/94. Is always quiet & well-behaved, and otherwise is about as lastly described. Habits clean.

Apr 2/30 April 2/94. Wt 135 pds; (again of 9½ pds in past month). Pulse 84. April 30/94. Seems to have improved considerably the past few months. Seems also happy & contented. Personal habits are good

May 3/13 May 3/94. Wt 135½ pds. Pulse 88. May 13/94. Always well-behaved. At times, slightly restless, by day; pleasant & agreeable in manner. Works well & willingly. Is in good physical condition. " 14 May 14/94. Was permitted to leave today. — Discharged —

Personal and Medical History of Nels Erickson

GIBERT, PICKER & CHAMBERS, DAVENPORT, IOWA



Whole No. 3592.
Residence, Town of Homer, Monona Co. Iowa.
Date Admission, 14th December 1893.
Admitted by, W. Phelps Hour, 1 P.M.
How Sent, N. L. Buck, Jof. P. Monona County.
Sex, Male
Age, 57.
Civil Condition, single
Children,
Age Youngest Child,
Occupation, Farm-hand.
Degree Education, Common School.
Profession Religion, Not a church member
Habits, not known
Nativity, Sweden; (Parents also born there).
Physicians Committing, J. H. Timmins & T. A. Peirce
Correspondents, None mentioned in "Papers" -
Has no family Physician

No. for Year, 162.
Insane Relatives, not any as known
Cause Exciting, unknown.
Cause Predisposing, chronic
Form, dementia
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, not.
Date of this Attack, 4 years ago
Duration, about 4 years.
No. of Attack, unknown (if first).
No. of Admissions, 1st
Age First Attack, unknown
Time of Leaving, Apr. 26. 1900
Time in Hospital,
Result, Transferred to Hastings.

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog Dec/15/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, fairly quick
MEMORY:
Past Events, } Very fair
Recent Events, }
Special Subjects,
PERCEPTIVITY:
Alert or Dull, somewhat dulled
Correct or Illusive, in the main, correct
REASONING POWER:
Ordinary Subjects, seems fair
Own Mental State, does not realize his condition
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, somewhat depressed
DELUSIONS:
Systematized or Not, Thinks this old stuff he picks up is worth something -
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, somewhat incoherent
Voluble or Reticent, fairly free in answer to questions -

GENERAL DESCRIPTIVE REMARKS:
Does not understand English well. Examined partly through Interpreter (J. Hansen). While under examination, seems to be intensely nervous at times. Skin is bronzed (probably from liver); breathing asthmatic (probably from the pleurisy in 1892). Father & mother were 2° Cousins (so he says); He has been wandering around, picking up this old stuff for 7 years, he says. —

Personal and Medical History of Nels Erickson

EXAMINATION ON ADMISSION.—(Continued.)

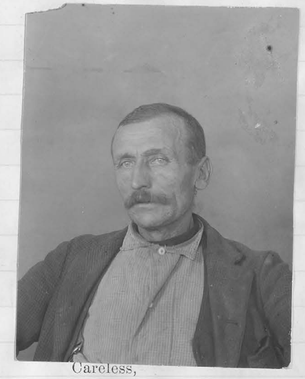
PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7¼in WEIGHT, 159½ pds. NUTRITION, quite fair.
WOUNDS OR ABNORMALITIES, Scar on top of right foot. thumb of right hand cut off. 2 warts on neck, one below left arm. nasal polypi.
TONGUE, Tremors, fibrillary twitchings Coatings, none; bright Promptness Movement, prompt
PUPILS, Equality, equal - shifting a good deal Size,
Response Light, ready Accommodation, yes
SIGHT, fairly good
HEARING, normal

Case No. 3592 Nels Erickson Vol. 25.

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, seem acute - (rough only a reinforcement).
Other Reflexes,
ARTICULATION, Hesitating, — Sharp — Slurred,
FACIAL EXPRESSION, alert.
SENSIBILITY,
HEART, Sounds abnormally strong.
LUNGS,
EXAM. URINE.



OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Recently kept Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Probably some time ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,
} No history of heredity obtained nor can any be brought out.

Personal and Medical History of Nels Erickson

SUBLETT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3592.
Residence, Town of Homer, Monona Co. Iowa.
Date Admission, 14th December 1893.
Admitted by, F. Phelps Hour, 1 P.M.
How Sent, M. L. Buck, Sp of O. Monona County.
Sex, Male
Age, 57.
Civil Condition, single
Children,
Age Youngest Child,
Occupation, Farm-hand.
Degree Education, Common School.
Profession Religion, Not a church member
Habits, not known
Nativity, Sweden; (Parents also born there).
Physicians Committing, H. Timmins & T. A. Pierce
Correspondents, None mentioned in "Papers" -
Nearest Family Physician

No. for Year, 162.
Insane Relatives, not any as known
Cause Exciting, unknown.
Cause Predisposing, chronic
Form, dementia
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, not.
Date of this Attack, 4 years ago

Time in Hospital,
Result, Transferred to Hastings.

fkpw

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog Dec/15/93. MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, } Very fair
Recent Events, }
Special Subjects,

PERCEPTIVITY:
Alert or Dull, somewhat dulled
Correct or Illusive, in the main, correct

REASONING POWER:
Ordinary Subjects, seems fair
Own Mental State, does not realize his condition
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, somewhat depressed

DELUSIONS:
Systematized or Not, } Thinks this old stuff he picks up is worth something -
Special Subjects, }
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, somewhat incoherent
Voluble or Reticent, fairly free in answer to questions -

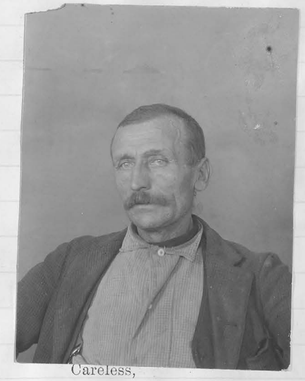
GENERAL DESCRIPTIVE REMARKS:
Does not understand English well. Examined partly through interpreter (J. Hansen). While under examination, seems to be intensely nervous at times. Skin is bronzed (probably from lice); breathing asthmatic (probably from the pleurisy in past). Father & mother were 2° Cousins (so he says); He has been wandering around, picking up this old stuff for 7 years he says. —

Personal and Medical History of Nels Erickson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7¼in WEIGHT, 159½ pds. NUTRITION, quite fair.
WOUNDS OR ABNORMALITIES, Toe on two of right foot: thumb of right hand cut off. 2 warts on neck, one below left arm. nasal polypi.
TONGUE, Tremors, fibrillary twitchings Coatings, none; bright Promptness Movement, prompt
PUPILS, Equality, equal - shifting a good deal Size, ✓
Response Light, ready Accommodation, yes
SIGHT, fairly Good
HEARING, normal
COORDINATION, Arms, somewhat impaired; fingers tremor, eyes shut, somewhat inaccurate.
Legs, quite good: Standing at rest, steady. Standing, eyes shut, no swaying. Swing pretty seems quite good.
TREMORS, Hands, none noted Tongue, some twitchings
Facial Muscles, General, more nervousness.
REFLEXES, Patellar, equal; seem about + - (though only a reinforcement).
Other Reflexes,
ARTICULATION, Hesitating, — Sharp — Slurred,
FACIAL EXPRESSION, alert.
SENSIBILITY,
HEART, Sounds abnormally strong.
LUNGS,
EXAM. URINE.



OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Record kept Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably some time ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") } No history of heredity obtained nor can any be brought out.
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Nels Erickson

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Sheriff J. F. Gay, with the following history of case; which is rather meagre. As to consanguinity, heredity, if previously in hospital, habits, former disease &c, nothing seems to be known & it is impossible to get any particulars from patient at these points. If 1st attack, is also unknown. First symptoms of this present one were manifested 4 years ago, by wandering around the country & working but little. Disease seems to be increasing, but is variable & there are rational intervals; how these occur, cannot state. Derangement is now shown in his gathering old iron, copper, tin cans, old umbrellas, and sundry useless articles. Patient has shown a disposition to injure others only when crossed; is not suicidal, nor filthy nor destructive. Before the accession of the disease, he had this habit of wandering around. He has not been restrained or confined nor under medical treatment. Cause of the disease is unknown. On personal examination, no facts learned other than his having these useless things in his possession. His ascertained that he is a native of Sweden born in 1840, been in this Country 11 years; been in Wisconsin & Minnesota; thinks he is in Wisconsin now; Can obtain no other facts; he simply answered questions, "Yes or No", as asked. Is nervous & easily excited. Dont know where he wants to go, or what he wants to do.

Dec 14 — Dec 14/93. On admission, is in fair physical condition. Temperature 98.3. (S.R. Complexion light; hair light Eyes blue; condition of skin fairly good; thumb of right hand cut off; a sore on toe on right foot. Is dirty & covered with vermin. Has two warts on neck & one below his left arm. Well-behaved). —

" 15 — Little finger and third finger of right hand frozen off. Dec 15/93. Quiet, sleeping 7 hours, last night.

" 16 — A.M. Pulse 118 R 20 T(e) 100.8. Is fairly quiet & well-behaved. Appetite good. Dec 16/93. Restless for 2 hours, but slept 7 hours, last night. A.M. Pulse 114. T(e) 99.4. Dec 17/93. More quiet & restful, and

" 17 — slept 8 hours, last night. A.M. Pulse 112 T(e) 99.8. Appetite good. Bowels regular. Dec 18/93. Restless for

" 18 — a couple of hours, last night, but slept 7 hours. A.M. Pulse 88. T(e) 100. Dec 19/93. Somewhat restless, though

" 19 — sleeping 7 hours, last night. A.M. Pulse 94. T(e) 99.2. Seemed to be lazy, shaking his feet when walking. Dec 20/93. Restless 3 hours, sleeping 6 hours, last night. A.M. Pulse 96. T(e) 99.2. Bowels regular.

" 20 — Dec 21/93. Slept 6 hours, last night; was restless for 3 hours or so. A.M. Pulse 84. T(e) 100. Dec 22/93. Slept

" 21 — poorly, last night. Dec 23/93. A.M. Pulse 98 T(e) 99.8. Dec 24/93. A.M. Pulse 75 T(e) 100.4. Dec 25/93. A.M. P 76 T 99.6

" 22/23/24/25 — Dec 26/93. A.M. Pulse 102 T(e) 99.4. Dec 27/93. A.M. Pulse 72 T(e) 100. Dec 28/93. A.M. Pulse 78 T 101.

" 26/27/28 — Dec 29/93. Patient continues, nightly, restless from 3 to 5 hours, sleeping very poorly (only from 3 to 6

" 29 — hours). Appetite good; bowels regular. He is quiet & well-behaved. Habits & hand become quite clean.

" 30 — Pulse (this A.M.) 78. T(e) 100. Dec 30/93. Slept but 4 hours, was restless for 5 hours or so, last night.

1894 — A.M. Pulse 70. T(e) 99.8. Appetite Continues good. Bowels seem normal. Quite restless, by day,

Jan 1/94 — and, nearly all the time, walking the floor. Talks incoherently. Habits clean. Physical, condition good.

" 3 — Jan 1/94. Was restless 3 hours, but slept 6 hours, last night. A.M. Pulse 98. T(e) 100. Jan 2/94. P 98 T(e) 99.2. Jan 3/94. Pulse 70. T(e) 98.6. Wt 144 lbs. (This shows a very marked loss) ?? Pulse 78.

" 15 — Jan 15/94. Appetite good. Bowels regular. Behavior fairly good. Does not work any. Habits are clean.

" 31 — Jan 31/94. Speech is incoherent, talks to himself & makes motions with hands, though no delusions have been noted. Does no work. Habits are clean. Appetite good. Bowels regular.

Feb 1/94 — Feb 1/94. Wt 153 lbs. Pulse 96. Feb 26/94. At present is somewhat restless. Hardly ever speaks - Does not work any. Transferred to Annex. to-day.

Mar 10 — March 10/94. Is a quiet, harmless patient; rather neat in habits. Eats and sleeps well. Speaks only when

Personal and Medical History of Nels Erickson

1894 Cont'd

Mar 10 — Spoken to. Goes out walking regularly. Is in good physical health. Does no work. —

" 12 — March 12/94. Patient was committed here under the "Law of 1893" recently declared unconstitutional. He was, today, Taken out and Returned under new warrant from Olmsted County

" 31 — March 31/94. Patient seems to be in good health. Speaks when addressed, in a gruff, surly sort of way; is fairly tidy in dress. Indolent; does not work any. (Was successfully vaccinated on March 27th inst.)

Apl 2 — April 2/94. Keeps in quite good flesh. April 30/94. No noticeable Change in his Condition. —

May 31 — May 31/94. Patient is stubborn & inclined to be troublesome. Restless; walks the floor a good deal; — seldom speaks unless spoken to. Clean in habits; works a little on ward; health apparently good. —

June 30 — June 30/94. No noticeable change in patients condition, either mentally or physically, at this date.

July 31 — July 31/94. Keeps about the same from month to month - Seems fairly contented here. —

Aug 31 — During these 3 months, patient has generally been quiet & inoffensive. Does a little work on the

Sept 30 — ward. Seldom speaks; occasionally laughs heartily, for no apparent cause, & foolishly. Habits

Oct 31 — clean; dress neat; health apparently good. Seems to be quite contented here. —

Nov 30 to Jan 31 '95 — During these 3 months, patient has been stubborn and troublesome, at times; Speech is incoherent; he works some on ward - Health seems good -

Feb 28 — Feb 1 to Apl 30/95. During this quarter, there has been no change to note. He walks the floor, a great deal; talks to himself. Habits filthy; dress untidy.

Apl 30 — May 1 — During this quarter, patients condition has been about the same as reported for several months past.

May 1 — July 1 — As a rule, quiet; but is given to gesticulating wildly, at times. Habits filthy; Dress untidy. Health seems good.

July 1 — Aug 1 — During this period, no change to note: is rather stubborn: works a little on ward. Gesticulates, at

Aug 1 — Sept 30 — times. Habits rather filthy & he is untidy about dress: is trouble with polypi in nose.

Oct 31 — Nov 4/95. Wt 140 lbs. Pulse 88. Nov. Dec Jany 31/96. No change noticeable, during this period

Nov 4 — Dec Jan 31/96 — talks a good deal but unintelligibly: Habits filthy; Health seems good: works on ward, a little

Feb 1 — Feb 96. Wt 143 lbs. P 76. Feb. March 1st to Apl 30/96. During the period, patient has been stubborn at times; does

Mar 1st to Apl 30 — a little work: gesticulates wildly, at times: talks some, but cannot make out, as he talks hoarsely & has an impediment in his speech. Habits filthy: Health apparently good.

May 1/96 — Summary. Nurses Notes by Dr Phelps - A chronic case of insanity: Quiet, stubborn; works little: No physical illness noted. Wt averages 138 lbs.

Aug 1/97 — Aug 31/97 — Wt. 136 Oct 31. Health good: Cannot understand his talk: Is clean in habits. Works some: Appears rather demented. Jan 31/99 Intervening notes show no change in behavior Feb 1 - July 31/99. (Dr Wanous) Wt. 139. Appetite good: Sleeps well:

1899 — Jan 31 — Apl 1 — Works about grounds: No change. Aug 1 - Jan 31/99 (Dr Chapple) Wt. 132 Feb 1 - 159 Apl 1.

Apl 1 — 1900 — Apl 26 — Condition has been quite stationary during period: Is very demented & does not talk sensibly. Behavior very good: Is cleanly in habits: Has worked about grounds & farm & in kitchen - Apl 26/1900. Condition has remained stationary no change of importance during past year: no illness: no complaints.

Was today transferred to Hastings Hospital.

Personal and Medical History of John F. (Francis) Conlin

LOBERT, PUGLAR & DUMBECK, DAVENPORT, IOWA

Whole No. 3594.
Residence, 276 Lisbon St. St Paul.
Date Admission, 19th December 1893.
Admitted by Dr Linton Phelps Hour, 7 P.M.
How Sent, John. P. Oliver Jo. Ramsey County
Sex, Male
Age, 26
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Machinist
Degree Education, High School
Profession Religion, Catholic
Habits, not intemperate.
Nativity, Missouri (parents born in Ireland). –
Physicians Committing, C. F. Sweeney & Arthur Sweeney.
Correspondents, (Father) John Conlin (Sister) Mathilda Conlin 276 Lisbon St.
Family Physician Clarence F. Sweeney, 149 W 7th St. St Paul

No. for Year, 164.
Insane Relatives, none
Cause Exciting, Epilepsy
Cause Predisposing, chronic
Form, epileptic dementia.
Accompanying Bodily Disorder, Epilepsy –
Suicidal or Not, not.
Date of this Attack, several months ago
Duration, several months
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 25.
Time of Leaving, Feb. 22. '94
Time in Hospital, 2 mo. 2 da.
Result, Rec.

Crossed from removed List, April 1894, Deceased, Incidentally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by D Herzog Dec 26/93.

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

MEMORY:
Past Events, Good
Recent Events, impaired
Special Subjects,

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

REASONING POWER:
Ordinary Subjects, fair
Own Mental State, seems good; realizes his own condition.
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Yes; seems quite so.

DELUSIONS: Admits having had delusions mentioned
Systematized or Not, in history but says he has given up
Special Subjects, these delusions within past 24 hrs.
Transitory or Not,

HALLUCINATIONS: None noted
ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Somewhat reticent

GENERAL DESCRIPTIVE REMARKS:

States that during his sickness before Comingshee, he had dreams; thinking himself an illegitimate child; thought President Cleveland was his father. Does not know why he thought so. Also (when sick) thought there were 2 cats in his bed. Doesn't believe in dreams & doesn't have them now. Considers them now (within past 24 hrs) as merely imaginary. States also he had a fall from a barn on to the top of his head when about 5 years old – fits came on when he was about 6 years old. Then, after a while, stopped. Was sick a bed about a week before coming here. Had been up about 24 hrs, previous to being committed here. Most fits during this attack were the 1st in 15 years. Had 2 or 3 before coming here. Always straight. Is positive that they occurred while he was asleep. When about 11 years old, these fits were very bad; occurring both day & night in School; not there so

(continued on 355) –

Personal and Medical History of John F. Conlin

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11½ in WEIGHT, 166 lbs. NUTRITION, somewhat anaemic
WOUNDS OR ABNORMALITIES, no scar found on head (from fall mentioned below). –
TONGUE, Tremors, some Coatings, somewhat anaemic pale Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, normal Accommodation, very sluggish
SIGHT, normal
HEARING, admits some slight impairment
COORDINATION, Arms, } Impaired. Finger to nose, eyes shut, quite inaccurate; Standing on feet,
Legs, } not very good; Standing, eyes shut, sways some; Turning quickly, some hesitation
TREMORS, Hands, some Tongue, some
Facial Muscles, none General, slight
REFLEXES, Patellar, equal – about nine – somewhat sluggish
Other Reflexes, ankle clonus, very slight
ARTICULATION, Hesitating, yes Slurred,
FACIAL EXPRESSION, somewhat depressed.
SENSIBILITY,
HEART, Sounds are good
LUNGS, sounds normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, about 2 months (this time) ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother's sister was "light in head".
Father or Pat. Relations, Paternal uncle – apoplexy (died)
Brothers or Sisters, (No further family history) –

Personal and Medical History of John F. Conlin

HERBERT, FULLER & CHAMBERS, DAVENPORT, IOWA.

1893

Has brought here by A.C. Haas, Deputy Sheriff, with the following history. There is no history of either Consanguinity or heredity. This is 1st attack; for several months he has been interested in politics and talked a great deal about them. Disease seems increasing; not variable; no rational intervals. Derangement is now shown in that he has been much interested in politics; has aspirations for office; has delusions of a change at birth & believes he is an illegitimate son of President Cleveland and wants to go to Washington to fix up the matter, by suit for damages, or by violence. He also had two cats in his side, which he wanted cut out. He has had Epilepsy for a number of years, and this attack has developed, after an attack. "He sees Grover Cleveland in the looking-Glass". "His parentage was revealed to him in dreams". Patient is neither disposed to injure others nor suicidal, nor filthy nor destructive. Previously, was a close student of politics and took much interest in public affairs. There is no history of intemperance. He has had Epilepsy from childhood, the attacks ceasing when 12 or 14, and began again, a few years later, increasing up to the present time. He has not been restrained or confined. Cause of the disease is Epilepsy, for which he has been treated by bromides, in large doses, sulfonal & Hyoscin, with quieting effects. On personal examination, patient is rather depressed, and talks freely about his delusions; tongue is tremulous; much tremor of hands. He said that he was a son of President Cleveland & that he had two cats in his side. He talked in an excited manner; appearance & manner, dejected & melancholy. From other sources, it is learned that the patient has been peculiar for some months prior to the acute onset; studying politics, arguing and gazing about in an abstracted manner.

Dec 19 Dec 19/93. On admission, is in fair condition, though a little pale. Was put on B3. (S.R. Complexion dark; hair black; eyes blue; condition of skin good; no marks, scars &c; bodily condition clean; no bodily peculiarities; behavior good). Pulse 78. R 20. Te 99.2. Dec 20/93. Was quiet, sleeping 8 hours, last night. AM. Pulse 76. R 18. Te 98.8. Appetite medium; bowels constipated. No cough observed. Is well-behaved. Talks when addressed; no delusions noticed. Complains of his bowels; also of headache.
" 21 PM. Pulse 78. Te 99. Dec 21/93. Slept quietly & well, 8 hours, last night. AM. Pulse 78. Te 98. Bowels have moved. Patient talks quite freely. Sits on a seat, most of the time. PM. Te 99.2. Habits clean.
" 22 Dec 22/93. Again, rested & slept well, last night. AM. Pulse 80. Te 99. Appetite good. Reads some; but does not play games. Goes out walking with the rest. Dec 23/93. Te, last evening. 99.2. This AM. Pulse 78. Appetite continues good; he does no work; makes no complaints.
" 24/25 Dec 24/93. AM. Pulse 76. Walks about hall; talks freely with patients. Dec 25/93. AM. P 78.
" 26 Appetite good; no "spells" have been noticed. Dec 26/93. AM. Pulse 76. PM. Pulse 84. Seems to be low-spirited, sometimes. Was examined today in office; (see general Remarks page 353). He considers that bothering over & worrying about politics has been the cause of his mind being affected. Is a moderate drinker. Denies ever having had Syphilis. States that he remembers events that occurred long ago much better than recent events. Remembers things that happened while he was having these "Spells". (During the whole of the examination, patient kept his head down, gazing on the floor, & a good deal of the time, seems to evade giving prompt & proper answers to questions, to a certain extent; but, upon the questions being particularly pressed, the desired answers are procured. Cannot answer why he acts so. "Is not ashamed of his being here" he says. Dec 31/93. Since last noted, patient has
" 31

Personal and Medical History of John F. Conlin

1893
Dec 31 (Contd) been quiet and restful at night, sleeping 8 hours, each night. Has continued quiet & well-behaved by day. Appetite good. Pulse about normal. Talks freely; no delusions noted. Reads some. Clean, tidy and of good personal habits; makes no complaints. Had a convulsion on the night of the 9th inst, the first patient has had since coming here.
1894
Jany 1/94 Jan 1/94. Sleeps well, at night. Continues quiet and well-behaved, by day. Jan 2/94 Appetite continues good; bowels, as a rule, regular. Quiet; well-behaved. Makes no complaints. No further "spell" or convulsion has been reported since the one above-noted. Wt. 167½ pounds. Pulse 80.
" 8/11 Jan 8/94 Complains today of some headache. Jan 21/94 One convulsion reported, last night.
" 29/31 Jan 29/94 One convulsion reported last night. Jan 31/94. Apparently sleeps well, at night. Appetite is good. Talks quite freely; reads some. Feels himself much improved and says he is now ready to go home". Makes no complaints. Works some, at the ward.
Feb 1/11 Feb 1/94 Wt 171½ pds. (Has made a slight gain, in flesh). Pulse 80. Feb 1/94. One convulsion last night. Feb 6/94. Another convulsion, last night.
" 16 Feb 20/94. Quiet, and well-behaved; makes no complaints. Works, willingly, at the ward. Mental condition fair, though somewhat impaired.
" 27 Sent home alone, today.

Crossed off the books; was illegally committed —

From 136. Joseph O. Boyle

Feb 5

Vol 25 Folio 183

DETAILED HISTORY OF SICKNESS OF MR Joe. Boyle
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Dec. 15	7	5	60	64	18	18	98.8	99.6	Complains of bowels being costive
									Have given diuretic & Pt
									7.30 PM Complete recovery
Dec. 16	7	5	60	60	18	18	98.8	99	Wright Left 8 hours Restless 6 hours
Dec. 17	7	5	78	60	18	20	98.8	99.4	Wright L 7 R 2 hours
Dec. 18	7	5	58	56	18	22	98.8	99.2	Refused breakfast Complains of dizziness and bowels costive to stimulate
									Wright L 6 R 3 hours
Dec. 19	7	5	66	72	18	20	98.6	99	Patient up in ward if chair 5 hours
									Appetite poor. Bowels fairly regular
									Wright L 6 R 8 hours
Dec. 20	7	5	78	76	18	18	98.8	99	Patient Urines both
									Wright L 7 R 2 hours
Dec. 21	7	5	78	80	18		98.6		Wright L 6 R 3 hours
Dec. 22	7	5	84	80	20		98.6		Patient turns & steadily up bed

Personal and Medical History of John F. Conlin

SUBLETT, FICLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by P.C. Haas, Deputy Sheriff, with the following history. There is no history either Consanguinity or heredity. This is 1st attack; for several months he has been interested in politics and talked a great deal about them. Disease seems increasing; not variable; no rational intervals. Derangement is now shown in that he has been much interested in politics; had aspirations for office; has delusions of a change at birth & believes he is an illegitimate Son of President Cleveland and wants to go to Washington to fix up the matter, & sent for damage, or by violence. He also had two cats in his side, which he wanted cut out". He has had Epilepsy for a number of years, and this attack has developed, after an attack. "He sees Grover Cleveland in the looking-Glass". "His parentage was revealed to him in dreams". Patient is neither disposed to injure others nor suicidal, nor filthy nor destructive. Previously, was a close student of politics and took much interest in public affairs. There is no history of intemperance. He has had Epilepsy from childhood, the attacks ceasing when 12 or 14, and began again, a few years later, increasing up to the present time. He has not been restrained or confined. Cause of the disease is Epilepsy, for which he has been treated by bromides, in large doses, sulfonal & Hyoscin, with quieting effects. On personal examination, patient is rather depressed, and talks freely about his delusions; tongue is tremulous; much tremor of hands. He said "that he was a Son of President Cleveland & that he had two cats in his side". He talked in an excited manner; appearance & manner, dejected & melancholy. From other sources, it is learned that the patient has been peculiar for some months prior to the acute onset; studying politics, arguing and gazing about in an abstracted manner.

Dec 19 Dec 19/93. On admission, is in fair condition, though a little pale. Was put on B.3. (S.R. Complexion dark; hair black; Eyes blue; condition of Skin good; no marks, scars &c; bodily condition clean; no bodily peculiarities; behavior good). Pulse 78. R. 20. T. 99.2. Dec 20/93. Was quiet, sleeping 8 hours, last night. A.M. Pulse 76. R. 18. T. 98.8. Appetite medium; bowels constipated. No cough observed. Is well-behaved. Talks when addressed; no delusions noticed. Complains of his bowels; also of headache.
" 20 P.M. Pulse 78. T. 99. Dec 21/93. Slept quietly & well, 8 hours, last night. A.M. Pulse 78. T. 98.8. Bowels have moved. Patient talks quite freely. Sits on a seat, most of the time. P.M. T. 99.2. Habits clean.
" 21 Dec 22/93. Again, rested & slept well, last night. A.M. Pulse 80. T. 99. Appetite is good. Reads some, but does not play games. Goes out walking with the rest. Dec 23/93. T. last evening 99.2. This A.M. Pulse 78. Appetite continues good; he does no work; makes no complaints.
" 22 Dec 24/93. A.M. Pulse 76. Walks about hall; talks freely with patients. Dec 25/93. A.M. 78.
" 23 Appetite good; no "spells" have been noticed. Dec 26/93. A.M. Pulse 76. P.M. Pulse 84. Seems to be low spirited, sometimes. Was examined today in office, (see General Remarks page 353). He considers that bothering over & worrying about politics has been the cause of his mind being affected. Is a moderate drinker. Denies ever having had Syphilis. States that he remembers events that occurred long ago much better than recent events. Remembers things that happened while he was having these "Spells". (During the whole of the Examination, patient kept his head down, gazing on the floor, & a good deal of the time, seems to evade giving prompt & proper answers to questions, to a certain extent; but, upon the questions being particularly pressed, the desired answers are procured. Cannot answer why he acts so. "Is not ashamed of his being here" he says. Dec 31/93. Since last visited, patient has

Personal and Medical History of John F. Conlin

1893 Dec 5 (Contd)

1894 Jany " 8 " 20 Feb 1/ " 16 " 27

1894 Nov 17/94 " 19 " 30 Dec 1 " 2 " 5 " 6 " 7 " 8/ " 14 " 18 " 19 " 23/ 27 " 26/ 31

Vol 25 Folio 183

DETAILED HISTORY OF SICKNESS OF MR Joe. Boyle
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Dec. 15	7	5	60	64	18	18	98.8	99.6	Complains of bowels being costive. Urine Normal; sp. grav. 1.017. 7 P.M. Bowels moved. Night Nurse. Slept 8 hours. Rested 6 hours.
Dec. 16	7	3	60	60	18	18	98.8	99	Night Nurse. S. 7 R. 2
Dec. 17	7	5	78	60	18	20	98.8	99.4	Night Nurse. S. 7 R. 2 hours.
Dec. 18	7	5	58	56	18	22	98.8	99.2	Refused breakfast. Complains of dizziness and hyperesthesia of scalp. Night Nurse. S. 6 R. 3 hours.
Dec. 19	7	5	66	72	18	20	98.4	99	Patient up in ward for 5 hours. Appetite poor, bowels fairly regular. Night Nurse. S. 6 R. 3 hours.
Dec. 20	7	5	58	76	18	18	98.8	99	Patient given bath. Night Nurse. S. 7 R. 2 hours.
Dec. 21	7	5	78	80	18		98.6		Night Nurse. S. 6 R. 3 hours.
Dec. 22	7	5	84	80	20		98.6		Patient lies steadily in bed. Is quite cheerful & contented. Night Nurse. S. 7 R. 2 hours.
Dec. 23	7	5	72	80					Slept 7 R. 2 hours. Appetite fair. Bowels fairly regular.
Dec. 24	7	5	58	66					Night Nurse. Slept 6 hours. Rested 3 hours.
Dec. 25	7	5	76	80					Night Nurse. S. 6 R. 3 hours.
Dec. 26	7	5	76	70					Night Nurse. Slept 6 R. 3 hours. 7 P.M. Complains of pulsing feeling in Stomach.
Dec. 27	7	5	76	66					Night Nurse. S. 7 R. 2 hours. Urine Normal. Sp. Gr. 1.020
Dec. 28	7	5	100	60					4 P.M. Complains of pain in Stomach. Night Nurse. S. 7 R. 2 hours.
Dec. 29	7	5	58	62					Night Nurse. S. 7 R. 2 hours.
Dec. 30	7	5	70	62					Night Nurse. Slept 5 hours. Restless 4 hours.
Dec. 31	7	5	74	70					Night Nurse. Slept 7 hours. Rest less 5 hours. Always insists that he is quite well & wants to be discharged. Is weakly in bed. Continues to lie quietly.

Today. Dec 27/94. Patient lies steadily in bed. Is quite cheerful & contented. Dec 27/94. Still in bed; lies there quietly. Makes his complaints quite often. Appetite fair; bowels fairly regular. Dec 28/94. Transferred to the New Infirmary Ward, East. Dec 31/94. Of late, patient has been sleeping much

(carried to 120)

Personal and Medical History of John F. Conlin

SUBLETT, FICKLE & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by P.C. Haas, Deputy Sheriff, with the following history. There is no history either Consanguinity or heredity. This is 1st attack; for several months he has been interested in politics and talked a great deal about them. Disease seems increasing; not variable; no rational intervals. Derangement is now shown in that he has been much interested in politics; had aspirations for office; has delusions of a change at birth & believes he is an illegitimate son of President Cleveland and wants to go to Washington to fix up the matter, & sue for damages, or by violence. He also had two cats in his side, which he wanted cut out. He has had Epilepsy for a number of years, and this attack has developed, after an attack. "He sees Grover Cleveland in the looking-Glass". "His parentage was revealed to him in dreams". Patient is neither disposed to injure others nor suicidal, nor filthy nor destructive. Previously, was a close student of politics and took much interest in public affairs. There is no history of intemperance. He has had Epilepsy from childhood, the attacks ceasing when 12 or 14, and began again, a few years later, increasing up to the present time. He has not been restrained or confined. Cause of the disease is Epilepsy, for which he has been treated by bromides, in large doses, sulfonal & Hyoscin, with quieting effects. On personal examination, patient is rather depressed, and talks freely about his delusions; tongue is tremulous; much tremor of hands. He said that he was a son of President Cleveland & that he had two cats in his side. He talked in an excited manner; appearance & manner, dejected & melancholy. From other sources, it is learned that the patient has been peculiar for some months prior to the acute onset; studying politics, arguing and gazing about in an abstracted manner.

Dec 19 **Dec 19/93.** On admission, is in fair condition, though a little pale. Was put on B3. (S.R. Complexion dark; hair black; Eyes blue; condition of skin good; no marks, scars &c; bodily condition clean; no bodily peculiarities; behavior good). Pulse 78. R 20. T. 99.2. **Dec 20/93.** Was quiet, sleeping 8 " 20 hours, last night. AM. Pulse 76. R 18. T. 98.8. Appetite medium; bowels constipated. No cough observed. Is well behaved. Talks when addressed; no delusions noticed. Complains of his bowels; also of headache. " 21 PM. Pulse 78. T. 99. **Dec 21/93.** Slept quietly & well, 8 hours, last night. AM. Pulse 78. T. 98.8. Bowels have moved. Patient talks quite freely. Sits on a seat, most of the time. PM. T. 99.2. Habits clean. " 22 **Dec 22/93.** Again, rested & slept well, last night. AM. Pulse 80. T. 99. Appetite is good. Reads some, " 23 but does not play games. Goes out walking with the rest. **Dec 23/93.** T., last evening 99.2. This AM. pulse 78. Appetite continues good, he does no work; makes no complaints. " 24/25 **Dec 24/93.** AM. Pulse 76. Walks about hall; talks freely with patients. **Dec 25/93.** AM. P 78. " 26 Appetite good; no "spells" have been noticed. **Dec 26/93.** AM. Pulse 76. PM. Pulse 84. Seems to be low spirited, sometimes. Was examined today in office; (see general Remarks (page 353). He considers that bothering over & worrying about politics has affected the course of his mind being affected. Is a moderate drinker. Denies ever having had Syphilis. States that he remembers events that occurred long ago much better than recent events. Remembers things that happened while he was having these "Spells". During the whole of the examination, patient keeps his head down, gazing on the floor, & a good deal of the time, seems to evade giving prompt & proper answers to questions, to a certain extent; but, upon the questions being particularly pressed, the desired answers are procured. Cannot answer " 31 why he acts so. "Is not ashamed of his being here" he says. **Dec 31/93.** Since last noted, patient has

Personal and Medical History of John F. Conlin

1893 Dec 31 (Contd) Was

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DETAILED HISTORY OF SICKNESS OF MR Joe Boyle
DIAGNOSIS.

DATE	HOUR	PULSE: AM	PULSE: PM	RESP: AM	RESP: PM	TEMP: AM	TEMP: PM	
Dec. 1	7	5	72	66	22	18	99.6	99.8	Weight 134 pounds
									Patient has sluggish bedsore which discharges some matter just now at times
									Has heated stupe twice a day
									Appetite poor - bowels fairly regular
									Sleep 1st night 8 hours & 23 hours,
Dec. 2	7	5	54	60	20	20	99.4	99.8	Complains of being sick to stomach frequently. Bowels occasionally
									Complained of bowels being constipated.
									Bowels having a movable 4 7. 1
									Has heated as usual
									Night 1 2 hours. Restless 3 hours
Dec. 3	7	5	62	72	20	22	98.6	99.4	Has heated as usual
									Night 1 2 & 2 hours
Dec. 4	7	5	66	52	20	18	100	99.8	Has heated as usual. Patient given a bath.
									Night 1 4 & 5 hours
Dec. 5	7	5	56	56	18	18	99.4	100.2	Night 1 4 & 5 hours
Dec. 6	7	5	60	56	20	22	99.2	100	Has heat apart discontinued.
									Night 1 & 8 & 3 hours
Dec. 7	7	5	52	56	24	22	98.6	98.8	Patient bowels this A.M. Complains of being sick to stomach
									Night 1 & 6 hours & 2 hours
Dec. 8	7	5	40	60	19	22	99.2	99.4	Complains of bowels being costive
									given 1 enema soapy 4 7. 1
									refused Breakfast
									Night 1 5 & 4 hours
Dec. 9	7	5	52	52	20	22	99.2	100	Patient frequently complains of being sick to stomach.
									Night 1 5 & 4 hours
Dec. 10	7	5	54	58	20	24	99.2	99.8	Night 1 5 & 4 hours
Dec. 11	7	5	60	64	18	20	98.2	99.4	Appetite poor. Bowels fairly regular.
Dec. 12	7	5	54	68	22	20	99.2	99.6	
Dec. 13	7	5	56	68	20	18	99	99.6	Enema Bath
Dec. 14	7	5	56	60	18	20	98.6	99.4	Still complains frequently of being sick to stomach

Dec 31/93. Transferred to the New Infirmary Ward, East. **Dec 31/94.** To date, patient has been sleeping much

(carried to 120)

EGBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by P.C. Haas, Deputy Sheriff, with the following history. There is no history either Consanguinity or heredity. This is 1st attack; for several months he has been interested in politics and talked a great deal about them. Disease seems increasing; not variable; no rational intervals. Derangement is now shown in that he has been much interested in politics; had aspirations for office; has delusions of a change at birth & believes he is an illegitimate son of President Cleveland and wants to go to Washington to fix up the matter, & sent for damages, or by violence. He also had two cats in his side, which he wanted cut out". He has had Epilepsy for a number of years, and this attack has developed, after an attack. "He sees Grover Cleveland in the looking-Glass". "His parentage was revealed to him in dreams". Patient is neither disposed to injure others nor suicidal, nor filthy nor destructive. Previously, was a close student of politics and took much interest in public affairs. There is no history of intemperance. He has had Epilepsy from childhood, the attacks ceasing when 12 or 14, and began again, a few years later, increasing up to the present time. He has not been restrained or confined. Cause of the disease is Epilepsy, for which he has been treated by bromides, in large doses, sulfonal & Hyoscin, with quieting effects. On personal examination patient is rather depressed, and talks freely about his delusions; tongue is tremulous; much tremor of hands. He said that he was a son of President Cleveland & that he had two cats in his side". He talked in an excited manner; appearance & manner, dejected & melancholy. From other sources, it is learned that the patient has been peculiar for some months prior to the acute onset; studying politics, arguing and gazing about in an abstracted manner.

Dec 19 Dec 19/93. On admission, is in fair condition, though a little pale. Wasserman B.T. (S.R. Complexion dark; hair black; eyes blue; condition of skin good; no marks, scars &c; bodily condition clean; no bodily peculiarities; behavior good). Pulse 78. R. 20. T. 99.2. Dec 20/93. Was quiet, sleeping 8 hours, last night. AM. Pulse 76. R. 18. T. 98.8. Appetite medium; bowels constipated. No cough observed. Is well-behaved. Talks when addressed; no delusions noticed. Complains of his bowels; also of headache.

" 21 PM. Pulse 78. T. 99. Dec 21/93. Slept quietly & well, 8 hours, last night. AM. Pulse 78. T. 98.8. Bowels have moved. Patient talks quite freely. Sits in seat, most of the time. PM. T. 99.2. Habits clean.

" 22 Dec 22/93. Again, rested & slept well, last night. AM. Pulse 82. T. 99. Appetite is good. Reads some, but does not play games. Goes out walking with the rest. Dec 23/93. T. last evening 99.2 - This AM. pulse 78. Appetite continues good; he does no work; makes no complaints.

" 23 Dec 24/93. AM. Pulse pt. Walks about hall; talks freely with patients. Dec 25/93. AM. 78.

" 24 Appetite good; no "spells" have been noticed. Dec 26/93. AM. Pulse 76. PM. Pulse 84. Seems to be low-spirited, sometimes. Was examined today in office; (see general Remarks page 353). He considers that bothering over & worrying about politics has been the cause of his mind being affected. Is a moderate drinker. Denies ever having had Syphilis. States that he remembers events that occurred long ago much better than recent events. Remembers things that happened while he was having these "spells". (During the whole of the examination, patient kept his head down, gazing on the floor, & a good deal of the time, seems to evade giving prompt & proper answers to questions, to a certain extent, but, upon the questions being particularly pressed, the desired answers are procured. Cannot answer why he acts so. "is not ashamed of his being here" he says. Dec 31/93. Since last noted, patient has

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Feb 1/94

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Dec 22/94. Transferred to the New Infirmary Ward, East. Dec 31/94. Of late, patient has been sleeping (carried to 120)

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DETAILED HISTORY OF SICKNESS OF MR
DIAGNOSIS. Joe Boyle

DATE	HOUR	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Nov. 26	7	V	100	20	24			6.30 P.M. Received on ward from C.P. put to bed. Slept 5 hours rest 7 hours
27	7	V	96	22	18	20	100.5	100.4 7 A.M. powders given every 2 hours. 3 P.M. powders discontinued. Gargle for throat used every hour. 1 P.M. Gargle discontinued. Appetite fair. Bowels regular. Tongue very big & puffy. Ear discharging blood. Ear syringed with warm water and Peroxide & Iodine put in ear. Quiet today. Slept 5 hours
28	7	V	100	84	22	24	100.2	100 Ear syringed with solutions of carbolic acid 1 to 3 thousand and Peroxide of Hydrogen. Ear discharging. Appetite good. Bowels fairly regular. Complains of feeling sick to his stomach. Slept 5 hours
29	7	V	88	84	20	20	100.2	100.2 Ear treated as usual. Tired today. Patient feels poorly. Bowels fairly regular. Slept 6 hours rest 2 hours 3 hours
30	7	V	76	68	22	20	98.8	99.4 Ear syringed with weak carbolic solution. Ear discharging. Appetite good. Bowels regular. Complains of feeling sick to stomach. Says it is having a sore throat. Slept 6 hours rest 2 hours 3 hours

in bed; lies there quietly. Makes his complaints quite often. Appears pa

Personal and Medical History of John F. Conlin

good deal of the time, seems to evade giving prompt & proper answers to questions, to a certain extent; but, upon the questions being particularly pressed, the desired answers are procured. Cannot answer why he acts so. "Is not ashamed of his being here" he says. Dec 31/93. Since last noted, patient has

Personal and Medical History of John. F. Conlin

1893
Dec 31 (contd) been quiet and restful at night, sleeping 8 hours, each night. Has continued quiet & well-behaved by day. Appetite good. Pulse about normal. Talks freely; no delusions noted. Reads some. Clean, tidy and of good personal habits; makes no complaints. Had a convulsion on the night of the 9th inst, the first patient has had since coming here.

1894
Jany 1/ Jan 1/94. Sleeps well, at night. Continues quiet and well-behaved, by day. Jan 2/94 Appetite continues good; bowels, as a rule, regular. Quiet; well-behaved. Makes no complaints. No further "spell" or convulsion has been reported since the one above-noted. Wt. 167½ pounds. Pulse 80.
" 8/21 Jan 8/94 Complains today of some headache. Jan 21/94. One convulsion reported, last night.
" 29/31 Jan 29/94 One convulsion reported last night. Jan 31/94. Apparently sleeps well, at night. Appetite is good. Talks quite freely; reads some. Feels himself much improved and says he is now ready to go home". Makes no complaints. Works some, at the ward.
Feb 1/11 Feb 1/94 Wt 171½ pds. (Has made a slight gain, in flesh) Pulse 80. Feb 11/94. One convulsion, last night. Feb 16/94. Another convulsion, last night.
" 16
" 24 Feb 22/94. Quiet, and well-behaved; makes no complaints. Works, willingly, at the ward. Mental condition fair, though somewhat impaired.

Sent Home alone, today.

Crossed off the books; was illegally committed —

Joseph. O. Boyle

1894
Nov 27/ From 136.
Dec 1 blood; (Ear syringed with warm water & filled with absorbent cotton, twice a day). Nov 28/94. Slept 5 hours, last night. Ear syringed again & day. Appetite good; bowels regular. He complains of feeling sick, at his stomach. Nov 29/94. Slept 5 hours, last night. Ear treated as usual, twice a day. Patient
" 30 Eats poorly; bowels fairly regular. Nov 30/94. Restless 3 hours, but slept 6 hours, last night. Ear syringed with usual solution, twice a day. Appetite good; bowels regular. Still complains of feeling sick at his stomach & of having a sore throat. Dec 1/94. Slept 6 hours, restless 3 hours, last night.
Dec 1 Wt. today 131 pds. (Has lost considerably in flesh.). Patient has an ulcerated ear, which discharges some
" 2 matter & pus, at times. Same treated, twice a day — Dec 2/94. Complains frequently, of being sick at stomach; vomits occasionally: also complains of constipation. Given laxative. Ear treated, as usual.
" 6 Dec 5/94. He has been restless, a good deal each night & has slept poorly. As there is now no discharge,
" 7 ear treatment is discontinued. Dec 7/94. Patient vomited this am: Complains of being sick at stomach.
" 8/10 Dec 8/94. Complains of bowels being costive; repeats breakfast. Dec 9/94. Patient is steadily in bed; Complains, frequently, of being sick at his stomach. Bowels quite often constipated: requires laxatives. Appetite is poor. He also sleeps poorly, only about 4 hours, nightly. Is very restless about 4 hours, each night.
" 18 Dec 18/94. Still in bed. Complains, a good deal, of sickness at stomach & constipation, & dizziness. Refused
" 19 breakfast today. Is sleeping somewhat better, at night. Dec 19/94. Sat up in invalid chair, about 4 hours,
" 23/27 today. Dec 23/94. Patient lies steadily in bed. Is quite cheerful & contented. Dec 27/94. Still in bed; lies there quietly. Makes his complaints quite often. Appetite fair; bowels fairly regular.
" 28/31 Dec 28/94. Transferred to the New Infirmary Ward, East. Dec 31/94. Of late, patient has been sleeping much

(carried to 120)

Personal and Medical History of Jacob Gribler

ROBERT, PUGLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3595.

Residence, Soldiers' Home. Hennepin County.

Date Admission, 20th December 1893.

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

How Sent, John. A. Steele, Jof P, Hennepin County

Sex, Male

Age, 61 years

Civil Condition, married

Children, —

Age Youngest Child, —

Occupation, Laborer

Degree Education, None

Profession Religion, Catholic

Habits, Cannot find out; no history given.

Nativity, Germany; (parents also born there).

Physicians Committing, D. R. Greenlee & A. A. Ames.

Correspondents, Mrs Jacob Gribler, St. Cloud, Minn.

No family Physician



No. for Year, 165.

Insane Relatives, no history

Cause Exciting, unknown.

Cause Predisposing, Previous attacks

Form, dementia

Accompanying Bodily Disorder, none given in history

Suicidal or Not, not known

Date of this Attack, not stated

Duration, not given.

No. of Attack, not 1st (been in St Peter Asylum, 4 yrs).

No. of Admissions, 1st here

Age First Attack, not given

Time of Leaving, July 14. 1893

Time in Hospital, 4 yr. 5 m. 25 d.

Result, Died - Apoplexy

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr. Herzog Dec 26/93.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, } Impaired

Recent Events, }

Special Subjects, }

PERCEPTIVITY:

Alert or Dull, Dulled

Correct or Illusive, Illusive

REASONING POWER:

Ordinary Subjects, } Very poor "no reason for sending him here"

Own Mental State, }

Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

Is very dull of Comprehension. Answers questions after a good deal of hesitation - Says "his 35" "was born on Aug 29th 1858" - "There has been no war since 1864" - "he never was in any war", he says. Admits being in St Peter Hospital - Knows what this place is, but says "there was no reason for sending him here" "He could go right out & go into a store & do business" - Is dull & slow in all his movements.

EMOTIONAL STATE:

Normal, Calm,

Indifferent, yes

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, as per history

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, coherent

Voluble or Reticent, reticent

Personal and Medical History of Jacob Gribler

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 3/4 WEIGHT, 211 pds. NUTRITION, Good

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, slight; deviates to left Coatings, yellowish, at back Promptness Movement, prompt

PUPILS, Equality, left pupil immobile & irregular right pupil normal.

Response Light, normal in rt - no response from left Accommodation, normal in right - left no response.

SIGHT, much impaired, especially in left eye.

HEARING, Seems somewhat impaired

COORDINATION, Arms, Quite fair. Lids to tone. Eyes shut, quite fairly done; Standing unsupported fair. Standing some hesitation.

Case No. 3595 Jacob Gribler Vol. 25.

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

flegs.

Other Reflexes,

ARTICULATION, Hesitating, yes Slurred,

FACIAL EXPRESSION, Blank —

SENSIBILITY,

HEART, Sounds seem normal -

LUNGS, - -

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Previous attack 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 Jacob Gribler

SUBLETT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3595.
Residence, Soldiers' Home. Hennepin County.
Date Admission, 20th December 1893.
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, John. H. Steele, Jof P. Hennepin County
Sex, Male
Age, 61 years
Civil Condition, married.
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, none
Profession Religion, Catholic
Habits, Cannot find out; no history given
Nativity, Germany; (parents also born there).
Physicians Committing, D.R. Greenlee & A.A. Ames.
Correspondents, Mrs Jacob Gribler, St. Cloud, minn.
No family Physician



No. for Year, 165.
Insane Relatives, no history.
Cause Exciting, unknown.
Cause Predisposing, Previous attacks
Form, dementia
Accompanying Bodily Disorder, none given in history
Suicidal or Not, not known
Date of this Attack, not stated
Duration, not given.
[illegible]

Result, Died - Apoplexy.

EXAMINATION ON ADMISSION.

Exd by Dr Herzog Dec 26/93.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, } Impaired
Recent Events, }
Special Subjects,

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

REASONING POWER:
Ordinary Subjects, }
Own Mental State, } Very poor "no reason for sending him here"
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Is very dull of Comprehension. Answers questions after a good deal of hesitation - Says "his 35" "was born in Aug 29th 1858" - "There has been no war since 1864" - "he never was in any war", he says. Admits being in St Peter Hospital - Knows what this place is, but says "there was no reason for sending him here" "He could go right out & go into a store & do business" - Is dull & slow in all his movements.

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

DELUSIONS:
Systematized or Not, as per history
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, coherent
Voluble or Reticent, reticent

Personal and Medical History of Jacob Gribler

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 3/4 in WEIGHT, 211 lbs. NUTRITION, Good
WOUNDS OR ABNORMALITIES, None
TONGUE, Tremors, slight; deviates to left Coatings, yellowish, at back Promptness Movement, prompt
PUPILS, Equality, left pupil immobile & irregular right pupil normal.
Response Light, normal in right - no response from left Accommodation, normal in right - left no response.
SIGHT, much impaired, especially in left eye.
HEARING, seems somewhat impaired
COORDINATION, Arms, } quite fair - finger to nose, eyes shut, quite fairly done; Standing unsteady fair. Standing
Legs, } eyes shut, fairly steady - Turning quickly, slow; done hesitatingly.
TREMORS, Hands, none special Tongue, slight
Facial Muscles, ~~General,~~ swaying of legs.
REFLEXES, Patellar, equal; only 1 w r - Dr 1st Scale.
Other Reflexes,
ARTICULATION, Hesitating, yes Slurred,
FACIAL EXPRESSION, blank —
SENSIBILITY,
HEART, Sounds seem normal -
LUNGS, " "
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Regular Constipated, Irregular,
APPETITE, Good, Poor Medium, Poor,
SLEEP, Good, Poor Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Several years ONSET GRADUAL OR SUDDEN, attack
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Jacob Gribler

Personal and Medical History of Jacob Gribler

1893

An old Soldier, was brought here by Deputy Sheriff James Stines, with the following history. Questions as to Consanguinity and heredity, unanswered. This is not 1st attack; do not know their number. He has been in Asylum at St Peter 4 years. Is not stated when first symptoms of this attack were manifested. Disease appears stationary. Sometimes he has nervous "spells". There has been no change in 18 months. Occasionally shows some violence & resistance. Derangement now manifested on religious subjects mostly. He has made threats to injure others. As to Suicidal tendencies, not known. Is not filthy or destructive. No history has been given as to intemperance and cannot find out anything through him. Nothing stated as to any severe disease, head injury &c. Cause of the disease is unknown. If under medical treatment, unknown. On personal examination, he is incoherent in conversation; unreliable in stating facts and denies having a wife. Is unable to reason; morose in disposition. He says "he is Secretary of the Catholic Church; always paid for his board & all other debts &c. He shows a loss of memory and is unable to answer any questions intelligently. From other sources it is learned there is no end to give a history of his case, and he is unreliable in answering any questions.

Dec 20 Dec 20/93. On admission, was put on B^{r} (SR Complexion dark; hair dark gray; eyes gray; Condition of Skin good. Bodily condition clean. Behavior good.). Dec 21/93. Slept but 5 hours, last night, was restless. AM. Pulse 90 T. 98.8. Appetite good; bowels regular; no coughs noticed. Is restless; walks slowly & aimlessly about the hall. Talks none, unless asked questions. PM. Pulse 92 T. 99. No complaints
" 22 or injuries to report, today. Dec 22/93. Restless & disturbed for 3 hours or so, last night; slept only 5 hours. AM. Pulse 88 T. 99.2. Is quiet & well-behaved. Saunters slowly about hall, hands always in his pants pockets. Seems uninterested in his surroundings. Does not read any or play any games. —
" 23 PM. Pulse 90. T. 99.4. Dec 23/93. Was restless 4 hours, sleeping but 4 hours, last night. AM. Pulse 90. T. 98.8. Appetite good. Is somewhat restless still. Talks none. Makes no complaints. PM. Pulse 92. T. 99.2.
" 24 Dec 24/93. Slept but 5 hours last night; quite restless for 3 hours. AM. Pulse 88. Conduct, by day, about as above
" 25 described. Talks & mutters, a good deal, to himself. Dec 25/93. Passed last night about as the preceding one. AM. Pulse 88. Appetite good. Becoming now restless, walking the hall nearly all the time, now.
" 26/27 Dec 26/93. AM. Pulse 86. Slept a trifle better, (6 hours), last night. Dec 27/93. Again rested somewhat better, last night. AM. Pulse 84. Talks but little. Conduct & behavior, by day, do not change in any respect.
" 31 Went out walking to day, with his ward. Dec 31/93. Since last noted, patient has been now or less restless from 3 to 4 hours, sleeping only from 4 to 6 hours, each night. Pulse has now become about normal. Appetite is good. He continues restless, walking the floor, most of the time; making motions with his hands; mumbling & talking to himself. No definite delusions have as yet so far been noted.

1894
Jan 3 Jan 1/94. Slept 6 hours last night; was somewhat restless. Jany 3/94. Sleep continues quite poor; only about 5 or 6 hours each night; Appetite continues good; pulse about normal. Is well-behaved; though is still
" 15 quite restless; Talks only when addressed & then answers in the fewest possible words & after much hesitation. Makes no complaints. Personal habits are good. Wt 204 lbs. Pulse 86. Jan 15/94. Was restless for 4 hours sleeping but 4 hours, in the nights of the 11th & 12th inst. Walks slowly about hall, hands in pockets;
" 18/24 seems indifferent. Talks to himself. Jan 18/94. Transferred, today, to B^{d}. Jan 24/94. Appetite fair; bowels regular. Is quietly behaved; inoffensive. Walks slowly up & down hall. Talks to none — mumbles to himself. Is, apparently, feeble-minded. 2d Day, was transferred to the Annex. —

1894
Jan 31 Jan 31/94. Continues quiet and well-behaved. Walks the floor a good deal. Talks to himself.
Feb 10 Feb 10/94. Quiet & inoffensive. Mumbles to himself; emphasizing his thoughts by a constant nodding of his head. Health apparently good. Does no work. Habits are clean. —
" 24 Feb 24/94. This Patient was Committed here under the "Law of 1893" recently declared illegal. He was, today, Taken Out and Returned under "new Warrant" from Olmsted Co.
" 28 Feb 28/94. No noticeable change in patients' condition, at this date. —
Mar 10 March 10/94. Continues about the same, from month to month. Walks the floor, a good deal, in a dull, slow way, nodding to himself & talking in low mumbling tones. Talks quite rationally, when
" 31 addressed. Health apparently good. Does no work. — Mar 31/94. No change to note. —
Apl 10 April 10/94. Keeps in good flesh & physical health. Was successfully vaccinated on 2d inst.
" 30 April 30/94. Does not change any seemingly from month to month, or even day to day. —
May 31 } During these two months, patient has continued quiet & inoffensive; indolent; does no work;
June 30 } walks the floor, in a slow way; handles pockets, talking to himself in low mumbling tones — of late, seems to be failing somewhat, both Mentally & Physically. — Habits are cleanly. —
July 31 July 31/94. Seems somewhat improved, since last note. Still very indolent — and Deluded. —
Aug 31 Aug 31/94. No change noticeable, during the last month. Is in good Physical Condition.
Sept 30 Sept 30/94. Patient's condition about the same, Mentally & Physically — Habits clean. Dress tidy.
Oct 18 Oct 18/94. Dr. Eby Examined patient today; the following note made. "Tongue prompt; no tremor. slight deviation to left: fine tremor. Pupils equal; respond to light & accommodation. Heart sounds muffled on account of thickness of chest wall, but seem alright. Pulse 68, full and regular. Lungs good. Reflexes equal — 5 — Coordination good. Right side of face is not as mobile as left; Bowels regular. Talks rationally; accents rather peculiar, of a slight drawling character". Oct 30/94. No change from what is generally noted above.
Nov 30 } During these 3 months, patient has been quiet; walks the floor a good deal. No change observable —
Dec 30 } During this quarter, no change noticeable. He still has his "peculiar ways"; nodding his head and
Jan 31 } talking in low tones to himself. Indolent: does no work. Is clean. Health apparently good. —
Feb } For this period, there has been nothing specially to note. He has been quiet; dull & stupid;
to } talks to himself a good deal: walks the floor, continually: habits clean: dress untidy: Health seems good.
April 30 }
May 1 } During this period, no change noticeable. Has been dull, stupid & demented: gesticulates, at times;
to } idle; does no work: walks about, hands in pockets: talks to himself. Habits clean: health seems good.
July 31 }
Aug } Sept
Sept } Oct 31
Nov 4 Nov 4/95. Wt 188 lbs. Pulse 82. Nov. Dec & Jany 31/95. No change noticeable, in any
Dec } way: Stupid & unemployed: walks floor, talking to himself in low tones. Health seems good.
Jan 31/96 }
Feb 4 Feb 4/96. Wt 175 lbs. Pulse. Feb. March & to Apl 30/96. No change noticeable during the period. Quiet & stupid.
March } No work: walks the floor & talks to himself continually: habits clean: but dress untidy: Health seems to be good.
to } (He has had a large abscess on cheek: doing well at present).
April 30 }
May 1/96 Summary Nurses Notes by Dr. Phelps — Quiet, stupid; does no work: Talks to himself: Gesticulates
to No physical illness noted. Wt. 173 to 181 lbs. Aug 31/97 Wt. 180. Oct. 31 Health good. No change
Aug 1/97 noted in mental state: Clean in habits: Does no work. Very dull in appearance: Mch 5/98 Fell on floor: Unable to
1898 raise arms: Complains of numbness & weakness: Trans. to Infirmary. Mch 6 Lies quietly in bed. Has bitter or no control of limbs. Mch 31 Has been lying quietly in bed ever since Sept. has been practically normal. Is doing fairly well. May 1 Wt. 162
6 lies quietly in bed. Left leg partly paralyzed & is quite helpless
31
May 1

— carried to 244 —

Personal and Medical History of Frederick Wegelin

EBBERT, FIELER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3596.
Residence, Soldiers' Home Hennepin Co.
Date Admission, 20th December 1893.
Admitted by, Dr. Phelps Hour, 7 PM.
How Sent, John A Steele, Jof P. Hennepin County
Sex, Male
Age, 54 Years
Civil Condition, Single
Children,
Age Youngest Child, —
Occupation, Laborer
Degree Education, not educated
Profession Religion, not given
Habits, not intemperate, (so far as known). —
Nativity, Germany; (parents also born there). —
Physicians Committing, D.R. Fruenlee & A.A. Ames
Correspondents, Christian Wegelin, Cincinnati, Ohio
Family Physician, not known.

No. for Year, 166.
Insane Relatives, not known.
Cause Exciting, Hemeplegia
Cause Predisposing, not stated
Form, organic dementia
Accompanying Bodily Disorder, has had hemiplegia
Suicidal or Not, not known.
Date of this Attack, about 5th July 1893
Duration, about 5½ months
No. of Attack, 1st (said to be).
No. of Admissions, 1st
Age First Attack, 53+
Time of Leaving, Mch. 6th '94
Time in Hospital, 2 mos. 17.
Result, Imp.

Crossed - from Discontinued List, April 1st, 1894, because Illegally Committed.

EXAMINATION ON ADMISSION.

Exd by Dr. Phelps & Herzog Dec 20/93

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, slightly Confused
Quick or Sluggish, somewhat sluggish

MEMORY:
Past Events,
Recent Events,
Special Subjects,
} good, as far as asked

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

REASONING POWER:
Ordinary Subjects,
Own Mental State, slightly sluggish; poor.
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent, somewhat demented
Exalted,
Depressed,

DELUSIONS: regarding improper food & poisons & he was overwhelmed thereby.
Systematized or Not,
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION: simply that of Considerable sluggishness
Coherent or Incoherent, slowness of comprehension. Indifference to his condition etc, upon the
Voluble or Reticent, whole, in a state of mild dementia.

GENERAL DESCRIPTIVE REMARKS:

Had an attack of paralysis (left side) about 8 years ago. Claims he also has had heart disease, twice time of the war & more especially twice attack of paralysis. Says he ran away from Soldiers' Home because he was not treated right. They took the strength out of his legs, by not giving him the right food; fingers of right hand not all right yet. They put some stuff in the food; made his hair stand right straight up" — States he has had "dizzy spells" quite often since this paralytic attack & that, sometime, he was in bed 41 days —

Personal and Medical History of Frederick Wegelin

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6½ WEIGHT, 157 lbs. NUTRITION, Seems fairly good.
WOUNDS OR ABNORMALITIES, Wounds, none; Ends of fingers of both hands injured by circular saw.
TONGUE, Tremors, slight; deviated left Coatings, none special. Promptness Movement, Quite prompt
PUPILS, Equality, Equal Size, about normal
Response Light, Quite ready Accommodation, Quite ready.
SIGHT, much impaired, though he does not use glasses
HEARING, Quite a little impaired.
COORDINATION, Arms, } Most incoordination with left side. Finger to nose, eyes shut, fairly good with rt; poorest left.
Legs, } Standing, eyes shut, sways some
TREMORS, Hands, not marked Tongue, slight
Facial Muscles, General,
REFLEXES, Patellar, Equal - 9 to 10 -
Other Reflexes, ankle clonus
ARTICULATION, Hesitating, slightly impaired Slurred,
FACIAL EXPRESSION, somewhat blank -
SENSIBILITY,
HEART, no murmurs noted
LUNGS, Sounds seem normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,		Clean,	Careless,
BOWELS, Normal,		Constipated,	Irregular,
APPETITE, Good,	Kept	Medium,	Poor,
SLEEP, Good,	Regs	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 heredity brought out.
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters, 1 Brother, claims healthy
1 sister " "

Personal and Medical History of Frederick Wegelin

EGBERT, FULLER & CHAMBERS, DAVENPORT, IOWA.

1893

An old Soldier, was brought here by Sheriff's Deputy James Hines, with the following history. As to Consanguinity or heredity, not known. This is said to be 1st attack; symptoms first noticed since July 5th 1893. Disease is slowly increasing. Patient is continuously demented and unable to care for himself and is constantly trying to wander away from the Soldiers' Home. Derangement is now manifested on no subject in particular but is uneasy & wandering and frequently running into danger. He is not disposed to injure others; if suicidal, unknown; think propensity not now active. Is not of filthy or destructive habits. Not addicted to intemperance so far as known. Patient has had hemiplegia and is partially paralyzed on one side, now. He has had no confinement except constant watching to keep him from going away from the Home since his admittance in July 1893. The supposed cause of the disease is Hemiplegia. His treatment at the Home has been laxatives & occasional doses of Potassa Bromide when suffering from headache & restlessness.

Dec 20 — Dec 20/93. On admission, was put on B^3. (S.R. Complexion light; hair dark gray; Eyes brown; Condition of skin good. Bodily condition clean. Is lame in left knee. Behavior good.) T. 99.8. Pulse – R –

" 21 — Dec 21/93. Was restless for 2 hours last night, but slept 6 hours. AM. Pulse 100. T. 99.2. Appetite good; bowels Constipated. No cough observed. Is well-behaved: quiet; cannot walk much. Talks quite freely; no delusions noted. PM. Pulse 98. T. 99.4. No complaints or injuries to report, today. Dec 22/93. Slept last 5 hours; was restless 3 hours or so, last night. AM. Pulse 94. T. 98.8. Appetite good; bowels still constipated.

" 23 — Quietly behaved. Walks slowly about the hall. PM. Pulse 100. T. 99.2. Dec 23/93. Slept 6 hours, restless 2 hours or so, last night. AM. Pulse 92. PM. Pulse 96. T. 99. Dec 24/93. AM. Pulse 88. Talks quite freely;

" 25 — no delusions noted. Dec 25/93. AM. Pulse 92. Dec 26/93. AM. Pulse 90. Still somewhat constipated.

26

" 27 — Dec 27/93. AM. Pulse 94. Complains of headache, also of his bowels troubling him. Given medicines.

" 28 — Dec 28/93. AM. Pulse 90. Dec 29/93. AM. Pulse 92. Is not so well as usual today; Complains of headache.

29

" 30/31 — Dec 30/93. AM. " 90. Bowels have moved freely. Dec 31/93. Sleep has continued poor; he is nightly restless & sleeps only 4 or 6 hours. Appetite the past week or so has been only medium. Pulse this AM. 92. Patient does not look well. Is quiet & well-behaved; moves slowly about the hall. Talks quite freely; no delusions perceived.

1894

Jan 1/3 — Jan 1/94. Slept very poorly (only 3 hours) last night; was very restless for 5 hours. AM. Pulse 90. Jany 3/94. Sometimes rests & sleeps poorly. Pulse about normal. Complains occasionally of headaches & quite frequently about his bowels. Conduct & behavior, by day, about as usual. (When examined on 23^d ult^o, patient showed delusions).

" 17 — Jan 17/94. Has been restless for 4 hours, sleeping but 4 hours, on each of nights of 8th 10th 12th & 16th inst.

" 31 — Jan 31/94. Appetite good. Complains quite often, of his bowels troubling him. Walks slowly about hall. Is somewhat restless & discontented. "Wants to get away, back to Soldiers Home". ——

Feb 1/6 — Feb 1/94. Wt 152½ pds. Pulse 84. Feb 5/94. Continually Complains of bowels being constipated. Memory poor.

" 28 — Feb 28/94. Very infrequently restless at night. As a rule, seems rest & sleeps well. Otherwise, no change.

Mar 1 — Mar 1/94. Wt 149 pds (a gain of 6½ pds in the past month). Pulse 98. No material change otherwise.

" 6 — Mar 6/94. This patient was committed here, under the "Law of 1893" recently declared unconstitutional by the Supreme Court.

He was today sent home, with some others from Hennepin County.

— Crossed off the record; was illegally committed —

Personal and Medical History of John Olson #3

Now 3414

1894

June 1/30 — June 1/94. Wt 130 pds. Is losing in flesh; Pulse 60. June 22/94. Patient's father visited him, today.

" 30 — June 30/94. (No change) to report from what is mentioned in last general note for month. —

July 2/31 — July 2/94. Wt 126 pds (he is still losing in flesh). Pulse 58. July 31/94. No change to note

Aug 31 — Aug 1/94. Wt 125 " P 73. (S. P's note. Patient has lost some of his stupidity; reads some; very quiet & inactive, however) – Aug 31/94. Appetite very capricious. Patient will, at times, Eat scarcely anything, for from 24 to 48 hours, & then will gorge himself with anything and Everything he can lay hands on. Bowels irregular. No cough observed. He appears to be getting slightly weaker, altho' the change is almost imperceptible. He lies about the ward, either on the floor or on a seat, & seems to be half asleep; but when made to go to his meals he will resist being disturbed to the utmost of his strength; when out walking he will strip off his clothing & make constant attempts to escape. He appears, lately, to be brightening up a little. Has no Complaints or injuries – Talks scarcely any & only when he wants something. Is cleanly in his habits. Physical health only fair –

Sep 1/30 — Sept 1/94. Wt 124 pds. Pulse 75. Sept 30/94. Condition unchanged. (Was dirty, one day, during month).

Oct 1/31 — Oct 1/94. Wt 123 " " 76. Oct 31/94. No change in Condition of patient, during this month. –

Nov 1/30 — Nov 1/94. Wt 131 " " 84. Nov 30/94. Appetite very irregular; sometimes, he will eat well; at other times, refuses food, for 2 or 3 meals. Is in a semi-stuporous state; circulation is weak and sluggish. Is quiet but stubborn. Talks very little, in an incoherent manner. Was

Dec 1 — dirty once, during the month. Dec 1/94. Wt 135 pds. Pulse 68. He seems to be suffering from stuporous Melancholia. Dec 28/94. Is about the same condition; (Dirty 4 Days, during month). –

" 28

" 31 — Was transferred to B^3 today. – Dec 31/94. No change noticeable in patient's Condition –

1895

Jan 2/31 — Jan 2/95. Wt 145 pounds; (Has gained 22 pounds in flesh in past 3 months) – Pulse 76 –

" 31 — Jany 31/95. Once in a while, restless at night. Otherwise no change noticed in his condition –

Feb 1/28 — Feb 1/95. Wt 146 pds – Pulse 51. – Feb 28/95. Appetite fairly good; bowels regular. Behavior quiet & stupid; never speaks to anyone or answers, when spoken to. Slouchy in dress; habits dirty & rather filthy. Stays idly about most all day; never moving unless requested. (Was 8 days dirty, during the month). March 1/95. Wt 150 ½ pds. Pulse 76. (Has gained some in flesh). March 31/95. Condition has been about the same, for several months past.

Mar 1

" 31

Apl 1 — Apl 1/95. Wt 144½ pds (has lost some, without apparent cause) – Pulse 84. –

" 7 — Apl 7/95. During past week, has been quite frequently visited by his mother who is very anxious to take him home, on trial. Apl 8/95. Was again visited by his mother, & she was allowed to take him home, this morning.

(The matter was brought up at a Board meeting & patient was transferred to Fergus Falls. (See letter from Supt there (Apl 22/95) asking for Copy of Commitment papers & History –)

Personal and Medical History of John York (Johann)

HERBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3597.
Residence, Soldiers Home, Hennepin County.
Date Admission, 20th December 1893.
Admitted by, D. Phelps Hour, 7 PM
How Sent, John A. Steele, Jof P, Hennepin County
Sex, Male.
Age, 68 years old
Civil Condition, widowed
Children, 2 sons
Age Youngest Child,
Occupation, Butcher
Degree Education, probably limited
Profession Religion, Catholic
Habits, Not intemperate
Nativity, Germany —
Physicians Committing, D. Greenlee & A. Ames
Correspondents, John York Jr. Mpls, Minn.
Family Physician not known

No. for Year, 167.
Insane Relatives, not stated
Cause Exciting, softening of the brain
Cause Predisposing, not stated
Form, general paresis
Accompanying Bodily Disorder, none known
Suicidal or Not, Unknown
Date of this Attack, probably about a year ago
Duration, probably about a year
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 67 years
Time of Leaving, 14th August 1895
Time in Hospital, 1 year 7 mos & 25 DS.
Result, Died: Chronic general paresis.

EXAMINATION ON ADMISSION.

Evid by Dr. Phelps & Herzog. Dec 23/93. MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, yes
Depressed,
DELUSIONS:
Systematized or Not, none detected
Special Subjects,
Transitory or Not,
HALLUCINATIONS: none noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Incoherent
Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:
Examination conducted under some difficulty, as he does not seem to understand what is wanted of him. & he is unable to express himself intelligently. Is very emotional, crying at times, during examination. Mental state & general symptoms seem markedly paretic. Motor symptoms, particularly in legs, - are not so marked as would generally be expected. Gait somewhat paretic - & spastic.

Personal and Medical History of John York

John Johann Yorks
16 Ward 2
1
York
DD

Sample of handwriting
Dec 23/93

John York age 68 yrs
Son states was taken with paralysis Aug 17th 1893 and has been aphasic since that time
Scar over eye is from a kick by a horse received in 1874

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

WEIGHT, 150 lbs. NUTRITION, fair.
...ium-vaginum —
...depressed fracture of frontal bone over right eye. Cannot find out from him the cause. Injury fingers
Coatings, Yellowish white, moist, Promptness Movement, sluggish
Size, left contracted; right normal.
...h Accommodation, sluggish.

...ared —
...much impaired. Digits to nose, eyes shut, some inaccuracy. —
..., eyes shut fair. G. ... ly. Fairly good.

John York. Vol. 25.
...f 1893 having been declared
...is patient was recommitted.
...'s in box file in vault with

...unable to express himself. Slurred, yes; stumbles on syllables; repeats ...
...what paretic —

...ormal
...nds are normal

	Clean,	Careless,
APPETITE, Good,	Constipated,	Irregular,
	Medium,	Poor,
SLEEP, Good, Does not kept	Poor,	Irregular,
PULSE,	RESP.,	TEMP.,
CRANIAL MEASUREMENTS,		

HISTORICAL.

LENGTH OF INVASION, probably long ONSET GRADUAL OR SUDDEN, —
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of John Yo (Johann)

HERBERT, FISCAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3597.
Residence, Soldiers Home, Hennepin County.
Date Admission, 20th December 1893.
Admitted by, D. Phelps Hour, 7 PM
How Sent, John A. Steele, Jof P, Hennepin County
Sex, Male
Age, 68 years old
Civil Condition, widowed
Children, 2 sons
Age Youngest Child,
Occupation, Butcher
Degree Education, probably limited
Profession Religion, Catholic
Habits, Not intemperate
Nativity, Germany —
Physicians Committing, D.K. Greenlee & Asst
Correspondents, John York Jr. Mpls.
Family Physician not known

No. for Year, 1
Insane Relativ
Cause Excit
Cause Pr
Form,
Acc
S
ago
895
+ 25 DS.
Annual paresis.

EXAMIN ON.
Exd by Dr Phelps & Herzog. Dec 23/93

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events,
Recent Events, Poor
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dulled
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State, Poor
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Examination conducted under some difficulty, as he does not seem to understand what is wanted of him. & he is unable to express himself intelligently. Is very emotional, crying at times, during examination. Mental state & general symptoms seem marked by paretic. Motor symptoms, particularly in legs, are not so marked as would generally be expected. Gait somewhat paretic-spastic.

ATE:
Exalted, yes
Depressed,
DELUSIONS:
Systematized or Not, none detected
Special Subjects,
Transitory or Not,
HALLUCINATIONS: none noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Incoherent
Voluble or Reticent,

Personal and Medical History of John York

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5½ WEIGHT, 150 lbs. NUTRITION, fair.
WOUNDS OR ABNORMALITIES, has 9 gunshot wounds — large depressed fracture of frontal bone, no right eye. Cannot find out from him the cause. Fingers frozen
TONGUE, Tremors, marked fibrillary Coatings, yellowish white attack, anemic, tongue Promptness Movement, sluggish
PUPILS, Equality, unequal Size, left contracted; right normal.
Response Light, sluggish Accommodation, sluggish.
SIGHT, probably impaired
HEARING, probably impaired —
COORDINATION, Arms, not very much impaired. Finger to nose, eyes shut, some inaccuracy. —
Legs, Standing, eyes shut [illegible] fairly good.

Case No. 3597. John York. Vol. 25.

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, yes; unable to express himself Slurred, yes; stumbles over syllables; repeats &c —
FACIAL EXPRESSION, somewhat paretic —
SENSIBILITY,
HEART, Sounds normal
LUNGS, Sounds are normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably long ONSET GRADUAL OR SUDDEN, —
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of John York (Johann)

ROBERT, PUGLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3597.
Residence, Soldiers Home, Hennepin County.
Date Admission, 20th December 1893.
Admitted by, D. Phelps Hour, 7 PM
How Sent, John St. Steele, Jof C, Hennepin County
Sex, Male.
Age, 68 years old
Civil Condition, widowed
Children, 2 sons
Age Youngest Child,
Occupation, Butcher
Degree Education, probably limited
Profession Religion, Catholic
Habits, Not intemperate
Nativity, Germany
Physicians Committing, D.R. Greenlee & A.A. Ames
Correspondents, John York Jr. Mpls, Minn.
Family Physician not known

No. for Year, 16
Insane Relatives,
Cause Exciting,
Cause Predispos
Form, gen
Accompanyi
Suicidal or
Date of th
Duratio
No. of
No. r

EXAMINATION OF

Exd by Dr Phelps & Herzog Dec 28/93. MENTAL CHARAC

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Poor
Recent Events, Poor
Special Subjects, Poor
PERCEPTIVITY:
Alert or Dull, Dulled
Correct or Illusive,
REASONING POWER:
Ordinary Subjects, Poor
Own Mental State, Poor
Special Subjects, Poor
GENERAL DESCRIPTIVE REMARKS:
Examination conducted under some difficulty, as he does not seem to understand what is wanted of him. & he is unable to express himself intelligently. Is very emotional, crying at times, during examination. Mental state & general symptoms seem markedly Paretic. Note symptoms, particularly in legs, are not so marked as would generally be expected. Gait somewhat paretic – spastic.

Depressed,
DELUSIONS:
Systematized or Not, none detected
Special Subjects,
Transitory or Not,
HALLUCINATIONS: none noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Incoherent
Voluble or Reticent,

Personal and Medical History of John York

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5½ WEIGHT, 150 lbs. NUTRITION, Fair.
WOUNDS OR ABNORMALITIES, has genu-varum – large depressed fracture of frontal bone, r. side right eye: cannot find out from him the cause. Index finger
TONGUE, Tremors, marked fibrillary Coatings, yellowish white, coarse Promptness Movement, sluggish
PUPILS, Equality, unequal Size, left contracted; right normal.
Response Light, sluggish Accommodation, sluggish.
SIGHT, probably impaired
HEARING, probably impaired
COORDINATION, Arms, not very much impaired. Finger to nose, eyes shut, some inaccuracy.
Legs, Standing, eyes shut, fairly steady. Turning quickly, fairly good.
TREMORS, Hands, Tongue, marked fibrillary
Facial Muscles, General, tonic
REFLEXES, Patellar, Equal, about 8 – Dr Ph Steele –
Other Reflexes,
ARTICULATION, Hesitating, yes; unable to express himself Slurred, yes; stumbles over syllables; repeats &c
FACIAL EXPRESSION, somewhat paretic –
SENSIBILITY,
HEART, Sounds normal
LUNGS, Sounds as normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Record kept Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably long ONSET GRADUAL OR SUDDEN, –
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of John York

1893 LEBERT, FOELLER & CHAMBERS, DAVENPORT, IOWA.

An old soldier, was brought here by Deputy Sheriff James Sturis, with the following history of case. As to consanguinity not known; as to heredity no answer obtained. This is 1st attack. Symptoms appearing probably about a year ago, by becoming unable to articulate, or to know what he was doing. Disease seems increasing; is not variable; no rational intervals. Some kidney derangement now manifested, examining Physician unable to find out as he cannot talk in his native language, or any other. He is very much demented. Is not disposed to injure others. As to suicidal propensities, not known. Habits not filthy or destructive. There is no history of intemperance nor of any severe disease or injury to head. Has merely been watched as he is inclined to wander away from Home. Supposed cause of the disease is softening of the brain. Has had no medical treatment. On personal examination, he attempts to talk, but seems to have no idea what he wants to say. Makes no intelligent responses to questions. Is restless & constantly on the go. From other sources, nothing can be learned about him, definitely, except that he was alright, apparently, about 1 year ago.

Dec 20 Dec 20/93. On admission, was put on B3. (S.R. Complexion light; hair brown; eyes blue; condition of skin good. Has several moles on back and tattoo upon right arm. Bodily condition dirty. Behavior good).
" 21 Pulse 78. Dec 21/93. Restless, sleeping but 6 hours, last night. MM. Pulse 76. R. 16. T. @ 99.6. Appetite good; bowels free; no cough noticed. Is stupid; very dirty & filthy; tries to talk but attendant cannot understand him. PM. Pulse 74. R. 17. T. @ 99.8. No complaints or injuries to report.
" 22 Dec 22/93. Slept 6 hours last night; was restless for about 2 hours. MM. Pulse 70. R. 16. T. @ 99.2. Appetite good. Habits very filthy.
" 23 PM. Pulse 72. R. 18. T. @ 99.4. Dec 23/93. Again, rested and slept poorly, last night. MM. Pulse 76. R. 18. T. @ 98.8. Appetite good. Walks some about hall in a dull, aimless way. Examination, today, in office, mental state and general symptoms seemed markedly Paretic. PM. Pulse 72. R. 20. T. @ 99.2.
" 24 Dec 24/93. Seems about the same, from day to day. Dull, stupid & habits very dirty. Talks some, but he cannot be understood.
" 25/26 Dec 25/93. MM. Pulse 70. Dec 26/93. MM. Pulse 78. Patient has been resting somewhat better the past few nights, but he has become so dirty in his habits that it was deemed necessary to move him to B3, today.
" 27 Dec 27/93. Appetite good. Bowels seem regular.
" 28 Dec 28/93. MM. Pulse 78. T. @ 98.6. Is quite restless; also stubborn. Will not keep his clothing in shape.
" 29 Dec 29/93. MM. " 84 " 99.2. Restless; walking the floor a good deal of the time; filthy in his habits.
" 30/31 Dec 30/93. MM. " 75 " 98.6. Appetite good; bowels regular. Dec 31/93. Restless & disturbed, sleeping only 2 hours, during last night (restless 7 hours). MM. Pulse 78. T. @ 99.4. Still very restless by day. Does not seem to realize anything. Appetite keeps good. Bowels regular.

1894
Jan 1 Jan 1/94. Slept but 3 hours, was restless for 6 hours, last night. MM. Pulse 90. T. @ 98.6. Appetite fairly good.
" 2/3 Jan 2/94. Slept well, last night. Jan 3/94. Again, rested and slept well, last night. Appetite continues good. Conduct and behavior by day do not change any. He is still very dirty in personal habits. —
" 9 Wt 149 pds. Pulse 74. Jan 9/94. Appetite good; bowels regular. Talk cannot now be understood.
" 31 Habits are occasionally dirty. Transferred, today, to B1st. — Jan 31/94. No change to note.
Feb 1/per Feb 1/94. Wt 150 pds. Pulse 72. Feb 27/94. Appetite good; bowels regular. No complaints or injuries to report. Is well-behaved. Speech is unintelligible. Habits are clean. Physical health is good.
" 24 Feb 24/94. This patient was committed here under the "Law of 1892" recently declared unconstitutional. He was, today, Taken out and returned under "Mesne Warrant" from Muscatine Co.
" 26/28 Feb 26/94. Patient was vaccinated, today. Feb 28/94. Appetite good. Bowels normal. No cough noticed.

Personal and Medical History of John York.

1894 Cont'd
Feb 28 Patient appears to be in fairly good health, altho' he, at times, complains of pain in the head. Is quiet and harmless. Speech consists of mutterings, & murmurs, which are quite unintelligible. Is very childish and weak-minded. Is cleanly in habits when he has easy access to W.C. & on this account is allowed to sleep on the floor. —
Mar 1/31 March 1/94. Wt 150 pds. Pulse 68. March 31/94. No material Change to note. from above — (See attached slip on page 366, from letter from his son of date of 3/22). —
Apl 1/14 April 1/94. Wt 152½ pds. Pulse 70. April 14/94. Patient was, this morning, seized with a Convulsive fit, which lasted about 2 minutes. The fit was characterized by extreme rigidity of the legs and arms; the face assumed a livid color; the breathing was labored, & during the latter part of the fit, stertorous. The fit was much like an of Epilepsy, but the long in-drawn breathing
" 30 and usually "Squeaky noise"; generally present in an epileptic fit, was absent. April 30/94. Appetite is fair; bowels regular. No Cough noticed. Is quietly behaved. He has some complaints (possibly groundless) which he wishes to make, but he cannot make himself understood. Talks in an unintelligible manner & is evidently weak-minded. He is cleanly in his personal habits. —
May 1/per May 1/94. Wt 152 pds. Pulse 74. May 2/94. Received some scratches on nose & face today; manner unknown.
" 20 May 20/94. Was today seized with an epileptic & convulsive fit, lasting about four Minutes.
" 29 May 29/94. Patient had a fit today which lasted about 14 minutes, before he regained Con. & Circumstances.
" 31 May 31/94. No special Change to report since general note of last month. Has "Lying spells". Habits Clean.
June 1/per June 1/94. Wt 156 pds. Pulse 74. June 30. Patient about the same, mentally & physically.
July 1/per July 1/94. Wt 158 " " 70. July 5/94. Had a fit this morning of an Epileptic Character.
" 31 July 31/94. Patient's condition has not perceptibly changed, in any respect, during month.
Aug 1/per Aug 1/94. Wt 157 pds. P 72. — Aug 7/94. Patient, today, had quite a severe Convulsion which lasted for fully 10 minutes, before he entirely regained Consciousness. Appetite is fair; bowels free; appears in good health, for him. — Is quiet & well-behaved. Makes no Complaints. Talks in a Childish manner & cannot be understood. Is very feebleminded. Habits are cleanly
" 31 about his person but he wets his bed-room floor at night. Aug 31/94. About the same.
Sept 1 Sept 1/94. Wt 157 pds. P 80. — He had a severe fit at the dinner-Table & has been sick
" 2 all afternoon — refused Supper. Sept 2/94. Sick, in bed & took very little breakfast.
" 3 Sept 3/94. Patient still in bed. Appetite very poor. Is often seized with sudden, Jerky Spasms of
" 4/5 pain. P 83. R 22. Sept 4/94. Refused food. P 82. R 21. Sept 5/94. Takes very little food. P 78 R 23.
" 6/7 Sept 6/94. Seems improving. P 76. R 21. Sept 7/94. Sufficiently well to be sent a ward, to day. Appetite
" 10 has returned. Sept 10/94. Seems quite recovered from this recent attack. Today Transferred to B3.
" 30 Sept 30/94. General condition about the same as described in above note of Aug 7th Wt. —
Oct 1 Oct 1/94. Wt 148 pds (lost some during this recent sickness). P 81. One convulsion reported as occurring during the night. Oct 9/94. One convulsion during the day. Oct 28/94. Did not eat
" 9/28 any supper. Said "he did not feel well" — went to bed right after supper — Oct 29/94. Remained
" 29 in bed, this morning. P. 73. T. @ 98.6 — Right Side of face seems paralyzed, one pupil larger than the other, & look slightly distracted. Oct 30/94. Patient appears much better this morning —
" 30 Oct 31/94. Patient still remains in bed, but appears to be improving — Appetite fairly good; bowels
" 31 apparently regular. Otherwise general condition remains about the same. Was 4 Days dirty during month.

(Carried to Transfer Book A page 3)

Personal and Medical History of Charles Scholtz

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3598.
Residence, Soldiers Home, Hennepin Co
Date Admission, 20th December 1893.
Admitted by, D. Phelps Hour, 7 PM
How Sent, John A. Steele Jof P. Hennepin County
Sex, Male
Age, about 55. Ha states 48
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, not stated
Profession Religion, not given
Habits, not known
Nativity, Germany (parents also born there).
Physicians Committing, O. R. Greenlee & A. A. Ames
Correspondents, Wm Scholtz (father) Helena, Scott Co Minn

No. for Year, 168.
Insane Relatives, not known
Cause Exciting, not given
Cause Predisposing, previous attacks
Form, dementia
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, not known
Date of this Attack, not stated
Duration, has been in Asylum a number of years
No. of Attack, not 1st
No. of Admissions, 1st here
Age First Attack, not given.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog Dec 23rd 93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, seems good
Recent Events, Quite good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, fairly alert
Correct or Illusive, correct
REASONING POWER:
Ordinary Subjects, Poor
Own Mental State, very poor; does not realize own condition
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent, yes
Exalted,
Depressed,
DELUSIONS:
Systematized or Not,
Special Subjects, } none brought out
Transitory or Not,
HALLUCINATIONS: none noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent, as far as it goes
Voluble or Reticent, reticent

GENERAL DESCRIPTIVE REMARKS:
States he was in St Peter Hospital from 1869 to 1891: then was at Soldiers' Home for 2 years; then sent here. Is restless, keeping his legs in motion; he has probably been this way for some time. Patient is quite stupid & listless.

Copy of Notice of hearing petition for appointment of Johanna Scholz as guardian for Charles Henry Scholz
Send upon Dr. Kilbourne May 21/98
Paper filed with Commitment papers.

Case No. 3598 Chas. Scholtz or Schulz 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.

...SION.—(Continued.)
...S.
NUTRITION, fair
Promptness Movement, prompt
normal
, normal
HEARING, normal
COORDINATION, Arms, quite good. Finger to nose, eyes shut, quite good.
Legs, some very slight ataxia of legs. Standing, eyes shut, quite steady. Turning quickly, poor

FACIAL EXPRESSION, rather stupid.
SENSIBILITY,
HEART, seems normal
LUNGS, seems normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, previous attack
HEREDITY (Specify—"Insanity," Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,
} No history of heredity obtained. —

Personal and Medical History of Cha

Whole No. 3598.
Residence, Soldiers Home, Hennepin Co
Date Admission, 20th December 1893.
Admitted by, D. Phelps Hour, 7 PM
How Sent, John A. Steele Jof C. Hennepin County
Sex, Male
Age, about 55. He states 48
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, not stated
Profession Religion, not given.
Habits, not known
Nativity, Germany (Parents also born
Physicians Committing, D. R. Greenlee & A. A
Correspondents, Wm Scholtz (Father) Helena, Penn Co Minn

Ins.
Cause Excit.
Cause Predisposing,
Form, dementia
Accompanying Bodily Disorder, none
Suicidal or Not, not known
Date of this Attack, not stated
Duration, has been in Asylum a number of years
No. of Attack, not 1st
No. of Admissions, 1st here

EXAMINATION ON ADMISSION.

Exd by D. Herzog Dec 26/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, seems good
Recent Events, Quite Good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, fairly alert
Correct or Illusive, correct
REASONING POWER:
Ordinary Subjects, Poor
Own Mental State, very poor; does not realize own condition
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent, yes
Exalted,
Depressed,
DELUSIONS:
Systematized or Not,
Special Subjects, none brought out
Transitory or Not,
HALLUCINATIONS: none noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent, as far as it goes
Voluble or Reticent, reticent

GENERAL DESCRIPTIVE REMARKS:
States he was in St Peters Hospital from 1869 to 1891: then was at Soldiers' Home for 2 years; then sent here. Is restless, keeping his legs in motion; he has probably been this way for some time. Patient is quite stupid & listless.

Personal and Medical History of Charles Scholtz

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7½ WEIGHT, 155 lbs. NUTRITION, fair
WOUNDS OR ABNORMALITIES, none
TONGUE, Tremors, fibrillary Coatings, pale, anaemic Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, sluggish Accommodation, normal
SIGHT, Good
HEARING, normal
COORDINATION, Arms, quite good. Finger to nose, eyes shut, quite good.
Legs, somewhat slight ataxia of legs. Standing eyes shut quite steady. Turning quickly, poor
TREMORS, Hands, slight Tongue, fibrillary
Facial Muscles, General, none —
REFLEXES, Patellar, equal — about 5; sluggish
Other Reflexes,
ARTICULATION, Hesitating, somewhat Slurred,
FACIAL EXPRESSION, rather stupid.
SENSIBILITY,
HEART, Sounds normal
LUNGS, Sounds normal
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Records kept Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, previous attack
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, no history of heredity obtained. —
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Charles Scholtz

EGBERT, FULTON & CHAMBERS, DAVENPORT, IOWA

1893

An old Soldier, was received here at the hands of Deputy Sheriff James Hines, with following history. As regards consanguinity and heredity, nothing known. This is not 1st attack; he has been in an Insane Asylum several years (when or where not stated). No particulars given as to when first symptoms of this attack were manifested or in what way. Disease seems stationary. He is nervous; at times, worse; always restless, day & night, and shows marked dementia. Derangement is now shown by his pounding his pillow at night; jumping out of bed & taking a bath; stealing and hiding things; destroying clothing & burning everything he takes a notion to. Patient is not disposed to injure others. As regards suicide, not known. As to severe disease or injury to head, or as to intemperance nothing known. Supposed cause of the disease is not given. He has had no treatment except for acute rheumatism last September, of which he wholely recovered.

Dec 20 — Dec 20/93. On admission, was put on B3. (S.R. Complexion light; hair brown; eyes blue; condition of skin good. Bodily condition clean. Has large veins in legs below the knee. Behavior is good.) T 99.8.

" 21 — Dec 21/93. Quite restful, sleeping 7 hours, last night. AM. Pulse 82. T 99.6. Appetite good. Bowels free. No cough noticed. Well-behaved. Walks quietly about the hall. Answers questions freely. Talks some with his fellow-patients. No delusions noted. PM. Pulse 86. T 99.8. No complaints or injuries to note.

" 22 — Dec 22/93. Again slept well (8 hours), last night. AM. " 80 " 98.8. Quiet and well-behaved.

" 23 — PM. Pulse 84. T 99.4. Dec 23/93. Restless for 2 hours, but slept 6 hours, last night. AM. Pulse 78. T 98.6. Conduct & behavior about as usual. No delusions yet noted. PM. Pulse 88 T 99.2. On examination in office today, was quite stupid & listless; mental activity sluggish & confused.

" 24 — He has, probably, been this way for some time. Dec 24/93. Slept 4 hours, restless 4 hours, last night.

" 25 — AM. Pulse 78. Dec 25/93. AM. Pulse 76. Appetite good. Works some. Makes no complaints.

" 26 — Dec 26/93. AM. Pulse 78. Quiet & well-behaved. Talks only when addressed. Goes walking with the rest.

" 27 — Dec 27/93. AM. " 74. Answers questions quite freely. In other respects about the same, from day to day.

" 28 — Dec 28/93. Since last noted, has been sleeping about 7 hours, on each of past few nights. Is always quiet & well-behaved. Seems quite contented here.

" 31 — Dec 31/93. Has been quite restless the past 2 nights. Sleeping only 4 or 5 hours on each. Appetite good. Quiet & well-behaved. Pulse about normal. Walks slowly and aimlessly about hall. Talks when addressed, answering questions fairly promptly.

1894

Jan 1 — Jan 1/94. Slept very poorly last night; was restless 4 hours or so. Jan 2/94. Wt, today, 166 pds (a gain of 5 pds)

" 3 — Jan 3/94. Continues now a less restless at night, sleeping, however, 5 or 6 hours, each. Continues quiet and well-behaved by day. Otherwise, no perceptible change. Jan 18/94. Continues about as usual. Was, today, transferred to D. East. Jan 31/94. Walks the floor a good deal. Seldom speaks. Does not change any.

" 18

" 31

Feb 10 — Feb 10/94. Is quiet, harmless & patient; always moving about in a dull, slow way. Speaks only when spoken to. Quite neat in dress. Does no work. Health is good.

" 24 — Feb 24/94. This Patient was Committed here under the Laws of 1893 recently declared unconstitutional. He was, today, Taken out and Returned under new warrant from Olmsted County.

" 28 — Feb 28/94. No change observable at this date.

Mar 10 — Mar 10/94. Lives along quietly & contentedly here. Walks the floor, leisurely, a good deal of the time. Amuses himself by taking the buttons off his coat & replacing them. Health seems good. Does no work.

" 31 — March 31/94. Continues about as usual. Of late, has been working in kitchen, a part of each day. Was vaccinated, successfully, on 29th Inst. Habits are clean.

Personal and Medical History of Charles Scholtz

1894

Apr 2/30 — April 2/94. Keeps in good physical condition. April 30/94. Condition remains unchanged. Still works some in the kitchen. Seems quite happy & contented here. Habits are clearly—

May 31 / June 30 / July 31 / Aug 31 / Sept 30 / Oct 31 — During this period, Patient has been generally quiet & well-behaved. He works daily in the main kitchen; when on ward, wanders aimlessly about, prying into everything—He talks a little, but irrationally. Habits clean; dress neat; health apparently good. Contented. During these three months, he has appeared discontented—restless & uneasy while on the ward. Talks a little, but irrationally. Habits clean; dress neat. Health is apparently good. For some months past, works in main kitchen. Has a way of wandering aimlessly about.

Nov 10/30 — Nov 10/94. Keeps in quite good physical condition. Nov 30/94. Quiet, but rather nervous & restless, at times; talks irrationally. Does no work at present, on account of sore eyes. Dec 31/94. About the same.

Dec 31 1894 / Jany 1 — Jany 2/95. Eyes have somewhat improved in condition & he has returned to work in the main kitchen—

" 31 — Jany 31/95. Generally, in about the same condition, both mentally & physically. Habits are clean.

to — During this quarter, nothing specially noticable. He is quiet. Works in main kitchen, daily.

Apl 30 — Speech rather irrational. Habits clean. Fairly tidy in dress. Health apparently good.

May 1 / June — During this period, patient's condition, both mentally & physically, has been about the same, as for several months past. He has been quiet & well-behaved. Sometimes will not talk: again, speech is rather irrational. Habits clean; health good. He works in main kitchen.

July 31 / Aug / Sept / Oct 31 — During this quarter, no change to note. Continues quiet & well-behaved: dull & uninterested. Does not talk much. (During latter part of Aug, was laid up, part of time in bed, with lame back). Works steadily in the kitchen. Health seems good. Nov 4/95: Wt 165 pds. Pulse 88

Nov 4 / Dec / Jan 31/96 — Nov-Dec to Jan 31/96. No change noted, during this period. Works in kitchen: health is good—

Feb 4 / March / to Apl 30 — Feb 4/96. Wt 165 pds. 850. Feb. March & to Apl 30/96. Condition about same, all the time. Quiet: rather stupid: works in main kitchen: talks some, but incoherently. Habits clean: dresses tidy: health good.

May 1/96 — Summary Nurses Notes by Dr. Phelps. Quiet: usually well behaved: works in kitchen: is peculiar in behavior but causes little trouble: talks in an imbecile way: No physical illness noted. Wt. 158 lbs. Aug 31/97 Wt 160# Oct 31 Health fairly good: No change in manner: Talks in a foolish rambling way: Works in kitchen: Complains occasionally of rheumatism. Jan 31/99 Still in kitchen: No change. Feb-July 31/99 (Dr. Raimo) Works in kitchen, Wt. about 150#. No change in condition Aug-Jan 31/1900. (Dr Chapple) Wt. 149# No change during period. Physical condition good except for varicose veins. Is very demented & senile: habits rather untidy: Still in kitchen.—

Jany 31 1900 / Feby 1 — Wt 150# 966. March 31. No change noticeable, in any way. Still works in kitchen

July 30/31 — July 30. Vaccinated; result negative. July 31. No change to note, during period. Physical condition fair. Appetite, sleep & behavior good. Is slouchy in habits: works about the kitchen. Very demented: silly in manner. Augs. Wt 149# 984. Sept 10. Transferred to D3—

Aug 1 1901 / Jan 31 — No change noted, during the period. Works regularly in kitchen: health fairly good. Is very demented: habits rather untidy, behavior quiet. Feby 1. Wt 152# Wt 149#: Augt 1. Wt 145#: Nov 1. Wt 151#. Jany 31/02. Has worked regularly in kitchen, during

Feby 1 1902 / July 31 — Year: is very demented: quiet: harmless individual. habits rather untidy. July 31/02. Works in kitchen: habits rather untidy: is very demented: health rather poor. Jany 31/03. Works in

July 31 1903 / Jany 31 — kitchen: is rather slovenly: in rather poor physical health: no illness noted.—

Personal and Medical History of Robert Ennis

EGBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3601.
Residence, Farmington, Minnesota
Date Admission, 22nd December 1893.
Admitted by, D. Phelps Hour, 4 P.M.
How Sent, Thomas P. Moran, Jo. P. Dakota Co.
Sex, Male
Age, 60 (about).
Civil Condition, Single
Children,
Age Youngest Child, —
Occupation, (Retired) —
Degree Education, moderate —
Profession Religion, Episcopalian
Habits, not known
Nativity, England (Parents also born there)
Physicians Committing, J. Caldwell & W. M. Dodge.
Correspondents, Wm Ennis, Fremont, Minn.
No family Physician —



No. for Year, 171.
Insane Relatives, unknown
Cause Exciting, not known
Cause Predisposing, previous Attack
Form, dementia
ompanying Bodily Disorder, Paralysis Agitans
idal or Not, Not.
e of this Attack, gradually getting worse since left St Peter
ation, several years
of Attack, 2nd probably
of Admissions, 1st Time (was at St Peter in 1895)
First Attack, about 4 yr.
ne of Leaving,
ne in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exd by Dr Herzog - Dec 25/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Recent Events, Special Subjects, } Impaired, markedly.
PERCEPTIVITY:
Alert or Dull, Dulled
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Own Mental State, Special Subjects, } Faulty

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Somewhat
Depressed,
DELUSIONS:
Systematized or Not, None brought out
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Markedly incoherent
Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:
Admits having been in St Pete Hospital. Does not seem to know how long he remained there, nor why he was sent there. Does not know why he was sent here. "Tales of their peculiarities, he supposes." Talks in a rambling way, of his being in the East; Coming out here; of relatives &c: of taking Care of them, while sick; working hard &c. &c.

Personal and Medical History of Robert Ennis

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8½ WEIGHT, 141 lbs. NUTRITION, Poor - oedema; ? Cyanosis ? Dyspnoea
WOUNDS OR ABNORMALITIES, None noted
TONGUE, Tremors, fibrillary twitchings Coatings, none Promptness Movement, Prompt
PUPILS, Equality, Equal Size, Normal
Response Light, Yes, Slight + somewhat sluggish Accommodation, Yes; Slight
SIGHT, somewhat impaired
HEARING, somewhat impaired
COORDINATION, Arms, Slight impairment. Fingers to nose, eyes shut, somewhat inaccurate.
Legs, Standing, eyes shut, fairly steady. Gait somewhat staddling.
TREMORS, Hands, marked (in a slight degree, on attention) Tongue, fibrillary twitchings
Facial Muscles

Case No. 3601. Robert Ennis. 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.

SENSIBILITY,
HEART, mitral regurgitation (?)
LUNGS, Seem to be all right
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Previous attacks
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Robert Ennis

GIBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3601.

Residence, Farmington, Minnesota

Date Admission, 22nd December 1893.

Admitted by, W. Phelps Hour, 4 P.M.

How Sent, Thomas O. Moran, Jof P. Dakota Co.

Sex, Male

Age, 60 (about).

Civil Condition, Single

Children,

Age Youngest Child, —

Occupation, (Retired) —

Degree Education, moderate —

Profession Religion, Episcopalian

Habits, not known

Nativity, England (Parents also born

Physicians Committing, J. Caldwell & W. M.

Correspondents, Wm Ennis, Fairmount,

No family Physcn —

No. for Year, 171.

Insane Relatives, unknown

Cause Exciting, not known

Cause Predisposing, previous Attack

Form, dementia

mpanying Bodily Disorder, Paralysis Agitans

idal or Not, not.

of this Attack, gradually getting worse since left St Pete

ation, several years

of Attack, 2nd probably

of Admissions, 1st time (was at St Peter in 1895)

First Attack, about 4yr.

e of Leaving,



EXAMINATION ON ADMISSION.

Exd by Dr. Herzog - Dec 25/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Recent Events, Special Subjects, } Impaired, markedly.

PERCEPTIVITY:

Alert or Dull, Dulled

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Own Mental State, Special Subjects, } faulty

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Somewhat

Depressed,

DELUSIONS:

Systematized or Not, none brought out

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, markedly incoherent

Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:

Admits having been in St Pete Hospital. Does not seem to know how long he remained there, nor why he was sent there. Does not know why he was sent here. "Tales of their peculiarities, he supposes." Talks, in a rambling way, of his being in the East; Coming out here; of relatives &c: of taking Care of them, while sick; working hard &c &c.

Personal and Medical History of Robert Ennis

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8½ WEIGHT, 141 lbs. NUTRITION, Poor - oedema; of eyelids puffiness,

WOUNDS OR ABNORMALITIES, none noted

TONGUE, Tremors, fibrillary twitching Coatings, none Promptness Movement, Prompt

PUPILS, Equality, Equal Size, normals

Response Light, Yes, slight + somewhat sluggish Accommodation, Yes; slight

SIGHT, somewhat impaired

HEARING, somewhat impaired

COORDINATION, Arms, slight impairment. Fingers to nose, eyes shut, somewhat inaccurate.

Legs, Standing, eyes shut, fairly steady. Gait somewhat staddling.

TREMORS, Hands, marked (in a slight degree, on attention to same) Tongue, fibrillary twitchings

Facial Muscles, some slight General, marked.

REFLEXES, Patellar, Equal; absent; even on reinforcement

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART, mitral regurgitation (?)

LUNGS, Seem to be all right

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Fair Medium, Poor,

SLEEP, Good, Fair Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, Previous attacks

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

SIBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by Deputy Sheriff D. H. Brownell with following history. As to Consanguinity not known, nor as to heredity. This is not 1st attack. On Dec 8th 1875, he was adjudged insane and was Committed to the St Peter Asylum; not know how long there; was benefitted but not cured. He has been gradually getting worse since discharged. Disease is increasing, but is variable & there are rational intervals: he is very nervous; irritable at times; has paralysis Agitans". Derangement was shown by being morose; refuses to talk; gets excited on questioning and is incoherent. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. As to any history of intemperance, not known. No Epilepsy, convulsions or head injury known of. Cause of disease not known. Has had no medical treatment. On personal examination, patient is found to be easily excitable; unable to control actions; incoherent language; unable to concentrate thought; irregular hallucinations, interrupted by periods of intelligence. Did not say much of anything; disconnected talk when attempting to answer questions. Manner tractable. From others, we learn that, at times, he has hallucinations of being in presence & walks the streets, muttering to himself. He is irresponsible & unable to care for himself.

Dec 22 — Dec 22/93. On admission, is in fair physical condition. Was put on B3 (SR. Complexion light; hair gray; eyebrows; condition of skin good. Bodily condition, clean; seems depressed; was crying). no marks, Scars, bruises, eruptions or ulcers noticed. Dec 23/93. Was quiet and slept 8 hours, last night. MM. Pulse 90. R 20. T. 99. Appetite fairly good; bowels moved. No cough observed. Is quite nervous and restless; walks the floor mostly all the time. There is incoherence of Speech. No complaints or injuries to note.
" 24 — Dec 24/93. Rested & slept well, (9 hours), last night. MM. Pulse 78. Tm 100·2. Appetite good; bowels regular.
" 25/26 — Dec 25/93. Again slept well, last night. MM. Pulse 96. Dec 26/93. Restless a short time last night, but, on the whole, slept well. MM. Pulse 66. Dec 27/93. MM. Pulse 72. Tm 99.6. very nervous still; also quite restless, walking the hall, a good deal of the time.
" 27 — Dec 27/93. MM. Pulse 72. Tm 99.6. very nervous still; also quite restless, walking the hall, a good deal of the time.
" 28 — Dec 28/93. MM. Pulse 84. Tm 101. Bowels regular.
" 29/30 — Dec 29/93. MM. Pulse 90. Tm 98·8. Dec 30/93. Appetite good; bowels regular. Sleeps well, at night.
" 31 — Dec 31/93. Continues very nervous & restless; hardly ever sitting down.
1894 Jan 1 — Jan 1/94. Patient is about the same, from day to day. very nervous & at times, quite restless.
" 5 — Jan 5/94. Since last noted, patient has continued quiet and restful at night, sleeping well. Appetite has been good; bowels regular. Conduct & behavior, by day, do not change much, if any.
" 31 — Wt (in 3d Ward) 140 pds; a slight gain. Pulse 108. Jan 31/94. Appetite good; bowels regular. Has incoherence of speech; is quite nervous. Behavior good; habits clean.
Feb 1/28 — Feb 1/94. Wt 143½ pds. Pulse 92. Feb 28/94. No material change in his condition. Does not work any.
Mar 1/7 — Mar 1/94. Wt 143 pds. " 94. Mar 7/94. Patient was committed here under the law of 1893, recently declared unconstitutional. He was, Today, Taken out & returned under "recognizance" from Muscatine County.
" 10/31 — Mar 10/94. Visited by cousin, today. March 31/94. Appetite good; bowels regular. Is well-behaved. Very nervous. Talks incoherently. Does not work any. Habits are neat and clean. — — —
Apl 2/30 — April 2/94. Wt 143 pds. Pulse 70. April 30/94. Continues quietly behaved. Talks incoherently facts rather queerly, at times; says "he has a secret but does not want to tell it"; also talks a good deal of getting away from here. Is very nervous. Habits are cleanly. He does no work. —
May 1/14 — May 1/94. Wt 140½ pds. Pulse 96. May 14/94. Says his side is quite sore; was struck three days ago by another patient (Thomas Carroll). May 15/94. No special change to note in patient.

1894
May 1/31 — May 31/94. Was, today, transferred to A. East. May 31/94. No noticeable Change during month.
June 1/30 — June 1/94. Wt 140 pds. Pulse 78. June 30/94. Keeps about the same from month to month. Is very nervous: walks back & forth a hall most of time; Does not work any. Habits are clean.
July 2/31 — July 2/94. Wt 140 pds. Pulse 80. July 31/94. General note for past few months. Still hold good. —
Aug 1/31 — Aug 1/94. Wt 141 " " 78. Aug 31/94. No special change noticeable in his condition.
Sept 4/30 — Sept 4/94. Wt 141 " " 80. Sept 30/94. Restful & sleeps well, at night. Appetite good. Well behaved — though very nervous & restless; walks the floor, from morning till night. Has some silly ways, laughing & talking to himself, making motions with hands. Health seems quite good.
Oct 1/31 — Oct 2/94. Wt 144 pds. Pulse 92. Oct 31/94. No change to report upon, for this month. —
Nov 1/30 — Nov 1/94. Wt 154½ " " 80 (has increased 13½ pounds in weight, in past month). Nov 30/94. Appetite Good; behaves well; is very nervous; walks the floor, all the time; motions with his hands, while walking, laughing & talking to himself. Dec 3/94. Wt 150 pds. (Some loss, in past month)
Dec 3 / 30 — Pulse 80. Dec 30/94. No special Change in condition, to note, at this date. —
1895 Jan 3/31 — Jan 31/95. Wt 151½ pds. Pulse 90. Jan 31/95. Keeps about the same, all the time. Walks the floor 4 hours at a time. Cannot carry on a conversation without getting excited. Behavior quiet.
Feb 2/28 — Feb 2/95. Wt 154 pds. Pulse 92. Feb 28/95. No special Change. Quiet. Still shows delusions.
Mar 2/31 — March 2/95. Wt 150 " " 80. Mar 31/95. Does not change any. Always the same from month to month.
Apl 1/30 — April 1/95. Wt 158 " " 80. April 30/95. About the same. Does not do any work; says "he is forbidden by the Doctors". Talks & laughs to himself, all the time. Is restless, during the day.
May 2/ June 1/ July 3 — May 2/95. Wt 160½ pds. Pulse 92. June 1/95. Wt 162 pds. P 90. July 3/95. Wt 160 pds. P 84. July 31/95. About the same, all the time; No mental improvement noticed. Nearly always, talking to himself; very restless, walking nearly all the time. Does no work. Health seems quite good. —
Aug 5 — Aug 1/95. Wt 159 pds. Pulse 94:
Sept 2 — Sept 2/95. Wt 158 pds. Pulse 86.
Oct 1/31 — Oct 1/95. Wt 159 pds. Pulse 80.
Nov 2/4 — Refused & kept weighed 2/1: Says "he was not sent here, like other patients". Nov 2/95. Wt 158½ pds. Pulse 80. Nov 21/95. Got up, during night; fell & struck his head, causing him to faint; received a slight cut wound. Dec 3/95. Wt 161½ pds. P 80. Dec 31/95. No change mentally; is still nervous & easily excited.
Dec 3 / 1896 Jan 1/31 — Jan 1/96. Wt 164 pds. Pulse 84. Jan 31/96. Eats & sleeps well; restless; walks the floor a great deal & talks to himself; Does no work. Health seems quite good.
Feb 1 — Feb 1/96. Wt 164 pds. Pulse 78. —
Mar 2 — March 1/96. Wt 163½ pds. P 84.
Apl 1/30 — Apl 1/96. Wt 160 pds. P 80. Apl 30/96. Condition does not change any, mentally. He does not play any games or do any work. Very restless; walks the floor, all the time. Eats and sleeps well.
May 1/96 to Aug 1/97 — Summary Nurses Notes by Dr. Phelps — Patient always quiet & well behaved. Has hallucinations & delusions. Condition quite uniformly the same: Has considerable tremor a good deal like paralysis agitans altho not typically of that form. No change during period. Has complained of sore throat at times, otherwise no bodily illness. Wt. 160 to 174 lbs. Aug 31/97 162#. Still same as at of coming. Rather forgetful: Talks in a silly way. Rather tremulous but no more so than at time of coming. Jan 31/99 No change of importance during period.
Oct 31/97 — July 31/99. Wt. 154. Physical condition good. July 31 Seems quite nervous & restless. Aug 1 - July 31 Aug 1 Wt. 160. Quiet & well behaved. Seldom talks: Shows a coarse tremor due to senility Feb 1. Wt. 163. No change mentally. Physical condition good.
Feb 1 —

See folio 8.

Personal and Medical History of George A. Hayden

SUBERT, PUGLAN & CHAMBERS, DAVENPORT, IOWA



Whole No. 3602.

Residence, Steele County, Minn

Date Admission, 26th December 1893.

Admitted by, D. Kilbourne Hour, 11.45

How Sent, W. B. Gradwicks, Jof P, Stee

Sex, male

Age, 23.

Civil Condition, single

Children, —

Age Youngest Child, —

Occupation, Laborer

Degree Education, Common School

Profession Religion, not a church member

Habits, somewhat intemperate.

Nativity, Chickasaw Co. Iowa, (Parents born in Ireland).

Physicians Committing, J.H. Stoair & J.W. Roberts

Correspondents, (mother) Mrs Ann Hayden

Has no family Physician. Owatonna. Minn

, 1/7/

tives, Mother, probably

ing, Heredity

sposing, Heredity —

onic mania

ing Bodily Disorder, head mentioned

Not, not

Attack, about a year ago

about a year

k, 1st

ssions, 1st

Age First Attack, about 22.

Time of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

Exd by D. Herzog Dec 30/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, } Good

Recent Events, }

Special Subjects, }

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, in the main, Correct.

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, Defective

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Somewhat

Depressed,

DELUSIONS:

Systematized ~~or Not~~, of persecution

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, quite voluble

GENERAL DESCRIPTIVE REMARKS:

Tells the story of his being in St Charles, Iowa: then going to St Paul; thence to Montana; returning to Owatonna; officers following him to all these places, persecuting him: thinks these persons have the idea that patient knows something they desire to get it of him. Thinks it was a plot put through him to the institution. Believes some to be solely confined to close officials following him. None has attempted injure him nor does he suspect any of such intent. For the most of his stories of persecution he gives, reasonably, quite sufficient reasons for believing that the men were really following him; but he evidently believes that other men were following him, but is unable to give as good a reason why he has this belief. Therefore he withholds these decisions, in order to make a better impression.

Personal and Medical History of George A. Hayden

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 4 WEIGHT, 163 pds NUTRITION, very good.

WOUNDS OR ABNORMALITIES, some scars on body; says, from boils - when about 10 years old.

TONGUE, Tremors, slight Coatings, Yellowish-gray to - Promptness Movement, prompt
- ward base - somewhat anaemic

PUPILS, Equality, Equal Size, normal

Response Light, very ready Accommodation, very ready

SIGHT, Good

HEARING.

Case No. 3602. George A. Hayden. 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], Patellar, 1 year; diminished; 1 or 2 (+ scale).

Other Reflexes,

ARTICULATION, Hesitating, Yes Slurred, Stammers somewhat

FACIAL EXPRESSION, normal

SENSIBILITY,

HEART, beats rapid; sounds strong; no murmurs.

LUNGS, Sounds are good.

EXAM. URINE.



(1901)

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, ~~Clean~~,

BOWELS, Normal, ~~Regular~~ Constipated,

APPETITE, Good, Medium,

SLEEP, Good, Record Poor,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably about a year ONSET GRADUAL OR SUDDEN, Gradual.

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

Mother or Mat. Relations, Mother has some odd ways of thinking. } no history of Epilepsy, apoplexy or consumption

Father or Pat. Relations, father died, (about 65), of Pneumonia.

Brothers or Sisters,

Personal and Medical History of George A. Hayden

GIBBEY, FISLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3602.

Residence, Steele County, Min[illegible]

Date Admission, 26th December 1893.

Admitted by, D. Kilbourne Hour, 11.45

How Sent, W. B. Hardwicks, Jof C, Stee[illegible]

Sex, male

Age, 23.

Civil Condition, single

Children, —

Age Youngest Child, —

Occupation, Laborer

Degree Education, Common School.

Profession Religion, not a church member

Habits, somewhat intemperate.

Nativity, Chickasaw Co. Iowa; (Parents born in [illegible])

Physicians Committing, J. H. Adair & J. W. Roberts

Correspondents, (mother) Mrs Ann Hayden

Residence of Family Physician. Owatonna Minn

, 172.

tives, Mother, probably

ing, Heredity

sposing, Heredity –

onic mania

ing Bodily Disorder, None mentioned

Not, not

Attack, about a year ago

about a year

result,

EXAMINATION ON ADMISSION.

Early D. Herzog Dec 30/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Recent Events, Special Subjects, } Good

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, in the main, Correct.

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, Defective

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Somewhat

Depressed,

DELUSIONS:

Systematized ~~or Not~~, of Persecution

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, quite voluble

GENERAL DESCRIPTIVE REMARKS:

Tells the story of his being in St Charles, Iowa: then going to St Paul; thence to Montana; returning to Minnesota; officers following him to all these places, persecuting him; thinks these persons have the idea that patient knows something they desire to get it of him. Thinks it was a ruse to bring him to this institution. Delusions seem to be wholly confined to how officers following him. None has attempted injure him nor does he suspect any such intent. For the most of his stories of persecution he gives, reasonably, quite sufficient reasons for believing that the men were really following him; but he evidently believes that other men were following him, but is unable to give as good a reason why he has this belief – Therefore he withholds these decisions, in order to make a better impression.

Personal and Medical History of George A. Hayden

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6¼ WEIGHT, 163 lbs NUTRITION, Very good.

WOUNDS OR ABNORMALITIES, Some scars on body; says, from burns – when about 10 years old.

TONGUE, Tremors, Slight Coatings, Yellowish-gray to-ward base – Slightly anaemic Promptness Movement, Prompt

PUPILS, Equality, Equal Size, Normal

Response Light, very ready Accommodation, very ready

SIGHT, Good

HEARING, Unimpaired –

COORDINATION, Arms, } Seems unimpaired by usual tests.

Legs, }

TREMORS, Hands, Slight Tongue, Slight

Facial Muscles, General,

REFLEXES, Patellar, Equal; diminished; 1 or 2 (Dr R's Scale).

Other Reflexes,

ARTICULATION, Hesitating, Yes Slurred, Stammers somewhat.

FACIAL EXPRESSION, Normal

SENSIBILITY,

HEART, Beats rapid; Sounds Strong; no murmurs –

LUNGS, Sounds are good.

EXAM. URINE.



(1901)

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean,

BOWELS, Normal, Regular Constipated,

APPETITE, Good, Medium,

SLEEP, Good, Records Poor,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably abt a year ONSET GRADUAL OR SUDDEN, Gradual –

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

Mother or Mat. Relations, Mother has some odd ways of thinking" – } no history of Epilepsy, apoplexy or Consumption

Father or Pat. Relations, father died, (abt 65), of Pneumonia.

Brothers or Sisters,

Personal and Medical History of George A. Hayden

1893

Robert, Ficke & Chambers, Davenport, Iowa.

Was brought here by J. Z. Barnard, Sheriff, with the following history of case. There is no history of consanguinity but some of heredity, as mother manifests well-marked Evidences of delusions. This is the 1st attack; by having delusions, about a year ago. Disease seems increasing: is not variable; nor rational intervals. Derangement now shown by his having delusions of persecution; imagines that he is followed, from place to place, by detectives. Think he is not disposed to injure others. Is not suicidal, nor filthy nor destructive. Patient has been a free drinker. There is no history of any severe disease or injury to head. He has not been restrained or confined, nor under medical treatment. Supposed cause of the disease is heredity. On personal examination, General health is not impaired; habits are regular. — He said that detectives had been constantly following him and watching him from Iowa to Montana, and that all persons, with whom he was acquainted, acted toward him as though he was the object of grave suspicion &c. He did nothing unusual during examination. Was, however, moderately excited.

Dec 26 Dec 26/93. On admission, was quiet. Has pain in B^r (S.R. Complexion light; hair light; eyes gray; condition of skin good. One scar on left leg and one under breast. Bodily condition Clean. Quiet & well-behaved). Pulse 96. R. 18. Te, 100. Appetite good; bowels generally free; no cough noticed. Is well-behaved. Walks quietly about the hall. Talks freely, but shows delusions; says "Gamblers have been after him for a year". Reads some. Bm. Pulse 90. Te, 99.8. No complaints or injuries to report. —

" 27 Dec 27/93. Quiet, sleeping 8 hours, last night. AM. Pulse 90. R. 18. Te 99.4. Behavior is good. He talks

" 28 freely; makes no complaints. PM. Pulse 88. Te, 99.6. Dec 28/93 Again, rested and slept well, last night. AM. Pulse 84. R 17 Te 99.6. Appetite good. Quiet & well-behaved; talks freely. Bm. Pulse 88 Te 99.4.

" 29/30 Dec 29/93. AM. Pulse 82. Seems rather restless, today. Dec 30/93. AM. Pulse 76. Restless, again, today.

" 31 Dec 31/93. Since last noted, has been quiet & sleeping, uniformly, 8 hours, each night. Has been well-behaved by day. Talks freely. Plays games &c; and reads some. Also writes an occasional letter.

1894
Jan 1/8 Jan 1/94. Works some now, in the dining-room. Pulse 82. Appetite good. Jan 8/94. On 2 or 3 nights during past week, patient has been somewhat restless for a couple of hours, but, as a rule, he has slept well at night, ever since coming. Pulse has, during this week, ranged from 74 to 80. Appetite has been good; bowels apparently normal. He has been quiet & well-behaved. Talks freely but still holds to his delusions, to a certain extent at least; seems to be in good spirits, and is, probably, improving somewhat. Helps, willingly, with the work in the ward. (Wt. on 2d inst. 164 pds. Pulse 80.). —

" 10 Jan 10/94. Seems to be in a "beginning spell" - has quit work. Restless; walks the hall; talks to himself.

" 31 Jan 31/94. Seems still to be in a sort of "spell".

Feb 1/11 Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home.

" 28 Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.

Mar 1/18 Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Olmsted County. Wt 176½ pds. Pulse

" 18 Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was

" 31 caught & put back in the ward. March 31/94. Does not changed much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (Specimen attached). Shows delusions. Is in good physical condition. ———

Personal and Medical History of George A. Hayden

1894

Apr 2 April 2/94. Wt 179 pds. (is steadily gaining in flesh). Pulse 86. Patient is quiet: somewhat restless; walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —

" 3/9 April 3/94. Was today, transferred to B1; April 19/94. Patient has not been behaving well, the past few days; ugly & pugnacious, at times. Moved to B3. —

" 30 April [illegible] quiet & well-behaved. Appetite good; bowels regular. —

May 1/18 [illegible] well in the dining-room. —

" 31 [illegible] bowels regular; otherwise, no change

June 1/30 [illegible] referred to B1. Habits are cleanly. —

July 1/31 [illegible] willing & helpful - Still has delusions - behaved. No special "spells" noted

[illegible] the dining-room. Habits are clean.

[illegible] quietly rests & sleeps well, at night. -

[illegible] normal habits. Has "spells" of talking

[illegible] ing; he becomes so very excited. —

[illegible] ety; has begun to sign himself

[illegible] e". Was recently visited by his mother. —

[illegible] tient - Still shows many delusions -

[illegible] ce in a while plays "Pollard" & games -

[illegible] Delusions - States "he is Grover

[illegible] use of Representatives" - not inclined to say much

[illegible] on, at times. Otherwise about the same -

[illegible] sions. Continues stubborn & contrary, at times -

Aug 1/31 Dec 31/94. Quite stubborn, at times -

[illegible] nue onward. Makes no complaints -

Sept 3/20 [illegible] & note in patient at this date —

[illegible] delusions. Thinks he is "Grover Cleveland"

Oct 2/31 Wt 172½ pds. P 70. March 31/95. About

Nov 2/24 Has various & numerous delusions -

Dec 3/24 ter, and, because it was not addressed as

1895 [illegible] gs: No change: No improvement noted,

Jan 3/31 [illegible] ous delusions. Does not work any. -

Febr 2/28 [illegible] ks a great deal: has many & various

Mar 2/31 [illegible] no work. June 1/95: Wt 163 pds. P 72.

[illegible] more foolish: talks more nonsense & is

April 1/18 more restless. Has good physical health." July 1/95: Wt 165 pds. Pulse 90. —

" 30 July 31/95. Not much change, or if any, it is for the worse. Talks in a disconnected and

July 31 foolish way. Does no work any: is very restless. Has many & various delusions. Health good.

Neat & clean in habits. Excessive talking. —

Rochester Minn Jan 12

Maggie Coates

United States Mail

Saint Paul Rochester

December 18-12-1895

Dear Madame

the Writer of this never heard any one say anything about coming here until the day two years ago every one must save their own soul and not spoil anothers my body has got some marks left of an unpleasant life. If you have any Keys in use or grady's it would be nice if you will attend and open the Door or gate of Hell and let me out. George Cleveland

= Carried to Transfer Book A page 230 =

Personal and Medical History of George A. Hayden

1893

HERBERT, FICKLE & CHAMBERS, DAVENPORT, IOWA.

Was brought here by J. Z. Barnard, Sheriff, with the following history of case. There is no history of consanguinity but some of heredity, as mother manifests well-marked Evidences of delusions. This is the 1st attack; by having delusions, about a year ago. Disease seems increasing: is not variable; nor rational intervals. Derangement now shown by his having delusions of persecution; imagines that he is followed, from place to place, by detectives. Think he is not disposed to injure others. Is not suicidal, nor filthy nor destructive. Patient has been a free drinker. There is no history of any severe disease or injury to head. He has not been restrained or confined, nor under medical treatment. Supposed cause of the disease is heredity. On personal examination, Genl health is not impaired; habits are regular. — He said that detectives had been constantly following him and watching him from Da... to Montana, and that all persons, with whom he was acquainted, acted toward him a... though he was the object of grave suspicion &c. He did nothing unusual during exam... nation. Was, however, moderately excited.

Dec 26 — Dec 26/93. On admission, was quiet. Has put on B² (S.R. complexion light; hair light; ey... gray; condition of skin good. One scar on left leg and one under breast. Bodily condition cl... (Quiet & well-behaved). Pulse 96. R. 18. T. 100. Appetite good; bowels spontaneously free; no cough notice... Is well-behaved. Walks quietly about the hall. Talks freely, but shows delusions; says "Gamblers ha... been after him for a year". Reads some. PM. Pulse 90. T. 99.8. No complaints or injuries to report

" 27 — Dec 27/93. Quiet, sleeping 8 hours, last night. AM. Pulse 90. R. 18. T. 99.4. Behavior is good. Ate ta...

" 28 — freely; makes no complaints. PM. Pulse 88. T. 99.6. Dec 28/93. Again, rested and slept well, last nig... AM. Pulse 84. R. 17. T. 99.6. Appetite good. Quiet & well-behaved; talks freely. PM. Pulse 88. T. 99...

" 29 — Dec 29/93. AM. Pulse 82. Seems rather restless, today. Dec 30/93. AM. Pulse 76. Restless, again, to...

" 31 — Dec 31/93. Since last noted, has been quiet & sleeping, uniformly, 8 hours, each night. Has been well-be... day by day. Talks freely. Plays games &c; and reads some. Also writes an occasional letter.

1894

Jan 1 — Jan 1/94. Works some now, in the dining-room. Pulse 82. Appetite good. Jan 8/94. Wt w a 3 ... During past week, patient has been somewhat restless for a couple of hours, but, as a rule, ... has slept well at night, ever since coming. Pulse has, during this week, ranged from 74 to 80. Appetite ... been good; bowels apparently normal. He has been quiet & well-behaved. Talks freely but still ... to his delusions, to a certain extent at least; seems to be in good spirits, and is, probably, impr... somewhat. Helps, willingly, with the work on the ward. (Wt w 2d Inst. 164 pds. Pulse 80.). —

" 10 — Jan 10/94. Seems to be in a "beginning spell" - has fair work. Restless; walks the hall; talks to himself

" 31 — Jan 31/94. Seems still to be in a sort of "spell".

Feb 1/11 — Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Delusions. Does not seem to improve. Received books from ...

" 28 — Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.

Mar 1 — Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Chester County. Wt 176½ pds. Pulse ...

" 18 — Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was

" 31 — caught & put back in the ward. March 31/94. Does not change much. Continually asking to let out, to let him go away. Sits idly about. Does no work. Writes occasional letters (Specimen attached). Shows delusions. In good physical condition. ———

Personal and Medical History of George A. Hayden

1894

April 2/94. Wt 179 pds; (is steadily gaining in flesh). Pulse 80. Patient is quiet; somewhat restless; walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —

April 3/94. Was today transferred to B¹; April 19/94. Patient has not been behaving well, the past few days ... ugly & pugnacious, at times. Moved to B³. —

... quiet & well-behaved. Appetite good; bowels regular. —

... well in the dining-room. —

... good; bowels regular; otherwise, no change ... ferred to B¹. Habits are cleanly. —

... ty. - Willing to help. - Still has delusions - ... well behaved. No special "spells" noted ... in the dining room. Habits are clean. ... apparently rests & sleeps well, at night. - ... personal habits. Has "spells" of talking ... ging; he becomes very excited. - ... tately, has begun to rip himself ... tates". Innocently visited by his mother. - ... Patient. Still shows many delusions - ... once in a while plays checkers & games - ... is delusions. States "he is Grover ... House of Representatives". Not violent by much ... boom, at times. Otherwise about the same - ... lusions. Continues stubborn & contrary, at times - ... r. Dec 31/94. Quite stubborn, at times - ... since ward. Makes no complaints. ... te in patient at this date. — ... Delusions. Thinks he is "Grover Cleveland" ... Wt 172½ pds. P 70. March 31/95. About ... Has various & numerous delusions. - ... ter, and, because it was not addressed as ... ofgs: No change: No improvement noted, ... rous delusions. Does not work any. - ... talks a great deal: has many & various ... ing, but does no work. June 1/95: Wt 163 pds. P 72.

Rochester Minn July 22

Miss Hattie Megrane

It may seem somewhat unusual hearing from me. But lots of funny things happen in this world. Frank Hayden was here May 25th and I have been since was in Elma the last time. Why I would sooner work out and earn my own material But there are so many people that it will be necessary to have time checks made out. I have lost a lot of time and money in this place. If you have any folks here would be pleased if you will help and let them know that I would like to leave I have been filing what others broke and have got business in other places that needs attention looking after

Yours, George H.

George Cleveland

... e, of late: grows more foolish: talks more nonsense & is ... more restless. Has in good physical health. July 1/95: Wt 165 pds. Pulse 90. —

July 31 — July 31/95. Not much change, or if any, it is for the worse. Talks in a disconnected and foolish way. Does not work any: is very restless. Has many & various delusions. Health good. Wt & clean in habits. Is cent-racking. —

— Carried to Transfer Book A page 230 —

Personal and Medical Histor

1893

Was brought here by [illegible] consanguinity but [illegible] This is the 1st attack; [illegible] not variable; no [illegible] -lecution; imagines [illegible] disposed to injure others [illegible] drinker. There is no he[illegible] restrained or confined, [illegible] lucidity. On personable exam. He said that detectives he[illegible] to Montana, and that all [illegible] though he was the object [illegible] -nation. Was, however, mor[illegible] as [illegible] usual during exami-

Dec 26 — Dec 26/93. On admission, wa[illegible] 15. (S.R. Complexion light; hair light; eyes gray; condition of skin good. One scar on left leg and one under breast. Bodily condition clean. Quiet + well-behaved). Pulse 96. R. 18. To 100. Appetite good; bowels generally free; no cough noticed. Well-behaved. Walks quietly about the hall. Talks freely, but shows delusions; says "Gamblers have been after him for a year". Reads some. PM. Pulse 90. To 99.8. No complaints or injuries to report. —

" 27 — Dec 27/93. Quiet, sleeping 8 hours, last night. AM. Pulse 90. R 18. To 99.4. Behavior is good. He talks freely; makes no complaints. PM. Pulse 88. To 99.6. Dec 28/93 Again rested and slept well, last night. AM. Pulse 84. R 17. To 99.6. Appetite good. Quiet + well-behaved; talks freely. PM. Pulse 88 To 99.4.

" 29/30 — Dec 29/93. AM. Pulse 82. Seems rather restless, today. Dec 30/93. AM. Pulse 78. Restless, again, today.

" 31 — Dec 31/93. Pulse last noted, has been quiet + sleeping, uniformly, 8 hours, each night. Has been well-behaved day. Talks freely. Plays games &c; and reads some. Also writes an occasional letter.

1894
Jan 1/8 — Jan 1/94. Works some now, in the dining-room. Pulse 82. Appetite good. Jan 8/94. On 2 or 3 nights during past week, patient has been somewhat restless for a couple of hours, but, as a rule, he has slept well at night, even since coming. Pulse has, during this week, ranged from 74 to 80. Appetite has been good; bowels apparently normal. He has been quiet + well-behaved. Talks freely but still holds to his delusions, to a certain extent at least; seems to be in good spirits, and is, probably, improving somewhat. Helps, willingly, with the work in the ward. (Wt. on 2d. inst. 164 pds. Pulse 80.). —

" 10 — Jan 10/94. Seems to be in a "beginning spell" - has quit work. Restless; walks the hall; talks to himself.

" 31 — Jan 31/94. Seems still to be in a sort of "spell".

Feb 1/11 — Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home.

" 28 — Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.

Mar 1 — Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Chester County. Wt 176½ pds. Pulse

" 18 — Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was

" 31 — caught + put back in the ward. March 31/94. Does not change much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (See sample attached). Shows delusions. Is in good physical condition. ———

Miss Hattie Megraw
Elma
Howard County

This writer was in Elma about Dec. the 20th 1893

George. H.

July 22—1895
Delivered to Dr. Eby for proper delivery

Personal and Medical History of George A. Hayden

1894

April 2/94. Wt 179 pds. (is steadily gaining in flesh). Pulse 86. Patient is quiet: somewhat restless; walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —

April 3/94. Was today, transferred to B1; April 19/94. Patient has not been behaving well, the past few days; [illegible] ugly + pugnacious, at times. Moved to B3 —

April [illegible] Rochester Minn Jan 12 [illegible] quiet + well-behaved. Appetite good; bowels regular. —

Dec [illegible] well in the dining-room. —

[illegible] good; bowels regular; otherwise, no change

April 23-95 Fourth floor A. E. Room two

Dear Sir thinking that it is only proper that you should hear and kept posted where and what kind of a place you let my self go into I will write. You must know that I do not want stolen property forced on to be worn and that I want for to leave this place so that can go out and by my own material. Several times since I came here have gotten into trouble without any cause and I can not make them know or do what is right. I know it is your duty or somebody's duty for to fix this up. I have been injured by coming here and I want you to come and help so as I can by goods to suit and pay for them and find a private house or hotel that I can live in where I can go away and come at will. You are most likely acquainted with my doings since I came here. now please attend Very Resp't George

[illegible] regression [illegible] 72.

" 30 — June 3/95. Seems to be growing worse, of late: grows more [illegible] restless.

July — July 1/95. Has good physical health.

" 31 — July 31/95. Not much change, or if any, it is for the worse. Talks in a disconnected and foolish way. Does not work any: is very restless. Has many + various delusions. Health good. Eats + sleeps well. Is out walking. —

— Carried to Transfer Book A page 230 —

Personal and Medical History of George A. Hayden

1893

Was brought here by J. Z. Sancard, Sheriff, with the following history of case. There is no history of consanguinity but some of heredity, as mother manifests well-marked Evidences of delusions. This is the 1st attack; by having delusions, about a year ago. Disease seems increasing: is not variable; nor rational intervals. Derangement now shown by his having delusions of persecution; imagines that he is followed, from place to place, by detectives. Think he is set disposed to injure others. Is not suicidal, nor filthy nor destructive. Patient has been a free drinker. There is no history of any severe disease &c or injury to head. He has not been restrained or confined, nor under medical treatment. Supposed Cause of the disease is heredity. On personal examination, General health is not impaired; habits are regular. He said that detectives had been constant
to Montana, and that all persons, with
though he was the object of grave suspic
nation. Was, however, moderately excite

Dec 26 Dec 26/93. On admission, was quiet. Has
gray; condition of skin good. One Scar on le
(quiet & well-behaved). Pulse 96. R. 18. Te 10
Is well-behaved. Walks quietly about the hall.
been after him for a year". Reads some. PM.
" 27 Dec 27/93. Quiet, sleeping & hours, last night.
" 28 freely; makes no complaints. PM. Pulse 88.
AM. Pulse St. R 17 Te 99.6. Appetite good. Pu
" 29 Dec 29/93. AM. Pulse 82. Seems rather restle
" 31 Dec 31/93. Since last noted, has been quiet & qu
ly day. Talks freely. Plays games &c; ai

1894
Jan 1/8 Jan 1/94. Works some now, in the dining-roo
during past week, patient has been somew
has slept well at night, even twice coming. Pulse has, during this week, ranged from 74 to 80. Appetite has been good; bowels apparently normal. He has been quiet & well-behaved. Talks freely but still holds to his delusions, to a certain extent at least; seems to be in good spirits, and is, probably, improving somewhat. Helps, willingly, with the work in the ward. (Wt. on 2d Inst. 169 pds. Pulse 80.). —
" 10 Jan 10/94. Seems to be in a "beginning spell" - has quit work. Restless; walks the hall; talks to himself.
" 31 Jan 31/94. Seems still to be in a sort of "spell".
Feb 1/11 Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Delusions. Does not seem to improve. Received books from home
" 28 Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.
Mar 1/18 Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Olmsted County. Wt 176½ pds. Pulse
" 18 Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was
" 31 caught & put back in the ward. March 31/94. Does not change much. Continually asking that he let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (Specimen attached). Shows delusions. Is in good physical condition. ———

For the Officer that came with and sat in the seat with George in the R.R. car from Owatonna down to Rochester on the place where this letter is being written on Dec 26-93
Special delivery

Personal and Medical History of Ge

1894

Jan 1/8 April 2/94. Wt 179 pds; (is steadily gaining
works about the ward considerably. Sat
" 3/9 April 3/94. Was today transferred to
few days
" 30 Apr
Rochester M
May/18 Wa
" 31 Wo
Mar 2/31 Wt
Apr 1/18 Wt
" 30
May/31 May
June 1 delusions: is very foolish. Goes out walking, but does no work.
" 30 June 30/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is
July 1 more restless. Is in good physical health. July 1/95. Wt 165 pds. Pulse 90. —
" 31 July 31/95. Not much changed, or, if any, it is for the worse. Talks in a disconnected and foolish way. Does not work any: is very restless. Has many & various delusions. Health good. Wt & clean in habits. Does not walking. —

Carried to Transfer Book A page 230

no Change
clearly. —
has delusions -
cal "Spells" noted
our. Habits are clean.
, sleeps well, at night. -
Apr. Has "Spells" of talking
becomes very excited. —
has begun to talk to himself
". Announcement visited by his mother. -
atient - Still shows many delusions -
once in a while plays billiards & games -
is delusions - States "he is Grover
House of Representatives" Not violent by much
bloom, at times. Otherwise about the same -
lusions. Continues stubborn & contrary, at times -
r. Dec 31/94. Quite stubborn, at times -
s same in ward. Makes no complaints -
e to note in patient at this date —
Delusions. Thinks he is "Grover Cleveland"
Wt 172½ pds. P 70. March 31/95. About
Has various & numerous delusions. -
ter, and, because it was not addressed as
of 95: No change: No improvement to note,
rous Delusions. Does not work any. —
talks a great deal: has many & various

1893

Was brought here by J. Z. Darnicard, Sheriff, with the following h[istory]
Consanguinity but some of heredity, as mother manifest
This is the 1st attack; by having delusions of
not variable; nor a rational interval.
-secution; imagines th
disposed to
drinker. H
restrained a
heredity. Ou
He said that
to Montana, a
though he was
-nation. Was ho
Dec 26 Dec 26/93. On admi
gray; condition of
Quiet & well-behaved
Is well-behaved. Walks
been after him for a ye
" 27 Dec 27/93. Quiet, sleepi
" 28 freely; makes no complaints. PM. Re
AM. Pulse 84 R 17 T 99.6. Appetite go
" 29 Dec 29/93. AM. Pulse 82. Seems rather restless, today. Dec 30/93. AM. Pulse 76. Restless, again, today.
" 31 Dec 31/93. Since last noted, has been quiet & sleeping, uniformly, 8 hours, each night. Has been well-behaved
ly day. Talks freely. Plays games &c; and reads some. Also writes an occasional letter.
1894
Jan 1 Jan 1/94. Works some now, in the dining-room. Pulse 82. Appetite good. Jan 2/94. M. for 3 nights
during past week, patient has been somewhat restless for a couple of hours, but, as a rule, he
has slept well at night, ever since coming. Pulse has, during this week, ranged from 74 to 80. Appetite has
been good; bowels apparently normal. He has been quiet & well-behaved. Talks freely but still holds
to his delusions, to a certain extent at least; seems to be in good spirits, and is, probably, improving
somewhat. Helps, willingly, with the work in the ward. (Wt, in 2d Inst. 169 pds. Pulse 80.). —
" 10 Jan 10/94. Seems to be in a "beginning spell" - has quit work. Restless; walks the hall; talks to himself.
" 31 Jan 31/94. Seems still to be in a sort of "spell".
Feb 1 Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home
" 28 Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.
Mar 1 Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He
was, today, Taken out and Returned, under "new warrant" from Olmsted County. Wt 176½ pds. Pulse
" 18 Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was
" 31 caught & put back in the ward. March 31/94. Does not change much. Continually asking to let out,
so he can go away. Sits idly about. Does no work. Writes occasional letters (Specimen attached).
Shows delusions. Is in good physical condition. ———

noticed.
gamblers have
ets or injuries to report. —
99.4. Behavior is good. He talks
11⅔ Again, rested and slept well, last night
ell-behaved; talks freely. PM. Pulse 88 To 99.4.

1894

Mar 27 April 2/94. Wt 179 pds. (is steadily gaining in flesh). Pulse 80. Patient is quiet: somewhat restless;
walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —
" 3/94 April 3/94. Was to-day transferred to B1; April 19/94. Patient has not been behaving well, the past
few days
April
Well
ugly & pugnacious, at times. Moved to B3 —
iet & well-behaved. Appetite good; bowels regular.
well in the dining-room. —
ood; bowels regular; otherwise, no change
ferred to B1. Habits are cleanly. —
- willing & helpful - still has delusions -
well-behaved. No special "spells" noted.
in the dining room. Habits are clean.
fairly rests & sleeps well, at night. -
personal habits. Has "spells" of talking
ing; he becomes so very excited. -
tely, has begun to sign himself
ter". Was recently visited by his mother. -
atient - Still shows many delusions -
nce in a while plays billiards & games -
Delusions - States "he is Grover
ouse of Representatives" - Not included by reason
bors, at times. Otherwise about the same -
usions. Continues stubborn & contrary, at times -
Dec 31/94. Quite stubborn, at times -
since ward. Makes no complaints -
to note in patient at this date —
lusions. Thinks he is "Grover Cleveland"
Wt 172½ pds. P 70. March 31/95. About
Has various & numerous delusions. -
ter, and, because it was not addressed as
95: No change. No improvement noted,
ous delusions. Does not work any. —
ets a great deal: has many & various
but does no work. June/95: Wt 163 pds. P 72.
grows more foolish: talks more nonsense & is
July 5/95: Wt 165 pds. Pulse 90. —
" 31 July 31/95. Not much change, worse, if anything, for the worse. Talks in a disconnected and
foolish way. Does not work any: is very restless. Has many & various delusions. Health good.
Eat & sleeps well. Appetite lacking. —

Rochester Minn Jan 12

Rochester Minn
March 1st 1895

Dear Maggie
being that I have wrote
a number of times to you
and that we was acquainted
with each other, and thinking
that maybe you did not
understand all of the different
kinds of notes that was sent
I now write. I never
want to wrong any one
or deceive. As for all of
the letters that I may have
sent in the past it would
be best to let them drop,
Something in this world
does not happen so all can
be pleased. Well now as
for my past life I do not
intend to live that way
any more.

Carried to Transfer Book A page 430

BERRY, FULLER & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by J. Z. Darricard, Sheriff, with the following history of case. There is no history of consanguinity but some of heredity, as mother manifests well-marked Evidences of delusions. This is the 1st attack; by having delusions, about a year ago. Disease seems increasing: is not variable; nor rational intervals. Derangement now shown by his having delusions of persecution; imagines that he is followed, from place to place, by detectives. Think he is not disposed to injure others. Is not suicidal, nor fi… drinker. There is no history of any severe de… pertained a confined, nor under medical t… heredity. On personal examination, Genital hea… He said that detectives had been constantly … to Montana, and that all persons, with who… though he was the object of grave suspicion… nation. Was, however, moderately excited.

Dec 26 — Dec 26/93. On admission, was quiet. Has pute… gray; condition of skin good. One scar on left leg… (Quiet & well-behaved). Pulse 96. R. 18. Te 100. …
" 27 — Dec 27/93. Quiet, sleeping 8 hours last night. AM… well-behaved. Walks quietly about the hall. Talks… been after him for a year". Reads some. PM. Pulse…
" 28 — Dec 28/93. Quiet, sleeping 8 hours last night. AM… freely; makes no complaints. PM. Pulse 88. Te 99. …
" 29 — Dec 29/93. AM. Pulse 82. Seems rather restless, to…
" 31 — Dec 31/93. Since last noted, has been quiet & sleeping… by day. Talks freely. Plays games &c; and read…

1894
Jan 1/8 — Jan 1/94. Works some now, in the dining-room. … during past week, patient has been somewha… has slept well at night, ever since coming. Pulse has… been good; bowels apparently normal. He has been… to his delusions, to a certain extent at least; been… somewhat. Helps, willingly, with the work in the…
" 10 — Jan 10/94. Seems to be in a "begining spell" - has …
" 31 — Jan 31/94. Seems still to be in a sort of "spell".
Feb 1/11 — Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home.
" 28 — Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.
Mar 1 — Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Chester County. Wt 176½ pds. Pulse…
" 18 — Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was
" 31 — caught & put back in the ward. March 31/94. Does not change much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (Specimen attached). Shows delusions. Is in good physical condition.

As for our names you may not know you knew me by the name of Geo Hayden but if you read the Knews papers I am known as President Cleveland. As for my self I am real well and strong. and expect you are the same.

you never made any on said what your intentions was so a person could understand. and therefor I was not to blame. As for my self I got into some trouble with some criminals but when it is fixed this time I will not get into any more I would like you to have a good home there are a new building being put up here in the center of the hospital and you are entitled to it as your home. but it being so long since I seen you I do not know your intentions I have this place by right under my control.

1894

Mar — April 2/94. Wt 179 pds. (is steadily gaining in flesh). Pulse 80. Patient is quiet: somewhat restless; walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —
" 3/4 — April 3/94. … Patient has not been behaving well, the past few days; tr… Rochester Minn Jan 12 … gly & pugnacious, at times. Moved to B3 —
" 30 — April 3… well-behaved. Appetite good; bowels regula… ll, in the dining-room. —
… bowels regular: otherwise, no change… red to B3. Habits are cleanly. —
… willing to help - still has delusions - …behaved. No special "spells" noted. …the dining-room. Habits are clean. …tly rests & sleeps well, at night. - …nal habit. Has "spells" of talking …, he becomes very excited. —
…, has begun to sign himself … Innocently visited by his mother. —
…t - Still shows many delusions - …i a while plays Cribbage & games - …lusions - States "he is Grover … of Representatives" - Not violent by any much … at times. Otherwise about the same - …is. Continues stubborn & contrary, at times - …ec 31/94. Quite stubborn, at times - …ard. Makes no complaints - …te in patient at this date. —
…ons. Thinks he is "Grover Cleveland" …72½ pds. P 70. March 31/95: About …various & numerous delusions. - …ed, because it was not addressed as …o change. No improvement noted, …Delusions. Does not work any. —
May/31 — May 1/95. Wt 160 pds. P 84. May 31/95. Very restless: talks a great deal: has many & various
June/1 — delusions: is very foolish. Takes out walking, but does no work. June/95: Wt 163 pds. P 72.
" 30 — June 30/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is
July — more restless. Is in good physical health. July/95: Wt 165 pds. Pulse 90. —
" 31 — July 31/95. Not much change, or if any, it is for the worse. Talks in a disconnected and foolish way. Does not work any: is very restless. Has many & various delusions. Health good. Neat & clean in habits. Excessive talking. —

— Carried to Transfer Book "A" page 230 —

Personal and Medical History of George A. Ha

HERBERT, PICKLE & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by J. Z. Barnard, Sheriff, with the followin
consanguinity but sound of heredity, as mother manifests
This is the 1st attack; by having delusions, about a y
not variable; no rational intervals. Derangeme
-lecution; imagines that he is followed.
disposed to injure others. Do not suicid
drinker. There is no history of
restrained or confined, nor
heredity. On personable ap
He said that detect
to Montana, a
though Iowa
nation. Was h

Dec 26 — Dec 26/93. On admi
gray; condition of sk
Quiet & well-behaved
Is well-behaved. Walks qui
been after him for a year".

" 27 — Dec 27/93. Quiet, sleeping & ho

" 28 — freely; makes no complaints. Bm
AM. Pulse At R 17 Te 99.6. Appetite

" 29/30 — Dec 29/93. AM. Pulse 82. Seems rathe

" 31 — Dec 31/93. Since last noted, has been quiet. Sleep
ly, 8 hours, each night. Has been well-behaved
ly day. Talks freely. Plays games &c; and rea
nouse. Also writes an occasional letter.

1894
Jan 1/8 — Jan 1/94. Works some now, in the dining-room. Pulse 82. Appetite good. Jan 8/94. On 2 or 3 nights during past week, patient has been somewhat restless for a couple of hours, but, as a rule, he has slept well at night, ever since coming. Pulse has, during this week, ranged from 74 to 80. Appetite has been good; bowels apparently normal. He has been quiet & well-behaved. Talks freely but still holds to his delusions, to a certain extent at least; seems to be in good spirits, and is, probably, improving somewhat. Helps, willingly, with the work in the ward. (Wt on 2d inst. 169 pds. Pulse 80.). —

" 10 — Jan 10/94. Seems to be in a "beginning spell" - has quit work. Restless; walks the hall; talks to himself.

" 31 — Jan 31/94. Seems still to be in a sort of "spell".

Feb 1/11 — Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home

" 28 — Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.

Mar 1 — Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Olmsted County. Wt 176½ pds. Pulse

" 18 — Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was

" 31 — caught & put back in the ward. March 31/94. Does not changed much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (see sample attached). Shows delusions. Is in good physical condition. ———

Maggie Baxter
Rochester Minn
from
Nashua Dowagiac
Mich

Rochester Barracks
Sept. 7th 1894

Dear wife
I thought that would
write you a few lines
we have not got very
much acquainted with
each other as we are
not so as can talk
or see each other.
You have a better chance
then I have. At least
you should let me
know how you are
getting along and what
are your intentions
and I do something so as
I will know you
when you are seen
I have lots of
information coming

Personal and Medical History of George A. Hayden

1894

June — April 2/94. Wt 179 pds. (is steadily gaining in flesh). Pulse 80. Patient is quiet: somewhat restless; walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —

" 3/4 — April 3/94. Was today transferred to B1; April 19/94. Patient has not been behaving well, the past few days; ugly & pugnacious, at times. Moved to B3 —

April — quiet & well-behaved. Appetite good; bowels regular.

— Rochester Minn

Dec 12

— & well, in the dining-room. —

— ward; bowels regular: otherwise, no change

— ferred to B1. Habits are cleanly. —

— willing to help - Still has delusions -

— well-behaved. No special "spells" noted.

— in the dining-room. Habits are clean.

— apparently rests & sleeps well, at night. -

— personal habits. Has "spells" of talking

— ing; he becomes very excited. —

— ted; has begun to sign himself

— ter". Occasionally visited by his mother. —

— patient - Still shows many delusions -

— nce in a while plays billiards & games -

— Delusions - States "he is Grover

— ouse of Representatives" but includes Raymond

— bom at times. Otherwise about the same -

— usions. Continues stubborn & contrary, at times -

— Dec 31/94. Quite stubborn, at times -

— since ward. Makes no complaints.

— to note in patient at this date —

— lusions. Thinks he is "Grover Cleveland"

— 172½ pds. P 70. March 31/95: About

— has various & numerous delusions. -

— and, because it was not addressed as

— 95: No change: No improvement noted,

— ous delusions. Does not work any. —

— talks a great deal: has many & various

delusions: is very foolish. Goes out walking, but does no work. June 1/95: Wt 163 pds. P 72.

June — June 30/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is

July — more restless. Has good physical health. July 1/95. Wt 165 pds. Pulse 90. —

" 31 — July 31/95. Not much change, or, if any, it is for the worse. Talks in a disconnected and foolish way. Does not work any: is very restless. Has many & various delusions. Health good. Neat & clean in habits. Does not masturbate. —

— Carried to Transfer Book A page 430 —

EBERT, FICKE & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by J. Z. Sancard, Sheriff, with the following history of case. There is no history of consanguinity but some of heredity, as mother manifests well-marked Evidences of delusions. This is the 1st attack; by having delusions, about a year ago. Disease seems increasing: is not variable; nor at usual intervals. Derangement now shown by his having delusions of persecution; imagines that he is followed, from place to place, by detectives. Think he is not disposed to injure others. Is not suicidal, nor a drinker. There is no history of any severe ailments ascertained or confined, nor under medical treatment. Heredity. On personal examination, General He said that detectives had been constantly to Montana, and that all persons, with whom though he was the object of grave suspicion nation. Was, however, moderately excited.

Dec 26 Dec 26/93. On admission, was quiet. Has spe
gray; condition of skin good. One scar on left
(Quiet & well-behaved). Pulse 96. R. 18. Te 100.
Is well-behaved. Walks quietly about the hall. Tal
been after him for a year". Reads some. PM. Pu
" 27 Dec 27/93. Quiet, sleeping 8 hours last night. At
" 28 freely; makes no complaints. PM. Pulse 88. Te 9
AM. Pulse 84. R 17. Te 99.6. Appetite good. Quiet
" 29 Dec 29/93. AM. Pulse 82. Seems rather restless,
" 31 Dec 31/93. Since last noted, has been quiet & sleepi
ly day. Talks freely. Plays games &c; and r
1894
Jan 1/8 Jan 1/94. Works some now, in the dining-room
during past week, patient has been somew
has slept well at night, ever since coming. Pulse
been good; bowels apparently normal. He has h
to his delusions, to a certain extent at least; h
somewhat. Helps, willingly, with the work a
" 10 Jan 10/94. Seems to be in a "begining spell" - has
" 31 Jan 31/94. Seems still to be in a sort of "spell".
Feb 1/11 Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home
" 28 Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.
March Mar 1/94. Patient was committed here under the "Law of 1892", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Olmsted County. Wt 176½ pds. Pulse
" 18 Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was
" 31 caught & put back in the ward. March 31/94. Does not change much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (See sample attached). Shows delusions. Is in good physical condition.

1894

April 2/94. Wt 179 pds. (is steadily gaining in flesh). Pulse 80. Patient is quiet: somewhat restless; walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —

" 3/94. April 3/94. Was to-day transferred to B1; April 19/94. Patient has not been behaving well, the past few days; ugly & pugnacious, at times. Moved to B3 —

" 30 April " Rochester Minn Jan 12 iet & well-behaved. Appetite good; bowels regular. —

well in the dining-room. —

od; bowels regular; otherwise, no change ferred to B1. Habits are cleanly. —

- dulling & help- Still has delusions -

well behaved. No special "spells" noted in the dining room. Habits are clean.

arently rests & sleeps well, at night. sexual habits. Has "spells" of talking ning; he becomes very excited. tely, has begun to sign himself ter". Innocently invited by his mother. - atient - Still shows many delusions - nce in a while plays billiards & games - Delusions - States "he is Grover ouse of Representatives" - not inclined to say much bom, at times. Otherwise about the same - usions. Continues stubborn & contrary, at times -

- Dec 31/94. Quite stubborn, at times - same as ward. Makes no complaints - to note in patient at this date - Delusions. Thinks he is "Grover Cleveland" Wt 172½ pds. P 70. March 31/95. About Has various & numerous delusions. - ter, and, because it was not addressed as 95: No change. No improvement noted, ous delusions. Does not work any. - ks a great deal: has many & various

May/31 May
June 1 delusions: is very foolish. Goes out walking, but does no work. June 1/95: Wt 163 pds. P 72.
" 30 June 30/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is
July more restless. Is in good physical health. July 1/95: Wt 165 pds. Pulse 90. —
" 31 July 31/95. Not much change, or if any, it is for the worse. Talks in a disconnected and foolish way. Does no work any: is very restless. Has many & various delusions. Health good. Neat & clean in habits. Is correct in walking. -

Correct to Transfer Book A page 230

If I knew what you held as your name I would address this to that name, we will have to settle on the name business after we talk.

to you all the time about me but I never get any about you, or know anything at all about you.

And now it is about time you should make some advance about having a place for us to live in in this place would do, I have plenty of money but not in my hand's so can use it now. So you or the parties must see to it, I expect to live here so now do not be Bashful about anything, and I will close signing my name as

George

Personal and Medical History of George A. Hayden

1893 EBERT, PICKAR & OSENBERG, DAVENPORT, IOWA.

Was brought here by J. Z. Sancard, Sheriff, with the f
Consanguinity but sound of heredity, as mother man
This is the 1st attack; by having delusions, about
not variable; no rational intervals. Dera
-lecution; imagines that he is follow
disposed to injure others. Does not use
drinker. There is no history of
restrained or confined, nor
heredity. On personable ex
He said that detectives
to Montana, and th
though he was
-nation. Mo

Dec 26 Dec 26/93
gay;
Quiet
Is well - be
been after her
" 27 Dec 27/93. Same
" 28 freely; makes no c
AM. Pulse 84 R 17 De
" 29/30 Dec 29/93. AM. Pulse 82
" 31 Dec 31/93. Same last noted, w
ly day. Talks freely. Plays
1894
Jan 1/8 Jan 1/94. Works some now, in b
during past week, patient has w
has slept well at night, ever since coming. He has, during this week, ranged from 74 to 80. Appetite has been good; bowels apparently normal. He has been quiet & well-behaved. Talks freely but still holds to his delusions, to a certain extent at least; seems to be in good spirits, and is, probably, improving somewhat. Helps, willingly, with the work on the ward. (Wt on 2d inst. 169 pds. Pulse 80.). —
" 10 Jan 10/94. Seems to be in a "beginning spell" - has quit work. Restless; walks the hall; talks to himself.
" 31 Jan 31/94. Seems still to be in a sort of "spell". —
Feb 1/11 Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home
" 28 Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.
Mar 1 Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Olmsted County. Wt 176½ pds. Pulse
" 18 Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was caught & put back in the ward. March 31/94. Does not change much. Continually asking that he let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (See sample attached). Shows delusions. Is in good physical condition. —

Personal and Medical History of George A. Hayden

1894
Mar 31 April 2/94. Wt 179 pds. (is steadily gaining in flesh). Pulse 80. Patient is quiet: somewhat restless; walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —
April 3/94. Moved today from B1; April 19/94. Patient has not been behaving well, the past few days; t [illegible] walking will get quite ugly & pugnacious, at times. Moved to B3 —
" 30 April 30/94. Rochester Minn Jan 12
Feels well
Remains in
Rochester Minn Aug 6 94
Dear Friends
Since I have been in
this place I have used
more then one name
And so this is now
written so that I will
be understood in the
future.
The name of a working
man as well as the
man that is at the
head of the United States
has been used.
But I did not do so
without authority
I have a right to sign
every name is mine
but no man can
sign my name
But they will never
be put to any bad use.
Apr
" 30
May
June 1
" 30
July
" 31

well, in the dining-room. —
od; bowels regular: otherwise, no change
ferred to B1. Habits are cleanly. —
- willing to help - Still has delusions -
ve-behaved. No special "spells" noted.
the dining-room. Habits are clean.
arently rests & sleeps well, at night. -
personal habit. Has "spells" of talking
ing. He becomes very excited. -
ly, has begun to spin himself
te". Recently visited by his mother. -
tient - Still shows many delusions -
ceive a while plays billiards & games -
Delusions - States "he is Grover
use of Representatives" Not included in payment
m, at times. Otherwise about the same -
sions. Continues stubborn & contrary, at times -
Dec 31/94. Quite stubborn, at times -
ome onward. Makes no complaints.
Waste in patient at this date. —
elusions. Thinks he is "Grover Cleveland"
Wt 172½ pds. P 70. March 31/95: About
Has various & numerous delusions.
ter, and, because it was not addressed as
95: No change: No improvement noted,
ves delusions. Does not work any. —
the a great deal: has many & various
sions: is very foolish. Lies out walking, but does no work. June 1/95: Wt 163 pds. P 72.
June 3/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is more restless. Is in good physical health. July 1/95: Wt 165 pds. Pulse 90. —
July 31/95. Not much change, or if any, it is for the worse. Talks in a disconnected and foolish way. Does not work any: is very restless. Has many & various delusions. Health good. Must be clean in habits. Does not walk. —

— Carried to Transfer Book A page 230 —

1893

Was brought here by J. Z. Sancard, Sheriff, [illegible] hist. data as to. There is no history of consanguinity but some of heredity, as [illegible]. This is the 1st attack; by having delusion[s] not variable; nor rational intervals. Dem[entia] -secution; imagines that he is follow[ed] disposed to injure others. Is not suicida[l] drinker. There is no history of any [illegible] restrained or confined, nor undue [in]heredity. On personal examination, G[eorge] He said that detectives had been cons[tantly] to Montana, and that all persons, wi[th] though he was the object of grave su[s]- nation. Was, however, moderately ex[cited]

Louis K. Hart also
can be shown to any
person or the girl that
loves me best and
when there is a place ready
I will go and live
with her

There is no superior
or equal to me on This
earth.
I am The Judge The
world had waited
God's only Son
King of Kings

Dec 26 Dec 26/93. On admission, was quiet. [illegible] gray; condition of skin good. One scar on [illegible] (Quiet & well-behaved). Pulse 96. R. 18. [illegible] well-behaved. Walks quietly about the hall [illegible] been after him for a year". Reads some. [illegible]
" 27 Dec 27/93. Quiet, sleeping 8 hours, last night [illegible]
" 28 freely; makes no complaints. BM. Pulse 88 [illegible] AM. Pulse 84 R 17 Dec 99.6. Appetite good. [illegible]
" 29 Dec 29/93. AM. Pulse 82. Seems rather rest[less]
" 31 Dec 31/93. Since last noted, has been quiet & [illegible] ly day. Talks freely. Plays games &c; a[lso]
1894 Jan 1/94 Jan 1/94. Worked some now, in the dining-[room] during past week, patient has been "son[ewhat] has slept well at night, ever since coming. Pul[se] has been good; bowels apparently normal. He has been quiet & well-behaved. Talks freely but still holds to his delusions, to a certain extent at least; seems to be in good spirits, and is, probably, improving somewhat. Helps, willingly, with the work on the ward. (Wt. on 2d inst. 169 pds. Pulse 80.). —
" 10 Jan 10/94. Seems to be in a "beginning spell" - has quit work. Restless; walks the hall; talks to himself.
" 31 Jan 31/94. Seems still to be in a sort of "spell".
Feb 1/11 Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home
" 28 Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.
Mar 2 Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Chouteau County. Wt 176½ pds. Pulse -
" 18 Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was
" 31 caught & put back in the ward. March 31/94. Does not change much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (Specimen attached). Shows delusions. Is in good physical condition. —

1894

Apr 2 April 2/94. Wt 179 pds. (is steadily gaining in flesh). Pulse 80. Patient is quiet: somewhat restless; walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —
" 3/94 April 3/94. Was today transferred to B3; April 19/94. Patient has not been behaving well, the past few days: tries to [illegible] quite ugly & pugnacious, at times. Moved to B3. —
" 30 April [illegible] Rochester Minn Jan 12 [illegible] quiet & well-behaved. Appetite good; bowels regular. —
May 18 [illegible] [illegible] well in the dining-room. —
" 31 [illegible] [illegible] good; bowel regular; otherwise, no change
June 1/30 [illegible] [illegible] ferred to B3. Habits are cleanly. —
July 31 [illegible] [illegible] ty - willing to help - still has delusions -
[illegible] [illegible] well-behaved. No special "spells" noted
[illegible] [illegible] in the dining-room. Habits are clean.
[illegible] [illegible] arently rests & sleeps well, at night. -
[illegible] [illegible] personal habits. Has "spells" after talking
[illegible] [illegible] ing, he becomes very excited. -
[illegible] [illegible] tely, has begun to sign himself
[illegible] [illegible] tes". Innocently visited by his mother. -
[illegible] [illegible] tient - still shows many delusions -
[illegible] [illegible] e in a while plays billiards & games -
[illegible] [illegible] delusions - states "he is Grover
[illegible] [illegible] e of Representatives". Not inclined to say much
[illegible] [illegible] at times. Otherwise about the same -
[illegible] [illegible] ions. Continues stubborn & contrary, at times -
Dec 3/94 Dec [illegible] Dec 31/94. Quite stubborn, at times -
1895 [illegible] [illegible] e onward. Makes no complaints -
Jan 3/95 Jan [illegible] note in patient at this date. —
Feb 1/95 Feb [illegible] ions. Think he is "Grover Cleveland"
Mar 2/31 [illegible] [illegible] 172½ pds. P 70. Medical 31/95: About
[illegible] [illegible] various & numerous delusions. -
[illegible] [illegible] ind, because it was not addressed as
[illegible] [illegible] o change. No improvement noted,
[illegible] [illegible] delusions. Does not work any. -
April 1/95 April 1/ [illegible] [illegible] great deal: has many & various
" 30 Grover [illegible] delusions: is very foolish. Goes out walking, but does no work. June/95: Wt 163 pds. P 72.
May 31 [illegible] June 30/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is
July 31 more restless. Is in good physical health. July 1/95: Wt 165 pds. Pulse 90. —
July 31/95. Not much change, or, if any, it is for the worse. Talks in a disconnected and foolish way. Does not work any: is very restless. Has many & various delusions. Health good. Mat & bean in habits. Does not walking. -

Secretary Heart

— Carried to Transfer Book A page 230 —

1893

Was brought here by J. Z. Samcard, Sheriff, with the following history of case. There is no history of consanguinity but sound of heredity as mother manifests well-marked Evidences of delusi... This is the 1st attack; h... not variable; no... secution; mis... differed to injur... drinker. There... restrained a co... heredity. Duper... He said that de... to Montana, al... though he was ... nation. Was h...

Dec 26 Dec 26/93. Quiet gay; condition o... Quiet & well-be... Is well-behaved. H... been after him fo...

" 27 Dec 27/93. Quiet,

" 28 freely; makes no co... AM. Pulse 84. R 17 2...

" 29/30 Dec 29/93. AM. Pul...

" 31 Dec 31/93. Twice last ... ly day. Talks freely...

1894 Jan 1/8 Jan/94. Works so... during past week, ... has slept well at nig... been good; bowels a... to his delusions, to a... somewhat. Helps, willingly, with the work in the ward. (Wt in 2d Inst. 169 pds. Pulse 80.). —

" 10 Jan 10/94. Seems to be in a beginning spell" - has quit work. Restless; walk the hall; talks to himself.

" 31 Jan 31/94. Seems still to be in a sort of "spell".

Feb 1/11 Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home.

" 28 Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.

March Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Olmsted County. Wt 176½ pds. Pulse-

" 18 Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was

" 31 caught & put back in the ward. March 31/94. Does not change much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (Specimen attached). Shows delusions. In good physical condition. ———

Louis K. Hart also
can be shown to any
person on the girl that
loves Jesus best and
when there is a place ready
I will go and live
with her

There is no superior
or equal to me on This
earth.
I am The Judge The
world had waited
God's only Son

King of Kings

1894

Jan. April 7/94. Wt 170 pds. (is steadily gaining in flesh). Pulse 80. Patient is quiet; somewhat restless; talks quite rationally. Appetite is good. He does no work. —

to 13; April 19/94. Patient has not been behaving well, the past ... is ... at times quite rude & treacherous at times. Moved to B 3 —

... bowels regular.

... no change)
... early. —
... delusions —
... cells noted
... are clean.
... at night. —
... after talking
... excited. —
... himself
... his mother. —
... delusions —
... & games —
... Grover
... eluded to by me
... but the same —
... any, at times —
... at times —
... complaints —
... to date —
... Cleveland
... 31/95. About
... delusions —
... addressed as

Rochester Minn Jan 12

Jno A. Hayden.

Rochester Minn. Aug 6 - 1894

Secretary Hart. My Dear Sir I now write a letter to you, and I trust that you will place it before the proper parties that are willing and able to act. As any sensible man can see there is not any law for me in those buildings known as the Rochester Hospital for insane. But in place of that they are filled with the worst class of criminals. And also there are some men claiming to be officers of the law around the buildings and in the City of Rochester that are not but are merely working in for the welfare of gamblers. The building that is at present being built in the center of Rochester Hospital list the Administration building of the United States. And I would deem it wise to have this place put under guard of United States Soldiers as soon as possible until they can be properly taken care of. And law and order established.

Grover Cleveland President United States

... Cleveland he took it up; would not read it. Apl 30/95: No change: No improvement noted, ... Talks to himself all day. Still holds numerous delusions. Does not work any. —

May/31 May 1/95. Wt 160 pds. P 84. May 31/95. Very restless: talks a great deal: has many & various

June 1 delusions: is very foolish. Goes out walking, but does no work. June 1/95: Wt 163 pds. P 72.

" 30 June 30/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is

July more restless. Is in good physical health. July 1/95: Wt 165 pds. Pulse 90. —

" 31 July 31/95. Not much change, or, if any, it is for the worse. Talks in a disconnected and foolish way. Does not work any: is very restless. Has many & various delusions. Health good. Weather change in habits. Does not walking. —

— Carried to Transfer Book "A" page 230 —

Personal and Medical History of George A. Hayden

BRIGHT, PICKLE & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by J. Z. Duncard, Sheriff, with the following history of case. There is no history of consanguinity but some of heredity, as mother manifests well-marked Evidences of delusio... This is the 1st attack; h... not variable; no... -lecution; mis... displayed by impu... drinker. There ... restrained a c... heredity. On per... He said that de... to Montana, an... though he was ... nation. Was h...

Dec 26 Dec 26/93. On ad... gray; condition o... Quiet & well-be... well-behaved. H... been after hair fr...

" 27 Dec 27/93. Quiet, ...

" 28 freely; makes no co... Ill. Pulse 84 R 17 ...

" 29 & 30 Dec 29/93. Ill. Pul...

" 31 Dec 31/93. Pulse last ... by day. Talks freely ...

1894 Jan 1/8 Jan/94. Works well ... during past week, ... has slept well at nig... been good; bowels a... to his delusions, to a... somewhat. Helps, willingly, with the work on the ward. (Wt ... Dist. 169 lbs. Pulse 80.).

" 10 Jan 10/94. Seems to be in a "beginning spell" - has just work. Restless; walks the hall; talks to ...

" 31 Jan 31/94. Seems still to be in a sort of "spell".

Feb 1/11 Feb 1/94. Wt 173 lbs. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home.

" 28 Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.

Mar 1 Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Olmsted County. Wt 176½ lbs. Pulse ...

" 18 Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was caught & put back in the ward. March 31/94. Does not change much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (Specimen attached). Shows delusions. Is in good physical condition.

Personal and Medical History of George A. Hayden

1894

2/94. Wt 179 lbs. (is steadily gaining in flesh). Pulse 86. Patient is quiet: somewhat restless; about the ward considerably. Talks quite rationally. Appetite is good. He does no work. — ... to B1; April 19/94. Patient has not been behaving well, the past ... talking; will get quite ugly & pugnacious, at times. Moved to B3 — ... ward. She has been quiet & well-behaved. Appetite good; bowels regular. ... clean; works willingly & well in the dining-room. —

... May 1/94. Appetite good; bowels regular; otherwise, no change. ... Was today transferred to B1. Habits are cleanly. — ... has had no "spells" lately. Willing to help. Still has delusions. — ... June 30/94. Quiet & well-behaved. No special "spells" noted. ... Works well in the dining-room. Habits are clean.

May 1/95 May 1/95. Wt 160 lbs. Pulse 84. May 31/95. Very restless; talks a great deal; has many & various

" 31 delusions; is very foolish. Goes out walking, but does no work. June 1/95: Wt 163 lbs. Pulse 72.

June 1/95 June 30/95. Seems to be growing worse, of late; grows more foolish; talks more nonsense & is

" 30 more restless. Is in good physical health. July 1/95. Wt 165 lbs. Pulse 90. —

July 1/95 July 31/95. Not much change, or, if any, it is for the worse. Talks in a disconnected and

" 31 foolish way. Does not work any; is very restless. Has many & various delusions. Health good. Mat & clean in habits. Does not walking. —

— Carried to Transfer Book A page 330 —

Louis —
Can be
person o
loves to
when there
I will go a...
with her

There is no su...
or equal to me
earth.
I am the Judg...
world had m...
God's only Son

King of Kings

Rochester Minn Aug. 7-1894

To the public in general to read

Lest some might not understand the position that I have taken in public in regard to my proclamation that was published in the press of the United States on the 9th day of July 1894. I will give the people to understand that it take effect in every State in the Union as well as the State of Illinois and the city of Chicago we have like circumstances.

Grover Cleveland

1893

Was brought here by J. Z. Barnard, Sheriff
Consanguinity but found of hereditary
This is the 1st attack; b
not variable; no
-secution; was
disposed to
drinker. There
restrained a
hereditary. On per
He said that de
to Montana, an
though he was
-nation. Was h

Dec 26 Dec 26/93. On ad
gray; condition o
Quiet & well-be
Is well-behaved. H
been after him fr
" 27 Dec 27/93. Quiet,
" 28 freely; makes no c
AM. Pulse 84. R 17 2
" 29 & Dec 29/93. AM. Pul
" 31 Dec 31/93. Since last
ly day. Talks freely
1894
Jan 1/8 Jan 1/94. Works con
during past week
has slept well at nig
been good; bowels a
to his delusions, to a
somewhat. Helps, willingly, with the work on the ward. (Wt on 2d Inst. 169 lbs. Pulse 80.). —
" 10 Jan 10/94. Seems to be in a "begining spell" - has quit work. Restless; walks the hall; talks to himself.
" 31 Jan 31/94. Seems still to be in a sort of "spell".
Feb 1/11 Feb 1/94. Wt 173 lbs. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home
" 28 Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.
Mar 1 Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He
was, today, Taken out and Returned, under "new warrant" from Olmsted County. Wt 176½ lbs. Pulse
" 18 Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was
" 31 caught & put back in the ward. March 31/94. Does not change much. Continually asking blebet ant,
to he can go away. Talks idly about. Does no work. Writes occasional letters (See sample attached).
Shows delusions. Is in good physical condition. ———

Dear Sir

I am
person
loves
when I
I will
with

There is no superior
or equal to mon This
earth.
I am the Judge the
world had waited
God's only Son

King of Kings

April 2/94. Wt 179 lbs. (is steadily gaining in flesh). Pulse 80. Patient is quiet: somewhat restless;
alks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —
ril 3/94. Was today transferred to B1; April 19/94. Patient has not been behaving well, the past
ell get quite ugly & pugnacious, at times. Moved to B3 —
as been quiet & well-behaved. Appetite good; bowels regular.
willingly & well, in the dining-room. —
Appetite good; bowels regular; otherwise, no change
day transferred to B1. Habits are cleanly. —
spells" lately - willing to help - still has delusions -
t. Quiet & well-behaved. No special "spells" noted.
orks well in the dining-room. Habits are clean.
31/94. Apparently rests & sleeps well, at night. -
of good personal habits. Has "spells" of talking
he is saying, he becomes very excited. —
shed); lately, has begun to sign himself
United States". Innocently riveted by his mother. -
quiet patient - still shows many delusions -
works; once in a while plays billiards & games -
olds his delusions - States "he is Grover
ate & House of Representatives". Not violent & very much
t & stubborn, at times. Otherwise about the same -
shows delusions. Continues stubborn & contrary, at times -
Pulse 82. Dec 31/94. Quite stubborn, at times -
Works some on ward. Makes no complaints -
change to note in patient at this date —
Has delusions. Thinks he is "Grover Cleveland"
2/95: Wt 172½ lbs. P 70. March 31/95: About
aved. Has various & numerous delusions. -
d a letter, and, because it was not addressed as
April 30/95: No change: No improvement noted,
was numerous delusions. Does not work any. —
May 1/95. Wt 160 lbs. P 84. May 31/95. Very restless: talks a great deal: has many & various
June 1/95 delusions: is very foolish. Goes out walking, but does no work. June 1/95: Wt 163 lbs. P 72.
" 30 June 30/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is
July 1/95 more restless. Is in good physical health. July 1/95: Wt 165 lbs. Pulse 90. —
" 31 July 31/95. Not much change, or, if any, it is for the worse. Talks in a disconnected and
foolish way. Does not work any: is very restless. Has many & various delusions. Health good.
Neat & clean in habits. Does not walk. -

Chester Minn Jan 12

Rochester Minn
March 14 94

Dear Hayden.
When asked where she was he stated
she was here but may be she was
not known by this name.

Miss Maggie Coates

St Paul Last winter
you might have seen
something pertinent

— Carried to Transfer Book A page 230 —

Personal and Medical History of George A. Hayden

History of George A. Hayden

1893 Was brought here by J. Z. Samcard, Sheriff
Consanguinity but found of hereditt
This is the 1st attack; h
not variable; no
-secution; mia
disposed to injur
drinker. Here
restrained a
hereditty. On per
He said that de
to Montana, an
though he was
-nation. Was h
Dec 26 Dec 26/93. On ad
gray; condition o
Quiet & well-be
& well-behaved. H
been after heir fr
" 27 Dec 27/93. Quiet,
" 28 freely; makes no c
AM. Pulse 84 R 17 2
" 29 Dec 29/93. AM. Pul
" 31 Dec 31/93. Pulse last
ly day. Talks freely
1894 Jan 1/8 Jan 1/94. Works sm
during past week,
has slept well at nig
been good; bowels a
to his delusions, to a
somewhat. Helps, willingly, with the work on the ward. (Wt. on 2d Inst. 169 pds. Pulse 80.). —
" 10 Jan 10/94. seems to be in a "beginning spell" - has quit work. Restless; walks the hall; talks to himself.
" 31 Jan 31/94. seems still to be in a sort of "spell".
Feb 1/11 Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home.
" 28 Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.
Mar 1/18 Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Chester County. Wt 176½ pds. Pulse-
" 18 Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was
" 31 caught & put back in the ward. March 31/94. Does not changed much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (Specimen attached). Shows delusions. Is in good physical condition. ———

[illegible] light; eyes
[illegible] Bodily condition clean.
[illegible] ually free; no cough noticed.
[illegible] ins; says "Gamblers have
[illegible] ent or injuries to report. —
Behavior is good. He talks
[illegible] d and slept well, last night.
[illegible] ly. Pulse 88 To 99 94.
[illegible] ed 78. Restless, again, today.
[illegible] night. Has been well-behaved
[illegible] casional letter.
Jan 8/94. He r a 3 nights
hours, but, as a rule, he
from 74 to 80. Appetite has
Talks freely but still holds
[illegible] ts, and is, probably, improving

Dear Maggie
I dont know whether
you want to hear
from me or not
but I will write
nevertheless. That is may
be you dont care to
see any more of my
writing without
seeing who is doing
it. How did you
like the last Ghost
well I hope that we
can go to a better
ghost before summer
Well if you was in
St Paul last winter
you might have seen
something entertaining

Aug 1/18 [illegible] ing in flesh). Pulse 80. Patient is quiet; somewhat restless;
[illegible] els quite rationally. Appetite is good. He does no work. —
Sept 2 [illegible] B!. April 19/94. Patient has not been behaving well, the past
Oct 2 [illegible] get quite ugly & pugnacious, at times. Moved to B3. —
Nov [illegible] n 12 been quiet & well-behaved. Appetite good; bowels regular.
Dec [illegible] willingly & well in the dining-room. —
1895 Jan 3 [illegible] Oct 14 94 Appetite good; bowel regular; otherwise, no change
Feby [illegible] ay transferred to B! Habits are cleanly. —
Mar 3 [illegible] ells" fairly - willing to help - still has delusions -
Apl 1/18 [illegible] Quiet & well behaved. No special "spells" noted
" 30 [illegible] s well in the dining room. Habits are clean.
[illegible] 94. Apparently rests & sleeps well, at night. -
[illegible] of good personal habits. Has "spell" after talking
[illegible] e to crying, he becomes very excited. —
[illegible] ted); lately, has begun to urge himself
[illegible] nited States". Was recently visited by his mother. -
[illegible] quiet patient - still shows many delusions -
[illegible] works; once in a while plays billiards & games -
[illegible] old & his delusions - States "he is Grover
[illegible] te & House of Representatives". Not excited & very much
[illegible] & stubborn, at times. Otherwise about the same -
shows delusions. Continues stubborn & contrary, at times -
Pulse 80. Dec 31/94. Quite stubborn, at times -
Works some on ward. Makes no complaints.
Change & note in patient at this date. —
Has delusions. Thinks he is "Grover Cleveland"
95: Wt 172½ pds. P 70. March 31/95: About
ged. Has various & numerous delusions.
a letter, and, because it was not addressed as
Apl 30/95: No change: No improvement noted,
[illegible] way. Still holds numerous delusions. Does not work any. —
May 1/31 May 1/95. Wt 160 pds. P 84. May 31/95. Very restless: talks a great deal: has many & various
June 1 delusions: is very foolish. Coos & walking, but does no work. June 1/95: Wt 163 pds. P 72.
" 30 June 30/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is
July 1 more restless. Is in good physical health. July 1/95: Wt 165 pds. Pulse 90. —
" 31 July 31/95. Not much change, or, if any, it is for the worse. Talks in a disconnected and
foolish way. Does not work any: is very restless. Has many & various delusions. Health good.
Must exchange in habits. Coos & walking. -

— Carried to Transfer Book A page 430 —

There is no superior
or equal to me on This
earth.
I am The Judge The
world had wanted
God's only Son
King of Kings

EBERT, FIOLA & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by J. Z. Sancard, Sheriff, with the following history of case. There is no history of Consanguinity but some of heredity, as mother manifests well-marked Evidences of delusions. This is the 1st attack; h... seems increasing: is not variable; ... having delusions of persecution; ... Thinks he is not diseased being ... drinker. There ... restrained a ... heredity. Ou per ... He said that de ... to Montana, an ... though he was ... nation. Was h...

Dec 26 — Dec 26/93. On ad ... gray; condition o ... Quiet & well-be ... well-behaved. H ... been after him fr

" 27 — Dec 27/93. Quiet, ...

" 28 — freely; makes no co ... Att. Pulse St R 17 2

" 29/30 — Dec 29/93. Att. Pu...

" 31 — Dec 31/93. Since last ... ly day. Talks freely ...

1894 Jan 1/8 — Jan/94. Works ... during past week, ... has slept well at nig... been good; bowels a... to his delusions, to a ... somewhat. Helps, willingly, with the work a...

" 10 — Jan 10/94. Seems to be in a "beginning spell" - ha...

" 31 — Jan 31/94. Seems still to be in a sort of "spell".

Feb 1/11 — Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home

" 28 — Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.

Mar 1/7 — Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Olmsted County. Wt 176½ pds. Pulse

" 18 — Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was

" 31 — caught & put back in the ward. March 31/94. Does not changed much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (See sample attached). Shows delusions. Is in good physical condition. ———

Louis K. H...
Can be sho...
person or ...
loves ... me
when there is ...
I will go as ...
with her ...

There is no ...
or equal to ...
earth.
I am the ...
world ha...
God's ang...

King...

Rochester Minn Jan 12

in the opera house on several nights. you can guess whether you had a part in it or not. Well now I will close as I am not much of a writer with the pen and if there are anything in this letter that I have left out that will do you good now you can just think that it is done

From George who often thinks of you

1894

Apr 2/94. Wt 179 pds. (is steadily gaining in flesh). Pulse 86. Patient is quiet: somewhat restless; walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —

" 3/4 — April 3/94 Mr. ... transferred to B1. April 19/94. Patient has not been behaving well, the past ... ill get quite ugly & pugnacious, at times. Moved to B3 — ... has been quiet & well-behaved. Appetite good; bowels regular. ... to willingly & well in the dining-room. —

" 30 — Appetite good; bowels regular; otherwise, no change ... today. transferred to B1. Habits are cleanly. —

May 1/31 — ... "spells" lately. Willing to help. Still has delusions. ... get. Quiet & well-behaved. No special "spells" noted. ... looks well in the dining-room. Habits are clean.

" 31/94. Apparently rests & sleeps well, at night. ... & of good personal habits. Has "spells" of talking ... he is saying, he becomes very excited. ... attacked); lately, has begun to sign himself ... United States". Innocently visited by his mother. —

June 1/5 — ... a quiet patient. Still shows many delusions. ... and works; once in a while plays ball and games. ... all holds to his delusions. States "he is Grover ... Senate & House of Representatives". Not inclined to be very much ... situate & stubborn, at times. Otherwise about the same. ... still shows delusions. Continues stubborn & contrary, at times. ... pds. Pulse ... Dec 31/94. Quite stubborn, at times. ... land". Works some on ward. Makes no complaints. ... no change to note in patient at this date. —

" 30 — Quiet. Has Delusions. Thinks he is "Grover Cleveland"

July 1/31 — March 2/95. Wt 172½ pds. P 70. March 31/95. About ... well-behaved. Has various & numerous delusions. ... received a letter, and, because it was not addressed as ... it. April 30/95. No change. No improvement to note, ... mentally. Talks to himself all day. Still holds numerous delusions. Does not work any. —

May 1/31 — May 1/95. Wt 160 pds. P 84. May 31/95. Very restless: talks a great deal: has many & various ... delusions: is very foolish. Too out walking, but does no work. June 1/95. Wt 163 pds. P 72.

June 1/30 — June 30/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is more restless. Is in good physical health. July 1/95. Wt 165 pds. Pulse 90. —

July 1/31 — July 31/95. Not much change, or, if any, it is for the worse. Talks in a disconnected and foolish way. Does not work any: is very restless. Has many & various delusions. Health good. Neat & clean in habits. Does not walking. —

— Carried to Transfer Book A page 230 —

1893

Was brought here by J. Z. Dancard, Sheriff, with the ... d case. There is no history of consanguinity but found of heredity, as mother manif... ences of delusions. This is the 1st attack; h... sing: is not variable; no... -secution; mis... differed living ... drinker. There ... restrained a co... heredity. On per... He said that de... to Montana, an... though he was ... -nation. Was h...

Dec 26 Dec 26/93. On ad... gray; condition o... Quiet & well-be... Is well-behaved. H... been after him fr...

" 27 Dec 27/93. Quiet, ...

" 28 freely; makes no co... Att. Pulse 84 R 17 2...

" 29/30 Dec 29/93. Att. Pu...

" 31 Dec 31/93. Since last ... ly day. Talks freely ...

1894 Jan 1/8 Jan 1/94. Works con... during past week, ... has slept well at nig... been good; bowels a... to his delusions, to a ... somewhat. Helps, willingly, with the work in the ward. (Wt on 2d inst. 169 lbs. Pulse 80.). —

" 10 Jan 10/94. Seems to be in a "beginning spell" - has quit work. Restless; walks the hall; talks to himself.

" 31 Jan 31/94. Seems still to be in a sort of "spell".

Feb 1/11 Feb 1/94. Wt 173 lbs. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home

" 28 Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.

Mar 1/2 Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Olmsted County. Wt 176½ lbs. Pulse

" 18 Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was

" 31 caught & put back in the ward. March 31/94. Does not change much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letter (Specimen attached). Shows delusions. Is in good physical condition. ———

Louis ... Can b... person ... loves ... whom ... d ... wis...

97 ...

Yours ...

Kinzy ...

1894

Mar 2 April 2/94. Wt 179 lbs. (is steadily gaining in flesh). Pulse 80. Patient is quiet: somewhat restless; walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —

" 31/4 April 31/94 ...

April 19/94. Patient has not been behaving well, the past ... will get quite ugly & pugnacious, at times. Moved to B 3 — ... has been quiet & well-behaved. Appetite good; bowels regular. ... ts willingly & well in the dining-room. —

... 94. Appetite good; bowel regular: otherwise, no change ... today. Transferred to B 3! Habits are cleanly. — ... "spells" lately - willing to help - Still has delusions - ... 94. Quiet & well-behaved. No special "spells" noted. ... looks well in the dining-room. Habits are clean. ... 31/94. Apparently rests & sleeps well, at night. - ... & of good personal habits. Has "spells" of talking ... he is saying, he becomes very excited. — ... ched); lately, has begun to sign himself ... United States". Occasionally visited by his mother. — ... quiet patient - Still shows many delusions - ... works; once in a while plays billiards & games - ... holds his delusions - States "he is Grover ... enate & House of Representatives". Not violent & very much ... uate & stubborn, at times. Otherwise about the same - ... shows delusions. Continues stubborn & contrary, at times - ... s. Pulse 82. Dec 31/94. Quite stubborn, at times - ... ". Works some on ward. Makes no complaints. ... change & note in patient at this date. — ... t. Has delusions. Thinks he is "Grover Cleveland" ... eb 3/95. Wt 172½ lbs. P 70. March 31/95. About ... quiet & well-behaved. Has various & numerous delusions.

Apl 1/8 April 1/95. Wt 175½ lbs. Pulse 82. Apl 8/95. Received a letter, and, because it was not addressed as

" 30 "Grover Cleveland" he tore it up: would not read it. Apl 30/95. No change. No improvement noted, mentally. Talks to himself all day. Still holds numerous delusions. Does not work any. —

May 1/31 May 1/95. Wt 160 lbs. P 84. May 31/95. Very restless: talks a great deal: has many & various

June 1 delusions: is very foolish. Goes out walking, but does no work. June 1/95: Wt 163 lbs. P 72.

" 30 June 30/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is

July 1 more restless. Is in good physical health. July 1/95. Wt 160 lbs. Pulse 90. —

" 31 July 31/95. Not much change, or, if any, it is for the worse. Talks in a disconnected and foolish way. Does not work any: is very restless. Has many & various delusions. Health good. Neat & clean in habits. Except walking. —

Rochester Minn Jan 12

(This letter is intended for those who it will do good if any. For those who wants to read it and those best entitled to it.)

In some letter that I wrote I said that names never would be known. Well what I mean by that is that they would never become known from myself. Although they might as could for all I know from some body else.

And now if anything else has been said over

— Carried to Transfer Book "A" page 330 —

BARRETT, PICLAR & CHAMBERS, DAVENPORT, IOWA.

1893

Was brought here by J. Z. Duncard, Sheriff, with the following history of case. There is no history of consanguinity but found of heredity, as mother manifests well-marked Evidences of delusions. This is the 1st attack; h... seems increasing: is not variable; ne... having delusions of per-secution; was... differed to... drunker. There... restrained a... heredity. Super... He said that de... to Montana, an... though he was... nation. Was h...

Dec 26 — Dec 26/93. Quiet gay; condition o... Quiet & well-be... Well-behaved. H... been after hair fr...

" 27 — Dec 27/93. Quiet,

" 28 — freely; makes no c... Mk. Pulse 84. R 17. 2...

" 29 — Dec 29/93. Mk. Pul...

" 31 — Dec 31/93. Twice last ... ly day. Talks freely...

1894 Jan 1/8 — Jan/94. Works ... during past week, ... has slept well at nig... been good; bowels a... to his delusions, to a ... somewhat. Helps, willingly, with the wor...

" 10 — Jan 10/94. Seems to be in a "begining of spell"

" 31 — Jan 31/94. Seems still to be in a sort of "spell"

Feb 1/11 — Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Receives ... more

" 28 — Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.

Mar 1/18 — Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Chinton County. Wt 176½ pds. Pulse...

" 18 — Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was

" 31 — caught & put back in the ward. March 31/94. Does not change much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (See sample attached). Shows delusions. Is in good physical condition. ———

Louis K. Ha... Can be obt... person or ... loves. I w... when there ... I will go a... with her...

There is no... or equal t... earth.

I am Th... would k... God's or...

Kin...

by me that was not right or wrote said or done. I wish it to be taken for the right as it was meant for that although it may not sound that way; and now if they are any questions that people wants to ask me on any subject I will be more then glad to answer them. Yours Respy

Geo. Hayden

1894

Apr 2 — April 2/94. Wt 179 pds; (is steadily gaining in flesh). Pulse 86. Patient is quiet: somewhat restless; walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —

" 3/94 — April 3/94. Was today transfered to B3; April 19/94. Patient has not been behaving well, the past few days; tries to escape while out walking; will get quite ugly & pugnacious, at times. Moved to B3 —

" 30 — Apl: 30/94. Louis coming on this (B3) ward, he has been quiet & well-behaved. Appetite good; bowels regular. willingly & well, in the dining-room. —

Appetite good; bowels regular; otherwise, no change

day, transferred to B3. Habits are cleanly. —

spells" lately - willing to help - Still has delusions -

et. Quiet & well-behaved. "No special spells" noted

orks well in the dining-room. Habits are clean.

31/94. Apparently rests & sleeps well, at night. -

& of good personal habits. Has "spells" of talking

he is saying. He becomes very excited. —

acked); lately, has begun to sign himself

United States". Was recently visited by his mother. —

a quiet patient - Still shows many delusions -

ne works; nicein a while plays billiards & games -

ll holds his delusions - States "he is Grover

Senate & House of Representatives". Not inclined to be much

tinate & stubborn at times. Otherwise about the same -

Still shows delusions. Continues stubborn & contrary, at times -

pds. Pulse 82. Dec 31/94. Quite stubborn at times -

laud". Works some on ward. Makes no complaints.

s. No change to note in patient at this date —

Quiet. Has delusions. Thinks he is "Grover Cleveland"

March 2/95. Wt 172½ pds. P 70. March 31/95. About

el-behaved. Has various & numerous delusions -

received a letter, and, because it was not addressed as

it. Apl 30/95. No change. No improvement noted,

mentally. Talks & minds self all day. Still holds numerous delusions. Does not work any. —

May 31 / June 1 — May 1/95. Wt 160 pds. P 84. May 31/95. Very restless: talks a great deal: has many & various delusions: is very foolish. Goes out walking, but does no work. June 1/95. Wt 163 pds. P 72.

" 30 — June 30/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is more restless. Seems good physical health. July 1/95. Wt 165 pds. Pulse 90. —

July 1 / " 31 — July 31/95. Not much change, or, if any, it is for the worse. Talks in a disconnected and foolish way. Does not work any: is very restless. Has many & various delusions. Health good. Mat & clean in habits. Does not walking. —

— Carried to Transfer Book A page 430 —

Personal and Medical History of George A. Hayden

EBERT, FICKE & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by J. Z. Suncard, Sheriff, with the following history of case. There is no history of consanguinity but some of heredity as mother manifests well-marked Evidences of delusions. This is the 1st attack. [illegible] seems increasing: is not variable; no [illegible] having delusions of persecution; [illegible] tectives. Think he is not disposed to [illegible] Patient has been a free drinker. There [illegible] head. He has not been restrained [illegible] cause of the disease is heredity. Habits are regular. — He said that de[illegible] watching him from Iowa to Montana, an[illegible]d, acted towards him as though he was [illegible] unusual during examination. Was h[illegible]

Dec 26 — Dec 26/93. On admission [illegible] low light; hair light; eyes gray; condition [illegible]t. Bodily condition clean. Quiet & well-be[illegible]rally free; no cough noticed. Is well-behaved. [illegible]ins; says "Gamblers have been after him fo[illegible]nts or injuries to report. — Behavior is good. He talks freely; makes no c[illegible]d and slept well, last night. 4M. Pulse 84 R 17 [illegible]ly. Bm. Pulse 88 To 99 ℄. Dec 29/93. 4M. Pu[illegible]ed 78. Restless, again, today. Dec 31/93. Since last [illegible]night. Has been well-behaved [illegible]ly day. Talks freel[illegible]casional letter.

1894
Jan 1/8 — Jan/94. Works so[illegible] Is & a 3 nights during past week[illegible] hours, but, as a rule, he has slept well at ni[illegible] from 74 to 80. Appetite has been good; bowels [illegible] Talks freely but still holds to his delusions, to[illegible]s, and is, probably, improving somewhat. Helps[illegible](69 pds. Pulse 80.). —

" 10 — Jan 10/94. Seems to[illegible]alks the hall; talks to himself.

" 31 — Jan 31/94. Seems still to be in a sort of "spell". —

Feb 1/11 — Feb 1/94. Wt 173 pds. Pulse 78. Feb 11/94. Deluded. Does not seem to improve. Received books from home

" 28 — Feb 28/94. Is quietly behaved. Makes no complaints. Still shows delusions. Is in good physical health.

Mar 1 — Mar 1/94. Patient was committed here under the "Law of 1893", recently declared unconstitutional. He was, today, Taken out and Returned, under "new warrant" from Chinton County. Wt 176½ pds. Pulse —

" 18 — Mar 18/94. Ran away from Attendant (Dennis Byrnes) while coming from laundry, today. Was

" 31 — caught & put back in the ward. March 31/94. Does not change much. Continually asking to let out, so he can go away. Sits idly about. Does no work. Writes occasional letters (See sample attached). Shows delusions. Is in good physical condition. —

Personal and Medical History of George A. Hayden

1894

Apr 2 — April 2/94. Wt 179 pds. (is steadily gaining in flesh). Pulse 80. Patient is quiet: somewhat restless; walks about the ward considerably. Talks quite rationally. Appetite is good. He does no work. —

" 3/4 — April 3/94. Was today transferred to B3; April 19/94. Patient has not been behaving well, the past few days; tries to escape, while out walking; will get quite ugly & pugnacious, at times. Moved to B3. —

" 30 — April 30/94. Since coming in this (B3) ward, he has been quiet & well-behaved. Appetite good; bowels regular. Talks rationally; habits are neat & clean; works willingly & well in the dining-room. —

May 1/8 — May 1/94. Wt 179 pds. Pulse 75. May 18/94. Appetite good; bowels regular; otherwise, no change to note since report of April 30th. Was today transferred to B1. Habits are cleanly. —

" 31 — May 31/94. Quiet & well behaved; has had no "spells" lately. Willing to help. Still has delusions.

June 1/30 — June 1/94. Wt 173 pds. Pulse 84. June 30/94. Quiet & well-behaved. No special "spells" noted though he still holds delusions. Works well in the dining room. Habits are clean.

July 1/31 — July 1/94. Wt 171½ pds. Pulse 84. July 31/94. Apparently rests & sleeps well, at night. Quiet & well-behaved, by day. Clean, tidy & of good personal habits. Has "spells" after talking when it is difficult to understand what he is saying; he becomes so very excited. Wrote quite a few letters (see samples attached); lately, has begun to sign himself: Grover Cleveland, President of the United States". Incorrectly directed by his mother. —

Aug 1/31 — Aug 1/94. Wt 169 pds. Pulse 84. Aug 31/94. Is a quiet patient. Still shows many delusions. Gets much excited, when talking. Does some works; once in a while plays billiards & games.

Sept 3/30 — Sept 3/94. Wt 169 pds. P86. Sept 30/94. Still holds to his delusions. States "he is Grover Cleveland & that these Buildings are the Senate & House of Representatives". Not violent by any means.

Oct 2/31 — Oct 2/94. Wt 168 pds. P78. Oct 31/94. Obstinate & stubborn, at times. Otherwise about the same.

Nov 1/30 — Nov 1/94. Wt 168½ " " 82. Nov 30/94. Still shows delusions. Continues stubborn & contrary, at times. Does some work, onward.

Dec 3/31 — Dec 3/94. Wt 172½ pds. Pulse 82. Dec 31/94. Quite stubborn, at times. Still holds delusions. "Thinks he is Grover Cleveland". Works some, onward. Makes no complaints.

1895
Jan 3/31 — Jan 3/95. Wt 173 pds. Pulse 86. Jany 31/95. No change to note in patient at this date. —

Feb 1/28 — Feb 1/95. Wt 176 " " 80. Feb 28/95. Quiet. Has delusions. Thinks he is "Grover Cleveland" & wants to be addressed. Works some, onward.

Mar 2/31 — March 2/95. Wt 172½ pds. P 70. March 31/95. About the same, show month to month. Quiet & well-behaved. Has various & numerous delusions.

Apl 1/18 — April 1/95. Wt 175½ pds. Pulse 82. Apl 18/95. Received a letter, and, because it was not addressed as "Grover Cleveland" he tore it up: would not read it.

" 30 — Apl 30/95. No change: no improvement noted, mentally. Talks to himself all day. Still holds numerous delusions. Does not work any. —

May 1/31 — May 1/95. Wt 160 pds. P84. May 31/95. Very restless: talks a great deal: has many & various

June 1/30 — delusions: is very foolish. Goes out walking, but does no work. June 1/95. Wt 163 pds. P 72.

" 30 — June 30/95. Seems to be growing worse, of late: grows more foolish: talks more nonsense & is more restless. Seems good physical health. July 1/95. Wt 165 pds. Pulse 90. —

July 1/31 — July 31/95. Not much change, or if any, it is for the worse. Talks in a disconnected and foolish way. Does not work any: is very restless. Has many & various delusions. Health good. Neat & clean, in habits. Does not walking. —

— Carried to Transfer Book A page 230 —

Personal and Medical History of J. Frank Kubista

EBERT, FIELKE & CHAMBERS, DAVENPORT, IOWA

Whole No. 3303.

Residence, Somerset, Steele Co. Minnesota

Date Admission, 27th December 1893

Admitted by, D. Kilbourne Hour, 4 PM.

How Sent, M. B. Chadwick, Jof P, Steele County.

Sex, Male

Age, 36 (on Feby 27/93).

Civil Condition, Divorced

Children, 5 (five).

Age Youngest Child,

Occupation, Farmer

Degree Education, Fair; Common Sch

Profession Religion, Catholic

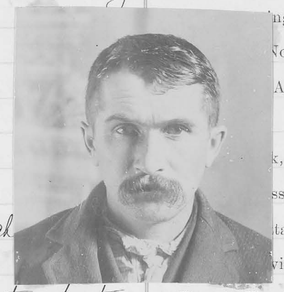
Habits, Have been somewhat intemperate.

Nativity, Bohemia (Parents also born here)

Physicians Committing, Geo. L. Hatch & R. C. Banks

Correspondents, (brother) Anton Kubista Owatonna

Family Physician, J. M. Smith, Owatonna, Minn



No. for Year, 173.

Insane Relatives, None

Cause Exciting, Domestic Troubles

Cause Predisposing, not stated

Form, mania-a-potu

ng Bodily Disorder, None mentioned

ot, not

Attack, Friday, Dec 22nd 1893

about 5 days

k, 1st

ssions, 1st

tack, 36+

ving, Jany. 21. 94

Time in Hospital, 24 days.

Result, Recovered

Crossed from Insane List, April Act, 1921, because illegally committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr Herzog - Dec 28/93.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Good

Recent Events, good.

Special Subjects, Hazy & Blank for past 5 or 6 days. Does not remember Coming here yesterday.

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, In the main, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, Impaired

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not, None manifested

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None manifested

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, Coherent. Answers question fairly

Voluble or Reticent, readily & even volunteers some information.

GENERAL DESCRIPTIVE REMARKS:

Seems to know what kind of a place this is; but does not know why he was sent here. Says "he is just as straight as any man". Says he has some slight pain in head, also in stomach." Tells a story of having had some trouble with his wife, her leaving him twice & going to live with another man, by whom, he claims, she had a child. Patient states that 12 years ago he fell off a load of wood & sustained an injury to right parietal region, which leaves a slightly depressed cicatrical scar 1½ inches in length. States also that last winter he injured himself again in same region but there is no scar from this one. Patient has some motor disturbance & something of the general appearance of incipient Paresis, but, on the other hand, the history seemed to point to a primary curable dementia. Further observation will be necessary, to make an estimate of his mental condition.

Personal and Medical History of J. Frank Kubista

Copy of order for hearing of petition of Frank Kubista to be appointed Guardian of J Frank Kubista served as Dr. A. F. Kilbourne Dec 27/93.—
Said hearing to be on Thursday 11th Jany 1894. at Probate office in Court House at Owatonna

M. B. Chadwick
Probate Judge

ISSION.—(Continued.)

TICS.

NUTRITION, Poor

Promptness Movement, prompt

n, ready

ucate. Standing w/ feet quite close. Standing eyes shut Hour and Irritation / Coordination Leg -

Legs, Knee-jerk impaired; gait shuffling

TREMORS, Hands, very slight Tongue, Slight fibrillary tremor.

Facial Muscles, none General, very slight

REFLEXES, Patellar, Equal; about 8-

Other Reflexes, Slight ankle-clonus.

ARTICULATION, Hesitating, Somewhat Slurred, probably due to unfamiliarity with English language.

FACIAL EXPRESSION, Somewhat blank.

SENSIBILITY, ✓

HEART, s action good

LUNGS, Good, as far as known.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, See history ONSET GRADUAL OR SUDDEN, See history -

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") w/ history of heredity was brought out through essays

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters, 1 sister Died of Phthisis.

Personal and Medical History

HERBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3603.

Residence, Somerset, Steele Co. Minn.

Date Admission, 27th December 1893

Admitted by, D. Kilbourne Hour, 4 PM.

How Sent, M. B. Chadwick, Jof P., Steele County.

Sex, Male

Age, 36 (on Feby 27th/93).

Civil Condition, Divorced

Children, 5 (five).

Age Youngest Child, —

Occupation, Farmer

Degree Education, Fair; Common Sch.

Profession Religion, Catholic

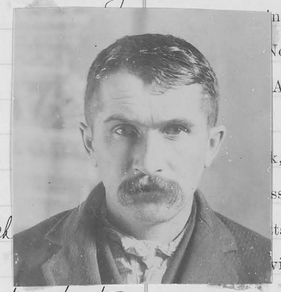
Habits, Has been somewhat intemperate.

Nativity, Bohemia (Parents also born there).

Physicians Committing, Geo. L. Hatch & W. R. C. Banks

Correspondents, (brother) Anton Kubista Owatonna

Family Physician, F. M. Smith, Owatonna, Minn



Ca.

Form, m.

ng Boa.

Not, —

Attack, Friday, 3

about 5 day

k, 1st

ssions, 1st

tack, 36+

ving, Jany. 21. 94

Time in Hospital, 24 days.

Result, Recovered.

Crossed from Absentee List, April Act, 1897, because illegally committed.

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog - Dec 28/93.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, Sluggish

MEMORY:

Past Events, good

Recent Events, good.

Special Subjects, Nearly a blank for past 5 or 6 days. Does not remember Coming here yesterday. —

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, In the main, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, Impaired

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not, None manifested

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None manifested

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, Coherent. Answers questions fairly

Voluble or Reticent, readily & even volunteers some information.

GENERAL DESCRIPTIVE REMARKS:

Seems to know what kind of a place this is; but does not know why he was sent here. Says "he is just as straight as any man". Says he has some slight pain in head, also in stomach." Tells a story of having had some trouble with his wife, her leaving him twice & going to live with another man, by whom, he claims, she had a child. Patient states that 12 years ago he fell off a load of wood & sustained an injury over right frontal region, which leaves a slightly depressed linear scar 1½ inches in length. States also that last winter he injured himself again in same region but there is no scar from this one. Patient has some motor disturbance & something of the general appearance of incipient Paresis, but, on the other hand, the history seemed to point to a primary curable dementia. Further observation will be necessary, to make an estimate of his mental condition.

Personal and Medical History of J. Frank Kubista

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 4 3/4 WEIGHT, 174 pds NUTRITION, Poor

WOUNDS OR ABNORMALITIES, none noted

TONGUE, Tremors, Slight fibrillary Coatings, pale - raw - teeth marked grayish, at base. Promptness Movement, prompt

PUPILS, Equality, right pupil normal; left slightly enlarged Size, —

Response Light, ready; excessively mobile Accommodation, ready

SIGHT, very much impaired; markedly myopic

HEARING, Seems normal

COORDINATION, Arms, Finger to nose, eyes shut, somewhat inaccurate. Standing up, feet close, poor. Standing, eyes shut slight swaying. Turning quickly, loses and maintains coordination well

Legs, somewhat impaired; gait shuffling

TREMORS, Hands, very slight Tongue, Slight fibrillary tremor.

Facial Muscles, none General, very slight

REFLEXES, Patellar, Equal; about 8 -

Other Reflexes, Slight ankle -, Clonus. —

ARTICULATION, Hesitating, Somewhat Slurred, probably due to unfamiliarity with English language.

FACIAL EXPRESSION, Somewhat blank.

SENSIBILITY, ✓

HEART, action Good

LUNGS, Good, as far as known.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, See history ONSET GRADUAL OR SUDDEN, See history -

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") no history of heredity was brought out though history

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters, 1 sister Died of Phthisis.

Personal and Medical History of J. Frank Kubista

EGBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA.

1893

This patient was brought here by J.Z. Barncard, Sheriff, attended by Victor Kubista (brother), with the following history. There is no history of Consanguinity or hereditity. This is 1st attack, Symptoms appearing last Friday, (Dec 22/93); left home; went to town & wandered about for 24 hours, talking incoherently part of the time. The disease seems increasing, but is variable & there are rational intervals, though he is not fully sane at any time. Derangement is now shown by his having 'spells' of crying, and talking incoherently; these 'spells' are followed by Stupor. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. No peculiarities of temper & was previously those Habits have been somewhat intemperate. There is no history of any severe disease or injury to head. He has not been restrained or confined, nor under medical treatment. Supposed cause of the disease is domestic trouble. On personal examination, the following noted; tendency to Stupor; nodding of the head; convulsive condition of the head and eyes, particularly on exposure to light; he answers but little. Says almost nothing.

Dec 27 Dec 27/93. On admission, was put on B³ (SR. Complexion dark; hair black; eyes gray; condition of skin good. Bodily Condition dirty. There are several small moles on back; one on neck and one on breast. Patient is well-behaved). No eruptions or ulcers noticed? Talks quite sensibly. Says his wife was sent down here last week & that she died last Sunday. Pulse 72 R. 19. T. 99 2. Appetite good; no cough noticed.
" 29 No complaint or injuries to report, today. Dec 29/93. Probably has been sleeping fairly well, at night. —
" 30 AM. Pulse 78 T. 98.6. Appetite good. Bowels have moved. No delusions noted. Dec 30/93. Slept well,
" 31 all last night. AM. Pulse 108. T. 99.8. Appetite good; bowels seem regular. Dec 31/93. Continues to rest & sleep well, at night. AM. Pulse 72. T. 99 2. Is talking about going home. Attendant remarks that patient appears to be all right, at present. Habits are clean.

1894
Jan 1 Jan 1/94. Slept 7 hours last night. AM. Pulse 78. T. 99 6. Appetite good. Bowels regular. Works some on the ward. Was, today, visited by his brother. Jan 2/94. AM. Pulse 102. T. 99.5. Wt. today, 122½ pds.
" 3 Jan 3/94. AM. Pulse 81. T. 99.8. Appetite good. Bowels regular. Clean & tidy. Works some on the hall.
" 4 to 9 Jan 4/94. AM. " 96 " 100.— Jan 5/94. AM. Pulse 104. T. 99.8. Jan 8/94. Pulse 90. T. 99 4.
" 9/10 Jan 9/94. AM. " 90 " 99.4. Jan 10/94. Patient has continued to rest & sleeps well at night.
AM. Pulse 100. T. 99.6. Appetite good. Bowels normal. Has greatly improved & now appears to be perfectly well. (Affdt). Has, all along, been quiet & well-behaved, & has helped willingly with the work. Patient is, in manner, quite clear. He describes himself as not knowing what he was about during the few days before admission, but became quite clear, some hours after coming. Probably alcoholism has a good deal to do with it, though he does not admit it. —
" 11 Jan 11/94. Went home with father & nephew today. Was fairly well.

Crossed off the Records; was illegally Committed —

Personal and Medical History of Albert Kroeger

1894 From 208
Jan 30 Discharged

24/29
3547

DETAILED HISTORY OF SICKNESS OF MR Albert Kroeger
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Nov. 28	7	3	70	90					Noisy restless and filthy requires continual attendance appetite ravenous.
29	7	5	94	88					Is about the same every day. Bowels are mostly got on Irrigated. temper better. sleeps well
30	7	5	88	76					Noisy restless and dirty. Bowels free appetite very good.
27	7	5	98	86					Has been about the same every day slept 8 hours
28	7	5	88	88					Noisy restless and filthy. requires continual attendance Bathed removes nuisance by the aid of a pail. sleeps most of the night
29	7	5	92	80					Noisy restless and filthy.
24	7	5	88	99					Appetite ravenous. Is noisy restless and filthy requires continual attendance Bowels free.
25	7	84							10 a.m. Discharged to @ 3.

Appetite good. Habits dirty. Noisy and restless. Requires one attendant. Sleeps. Keeps himself clean. Slept on floor in @ part of the night. His head was inflicted by coming in contact with the floor 2 other bruises. Has 3 bruises on neck beyond and side of face & the nose and side of face also bruises & results. There are also bruises on breast, shoulder and legs. The last-named injuries are of yellow color, indicating that several days have elapsed since first received.

Dec 1/94. Says [illegible] at times. Dec 6/94. Bruise over right eye; says he received it on 6th in night. Dec 9/94. Sleeps somewhat better; has not required to close attention.

(Carried to Transfer Book A. Page 139)

1893 ...

J...

...or;
...he
...of skin
...ast. Patient
...sent down
...ough noticed.
...ell, at night. —
30/93. Slept well,
93. Continues to rest +
Attendant remarks that

Bowels regular. Works + sews m
(℞) 99.5. Wt. today, 132½ lbs.
Clean + tidy. Works + sews on the hall.
9.8. Jan 8/94. Pulse 90. T℞ 99.4.
ined to rest + sleeps well at night.
s greatly improved + now appears
behaved, + has helped willingly with the work,
as not knowing what he was about
quite clear, soon after coming. Probably
he does not admit it. —

Jan 11/94. Went home with fa... — Was fairly well.

Crossed off the Records; was illegally Committed —

Personal and Medical History of Albert Kroeger

188[illegible] Ward 208

Case 20

-release and ...

24/229

35-47

DETAILED HISTORY OF SICKNESS OF MR Albert Kroeger
DIAGNOSIS.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM	
Nov 12		9	2	24					9 P.M. Came out ward from C 3 very noisy and troublesome - put to bed. Discovered a fluctuating tumour during the swearing - over the sacrum - patient to the left side - 6 by 3 inches in size - first noticed while bathing - Patient is bruised over the hips and buttocks and on various other portions of the body - Skin over tumour presents normal - no pain - Rectal examination reveals nothing - During the afternoon was made to vomit an expectant opinion - Vomited a quantity of dark coloured blood - Microscopical examination reveals nothing but blood - Bowels sealed with cold sore - Slept 7 hours
13	7	9	92	80	20	24	99	99	Very noisy + troublesome during night - very filthy - Continually putting fingers in rectum - tumour appears same - Dressed with sugar - Dressing removed during night + broke the bed - Masturbates frequently - Appetite good. Slept 7 hours
14	7	3	92	76	22	20	99	98.6	Very restless dirty and destructive - requires continued attendance - Very dirty habits - Slept 7 hours
15	7	8	9	78					Very restless noisy and filthy - Continually putting fingers in rectum - Dressing removed during night - Bowels open - Appetite very good - Bowels full - Slept 7 hours
16	7	8	90	76					Put mittens on hands 7 A.M. - Cannot keep hands in bed - very noisy restless and filthy - requires continued attendance - Slept 7 hours
17	7	8	90	72					Very noisy restless and filthy - gives bath - Slept 7 hours

...ings pain in testicles at times. Dec 8/94. Bruise on right eye; says he received it on 6th in night. Dec 9/94. Sleeps somewhat better; has not required so close attention.

(Carried to Transfer Book A. Page 139)

1893

...has
...ease
...stupor;
...ight; he
...tion of skin
...breast. Patient
...as sent down
...no cough noticed.
...well, at night. —
...ec 30/93. Slept well,
...31/93. Continues to rest &
Attendant remarks that

...Bowels regular. Works & sews on
...(æ) 99.6. Wt, today, 132½ lbs.
...Clean & tidy. Works & sews on the hall.
99.8. Jan 8/94. Pulse 90. T(æ) 99.4.
...tinued to rest & sleeps well at night.
...as greatly improved & now appears
...behaved, & has helped willingly with the work.
...as not knowing what he was about
...quite clear, soon after coming. Probably
...he does not admit it. —
...has fairly well.

...for
Patient
during the ...
alcoholism has a
Jan 11 Jan 11/94. Sent home with ...

Crossed off the Books; was illegally Committed -

Personal and Medical History of Albert Kroeger

188[illegible] From 208

Dec 30 -relsome and getting into frequent fights (sometimes 3 a day) & receives frequent bruises - Has many delusions - Talks incoherently - No improvement noticed - Seems getting worse (- Is a chronic masturbator) -

" 4 Oct 1/94. Wt 117 lbs. Pulse ... - Habits have become quite dirty - Sleeps in ward C4. Gets into frequent fights - Oct 4/94. Soils bed, also soils his clothing, by day - Very noisy & excited, today. Will not keep his clothing on him - was given hyp. to-night at 10.30 am. Tears his clothing - P.M. Lengthy, contrary, full of delusions. Habits dirty.

" 10 Oct 10/94. Continues restless & noisy, the greater part of last night & sleeps very poorly. Noisy, excited, ugly, violent & troublesome by day. Has frequent fights & receives many bruises & cuts - Is full of delusions.

" 14 Habits continue very dirty - Oct 14/94. Does not improve any - Engaged in 3 fights to-day; he being the aggressor. Got some severe bruises & kicks in them - Has been given long walks, but no effect - Is quarrelsome & destructive in dining-room & has to be fed out in the hall. Habits are now very filthy -

" 21 Oct 21/94. His long walks are continued; they seem to have the effect of making him sleep some better - Yet he is still as noisy & troublesome as ever in the ward. Habits continue to be very filthy. -

" 31 Oct 31/94. Appetite very good; bowels regular. Physical condition fair - (Masturbates continually) - Conduct & behavior, by day, does not change in the least & are of the worst kind - Contrary & ugly all day & every day - Has been in fights, of his own provoking & received some injuries (none considered serious) during about 15 days of the month - He is, at times, destructive. Habits continue filthy -

Nov 1/94 Nov 1/94. Wt 118 lbs. P 98. Nov 4/94. Urani seclusion 5 hours, today. Nov 8/94. Has continued noisy and restless at night, sleeping poorly. Noisy, ugly, annoying the others & fighting quite frequently, by day. Has been very troublesome, requiring constant watching - Has received some bruises & kicks in these fights -

" 11 Nov 11/94. Has been given a "Combination bath" morning & evening, for the past 6 days: these seem to have a quieting effect - He has also been sleeping much better, at night. Habits are still dirty -

" 12 Nov 12/94. Inclined to be noisy, all day - Combination bath given this morning - Abscess has developed at base of spine & patient was removed to C2, for treatment, at 3 PM. Very noisy & troublesome & was put to bed - A fluctuating tumor was discovered, over the sacrum (see particulars attached Nurses' record) - Same treated - & microscopical examination made of Contents - Nothing revealed but blood. Nov 13/94. Slept 4 hours last night. Is very troublesome, today; also restless noisy & filthy.

" 13

" 16 Tumor appears some smaller. Patient is very destructive - Masturbates frequently. Nov 16/94. He continues restless, noisy & filthy & requires constant attendance. Is destructive. Pitches food on him, at 7 AM. He cannot be kept in bed - Nov 19/94. Tumor is better. Nov 24/94. Has been kept restrained by mittens which he once succeeded in getting off. Conduct & behavior do not change any. He is destructive & filthy - Requires constant attendance. Sleeps well, at night

Nov 19/94

" 25 Nov 25/94. 10. AM. Transferred to C3. Nov 26/94. Noisy 4 hours, sleeping but 5 hours, last night. (Slept in C4). Received some bruises during the night, by coming in contact with the fire & fire-poker. Is noisy & very troublesome, today. Habits very dirty. Appetite good. -

Nov 26/94

" 27 wears mittens. Nov 27/94. No change in behavior - In seclusion 10 hours. Sleeps very poorly -

" 28 Nov 28/94. No change in behavior until sent to C2, when he became quieter. Nov 29/94. Decided

" 30 change noted in his behavior, upon being allowed to go to C2. Nov 30/94. Continues more quiet.

Dec 1/94 Dec 1/94. Wt 118 lbs. P 98. Dec 3/94. Has been restless & sleeping poorly, the past few nights; is

" 6 somewhat quieter, by day, though quite troublesome, at times. Dec 8/94. Bruise over right eye; says he

" 9 received it in C4, in night. Dec 9/94. Sleeps somewhat better; has not required to close attention.

(Carried to Transfer Book A. page 139)

Personal and Medical History of Gustav Seitz

HERBERT, PUTNAM & CHAMBERS, DAVENPORT, IOWA



Whole No. 3605.
Residence, Virginia, Minn.
Date Admission, 27th December 1893.
Admitted by, Dr. Kilbourne Hour, 7.30 P.M.
How Sent, H.L. Buck, Jot'l, Virginia
Sex, Male.
Age, 57.
Civil Condition, married
Children, 3
Age Youngest Child, — 7
Occupation, Hardware - Clerk
Degree Education, Fair; Common school.
Profession Religion, not a church-member
Habits, probably intemperate
Nativity, Baden, Germany (parents born in Germany)
Physicians Committing, Franklin Staples & J. B. McGaughey.
Correspondents,
Family Physcn - not known.

175.
...es, no history obtained
... not known
...sing, previous attacks
...via-a-vis
... Bodily Disorder, none, so far as known.
... Threatened suicide
...ack, 2 days ago
... 2 days —
... not 1st
...ons, 1st time (has been at Fergus Falls).
Age First Attack, not given.
Time of Leaving, Apr. 1st '94
Time in Hospital, 3 mos. 5 da.
Result, Rec.

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

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog, Dec 30/93. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, seems clear
Quick or Sluggish, fairly quick
MEMORY:
Past Events, } good
Recent Events, }
Special Subjects, does not remember exactly all that happened during attack
PERCEPTIVITY:
Alert or Dull, fairly alert
Correct or Illusive, correct
REASONING POWER:
Ordinary Subjects, } good
Own Mental State, }
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, yes
Depressed,
DELUSIONS:
Systematized or Not, none noted
Special Subjects,
Transitory or Not,
HALLUCINATIONS: none
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, coherent
Voluble or Reticent, quite voluble

GENERAL DESCRIPTIVE REMARKS:

Admits having been given to drinking too much. Drink has an attack similar to the present and he admits were the cause of his previous commitment to Fergus Falls (July '92 – 14 months). States was perfectly well & strong when he left Hospital – Claims he has a peculiar feeling when that comes on he cannot leave the liquor alone. Has attempted suicide during these attacks. Was also at "Rest Island" from Apl 15/92 to Oct 1/92. Patient has "lucid intervals" when examined during morbid. He realizes his own mental condition quite well & probably properly ascribes it to drink. During the period of attack (which is preceded by peculiar feeling at pit of stomach) his manner is about as described in the warrant of Commitment & is accompanied by hallucinations of hearing which he recognizes & he each during the remission. He is being despondent & not receiving encouraging letters from his wife probably precipitated this drinking attack. —

Personal and Medical History of Gustav Seitz

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9½ WEIGHT, 175 lbs. NUTRITION, very fair
WOUNDS OR ABNORMALITIES, few (Supervisor's Report (next Page))
TONGUE, Tremors, none Coatings, pale, flabby, teeth marks Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, normal Accommodation, normal.
SIGHT, markedly presbyopic
HEARING, good
COORDINATION, Arms, somewhat unsteady, typical tests: finger to nose, eyes shut, somewhat unsteady
Legs, standing on foot, not very good: standing eyes shut, quite steady.
TREMORS, Hands, slight Tongue, none
Facial Muscles, none General, none
REFLEXES, Patellar, equal – about 9 – response rapid.
Other Reflexes,
ARTICULATION, Hesitating, Foreign accent Slurred,
FACIAL EXPRESSION, anxious – troubled –
SENSIBILITY,
HEART, beat rapid – feeble – no murmurs –
LUNGS, good – so far as known.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Previous attack ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

1893

Was brought here by Deputy Sheriff E V Bogart, with the following history. Can give no history as to consanguinity or heredity. This is not 1st attack; was, some years ago, insane and was in Hospital at Fergus Falls, Minn: result of treatment not known. First symptoms of this attack were manifested 2 days ago; became sleepless & violent. Disease appears to be increasing; no rational intervals, now; derangement is now shown in all subjects. He is violent; tries to commit suicide, or, at least, says he wishes to do so. Is not disposed to injure others; shows sound disposition & destroys furniture. Patient is probably intemperate. Not subject to any severe disease &c, so far as known. Do not know Cause of the disease. Has had no medical treatment in this attack. On personal examination, patient is wild; violent; answers cannot be obtained from him. Says "he wishes to kill himself."- Struck table; pulls his hair; cries &c. Appearance & manner excited.

Dec 27 Dec 27/93. On admission, was put in 13°. (S.R. Complexion dark; hair black; eyes blue; blister on back; one mark on left leg. Bodily condition clean. Second toe on left foot cut off. Is well-behaved). Patient is in good physical condition. It is learned that he tried to hang himself in jail. Condition of skin fair; has small eruption on back. Pulse 104 R 18.- T◎ 99.6. Dec 28/93. Slept 8 hours, last night. AM. Pulse 102. R 18. T◎ 100. Appetite good. Bowels genually free. No cough noticed. Walks quietly about the hall. Talks freely. Seems to tell a straight story about his troubles & past life. No delusions noted. PM. Pulse 106. T◎ 99.8. No complaints or injuries to report. Dec 29/93. Was quiet and slept 7 hours, last night. AM. Pulse 100 R 17 T◎ 99.8. Appetite good. Complains some, today, of his eyes being sore. Had a "spell" today for an hour or so. Was talking about stealing an engine and about Sheriffs being after him" - at other times talked all right. PM. Pulse 104. T◎ 99.6.
" 30 Dec 30/93. Again passed a fairly good night. AM. Pulse 102. T◎ 99.6. PM. " 98 T◎ 99.4. Is
" 31 quiet and well-behaved. Habits are good. Dec 31/93. Was restless for 2 hours or so, Sleeping
1894 but 6 hours, last night. AM. Pulse 98. Walks quietly about the ward: talks quite freely. —
Jan 1 Jan 1/94. Rest and sleep, last night, were again disturbed. AM. Pulse 95. Quiet and well-
" 2 behaved. Plays games. Reads some. Jan 2/94. Slept 7 hours, last night. AM. Pulse 95.
" 3 Dft, today, 174 pounds. Jan 3/94. Slept 6 hours, restless 2 hours or so, last night. AM. " 90.
" 10 Talks quite freely & pleasantly. Works some on the ward. Jan 10/94. During the past week, patient has been quiet and restful, sleeping uniformly 8 hours, on each night. Pulse, taken each morning, has ranged from 82 to 88. (today 84). Has continued quiet and well-behaved. Pleasant in manner and conversation; talking quite freely & expressing no delusions, since mentioned above as 29th ult.
Spirits have improved & he is now quite cheerful. Has attended one or two of the weekly Card-parties & has seemed to enjoy them much. Occasionally Complains of rheumatic pains. Works on ward
" 15 & clean, tidy & of good personal habit. He reads some & writes occasional letters. Jan 15/94. He
" 31 Complains some of rheumatic pains. Jan 31/94. Appetite good. Is quiet & well behaved. Talks freely. Works some on the ward; also goes out walking. Seems to be in good Spirits. —
Feb 1/28 Feb 1/94. Dft 179 pds. (some gain in flesh, in past month). Pulse 78. Feb 28/94. Apparently rests and sleeps well, at night. Appetite good. Always quiet and well-behaved. Talks freely & sensibly. For some time has been given instruction to members of the "Hospital Band"; has also worked some on patterns for fresco-painting &c. Habits are clean and neat. —
Mar 1/31 March 1/94. Dft 184 pds (a gain of 5 pounds in past month). Pulse 80. Mar 31/94. Seems quite well now.

1894

Apl 1 April 1/94. Patient was committed here under the "new Law", which has been declared unconstitutional. He was counted off the books, today, he having been staying here willingly to help in training the Hospital Band. He has been quite well, mentally, for some time, his attack, seemingly, having been a "mania-a-potu".

CASE RECORD.

Vol 35
Folio 361

Patient's Name Gustav Seitz Name Disease February 9 Name Physician [illegible]

1894 Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms
February 9				6 P.M. Patient received on ward & appeared quite		
	100	90	22	weak. has slight fever. put to bed.		
				very restless most of night. slept 2 hours.		
10	100.6	84	24	Gave Sedlitz powder 6 45 A.M. 9 A.M. Bowels		
	100.6	72	20	moved. Complains of feeling dizzy and weak		
				Night. out of bed several times looking out of window		
11	99.2	76	18	Appears some brighter to day.		
	100.8	90	24	Night slept 8 hours resting 5 hours.		
12	100	80	20	Boil on ear. opened and pussed. very little		
	99.2	78	24	discharge of puss. Night. slept 5 hours.		
13	100	78	20	Appetite good. bowels regular.		
	100.4	78	20	Night. slept 5 hours.		
14	100	78	22	Complains of bowels being costive. 11 30 A.M.		
	100.2	78	24	gave sedlitz powder. bowels moved 1 P.M.		
15	99.2	78	22			
	99.8	78	18			
16	99.4	74	22	Ufore waid dressed 4 hores during P.M.		
	100.4	84	20			
17	100	80	22			
	99	80	20	7 P.M. Transfered to C.3.		

Recorded by _____ Nurse.

Personal and Medical History of **Gustav Seitz**

1893

He brought here by Deputy Sheriff E. V. Bogart, with the following history. Can give no history as to consanguinity or heredity. This is not 1st attack; was, some years ago, insane and was in Hospital at Fergus Falls, Minn; result of treatment not known. First symptoms of this attack were manifested 2 days a[illegible] rational

inte[illegible]e, or,

at [illegible]dentery

fur[illegible]nn.

Do n[illegible]ination,

pate[illegible]of."-

Stru[illegible]

Dec 27 Dec[illegible] on back;

mer[illegible] patient

is u[illegible]ion of-

" 28 Skin[illegible] last night.

All[illegible] quietly

abou[illegible] delu-

" 29 - Icon[illegible]t and

Slep[illegible] of his

Eyes[illegible] and

abou[illegible] 99.6.

" 30 Dec[illegible]s.

" 31 qui[illegible]ing

1894 Jan 1 but 6[illegible]

Jan 1 Jan[illegible]

" 2 - beh[illegible]

" 3 Att[illegible]

" 10 Talks[illegible]

Patien[illegible]

has [illegible]

and C[illegible]

Spirit[illegible]

Card-[illegible]

" 15 Exci[illegible]

" 31 Compl[illegible]

Works[illegible]

Feb 1/28 Feb 1/94[illegible]

sleeps[illegible]

time,[illegible]

for fe[illegible]

Mar 7/31 March 1/94. Wt 184 lbs (a gain of 5 lbs in past month). Pulse 80. Mar 31/94. Seems quite well now.

Personal and Medical History of **Gustav Seitz**

1894

Apl 1 April 1/94. Patient was committed here under the "new Law", which has been declared unconstitutional. He was crossed off the books today, he having been staying here willingly to help in training the Hospital Band. He has been quite well, mentally, for some time, his attack, seemingly, having been a "mania-a-potu".

Crossed off the Records; was illegally committed.
William Sweytzer

From 264

1894

Sep 1/7 Sep 1/94. Wt 171½ lbs. Pulse 98. Sep 7/94. Noisy, ugly "spells", by day, continue. Bit attendant's hand, to day. - Sep 30/94. Has been quietly behaved this month, since last note; though has these ugly violent "spells" but they are short duration & while they last, he will fight savagely. No improvement noticed.

Oct 1/8 Wt. 172½ lbs. Pulse 86 (has gained some in flesh the past 2 months). Oct 6/94. Had a noisy & " 12 Excited "spell", caused by his being struck in the back, by a fellow patient. Oct 12/94. With this exception " 14 he has been quietly behaved this month. Oct 14/94. Had quite a "spell" of bumping his head against the " 31 wall, today. Says "it makes him feel better". Oct 31/94. Occasionally gets into quarrels & fights. Has been quite well-behaved, this month. Still talks incoherently. Habits neat. Physical Condition good.

Nov 1/30 Nov 1/94. Wt 173 lbs. Pulse 84. Nov 30/94 Patient has been quiet & well-behaved, during month.

Dec 1/31 Dec 1/94. Wt 181 " " 88. Dec 31/94. Bowels regular. Physical condition very good. Behavior has been quiet, during the month. Habits clean. Talks very little. Does not seem to improve.

1895 Jan 1 Jan 1/95. Wt 189 lbs. (has been gaining quite markedly in flesh the last 2 months) Pulse 90. —

" 31 Jany 31/95. Behaves well. Talks only when spoken to. Answers questions in a rational manner, but prefers not to be spoken to or have any one near him. Altogether, no improvement observed.

Feb 1/8 Feb 1/95. Wt 197 lbs. Pulse 90. He continues to gain in flesh. Feb 8/95. Behavior has been good. He talks only when spoken to; still has illusions & delusions. Has a small sore on back, similar to boil. Feb 9/95. ate nothing; complains of being sick at his stomach. T 100. " 9 6 P.M. Transferred to "Infirmary Ward". Appears quite weak; has slight fever; was put to bed.

" 10 Feb 10/95. Very restless, most of night. Slept only 2 hours. Complains, today, of feeling dizzy & weak.

" 11 Feb 11/95. Slept poorly during the night; out of bed, several times, looking out of the window.

" 12 appears some brighter, today. Feb 12/95. Restless 4 hours, sleeping but 3 hours. Has boil on ear.

" 15 Same o[illegible] and dressed. Feb 15/95. Has been sleeping about 5 hours nightly. Bowels costive.

" 16/17 Feb 16/95. Up, onward; dressed 4 hours during P.M. Feb 17/95. 7 P.M. Transferred to C[illegible]

" 21 Has received three in a nervous & fretful state. Feb 21/95. Kicked attendant kicker inside of

" 25 face, causing a scar. Feb 25/95. Refused food the past 3 days. received a Cathartic & ate his dinner today. Feb 28/95. Appetite improving. Patient is quietly - behaved.

" 28 March 1/95. Wt 188 lbs. P 86. March 31/95. Eats & sleeps well. No change in behavior; is quiet.

Mar 1/31 Makes no Complaints - Does not talk - Physical condition very good. Apl 1/95. Wt 190 lbs. P 90.

Apl 1 Apl 30/95. is generally quiet, but easily excited, when he becomes dangerous. No improvement noticed.

(carried to Transfer Book A" page 194)

Personal and Medical History of Charles A. Johnson

HERBERT, FIGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3606.
Residence, 428 - 14th Ave S.E. Minneapolis
Date Admission, 28th December 1893. —
Admitted by, Dr Kilbourne Hour, 7 P.M.
How Sent, John A. Steele, Jof C, Hennepin Co
Sex, male
Age, 47 years
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, none —
Degree Education, Common school education.
Profession Religion, Lutheran
Habits, not definitely stated
Nativity, Sweden (Parents also born there)
Physicians Committing, H.H. Leavitt & J.H. Sandberg.
Correspondents, John P. Johnson. 428 - 14th Ave S.E. Mpls (see new address appended Oct 15/96)
Family Physcn Dr. Jno. H. Sandberg (see later address May 19/96 - X)

No. for Year, 176.
Insane Relatives, none
Cause Exciting, slight cerebral hemorrhage
Cause Predisposing, previous attacks (light)
Form, general paresis
Accompanying Bodily Disorder, blindness
Suicidal or Not, not attempted, but prospects astir.
Date of this Attack, not stated
Duration, not stated
No. of Attack, 1st to record attack (but has had others slight)
No. of Admissions, 1st
Age First Attack, about 27 years
Time of Leaving, May. 26' 96.
Time in Hospital, 2 yrs. 4 Mo. 28 Das
Result, Died. General Paresis

EXAMINATION ON ADMISSION.

Exd. Feb 23/94. by Dr. Herzog.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, fairly quick
MEMORY:
Past Events,
Recent Events, poor
Special Subjects,
PERCEPTIVITY:
Alert or Dull, fairly alert
Correct or Illusive, in the main, Correct
REASONING POWER:
Ordinary Subjects, fair
Own Mental State, poor
Special Subjects, poor on money matters &c
GENERAL DESCRIPTIVE REMARKS:
The patient has very much the appearance of a genual paretic. His Illusions "of grandeur" are very profound. He is not content with millions but he owns the whole United States. He is a philanthropist on the most magnificent scale —

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Exalted.
Depressed,
DELUSIONS:
Systematized or Not, unsystematized "of grandeur"
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, at times Coherent
Voluble or Reticent, voluble —

Personal and Medical History of Charles A. Johnson

ON.—(Continued.)

NUTRITION, Poor

ness Movement, slow; deflects to left
ew previously destroyed.

been declared
was recommitted.
ox file in vault with the

ARTICULATION, Hesitating, a mixture of the Saxonic & Scandinavian.
FACIAL EXPRESSION, Contented.
SENSIBILITY,
HEART, Rapid; feeble; no murmurs
LUNGS, Seems good —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Charles A. Johnson

BARRETT, STOLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3606.

No. for Year 176

Residence, 428 - 14th Ave S.E.

Date Admission, 28th Decembe

Admitted by, Dr Kilbourne Hou

How Sent, John A. Steele, /

Sex, male

Age, 47 years

Civil Condition, single

Children, none

Age Youngest Child, —

Occupation, none -

Degree Education, Common Scho

Profession Religion, Lutheran

Habits, not definitely

Nativity, Sweden (Parents also born there)

Physicians Committing, A.H. Leavitt & J.H. Sandberg

Correspondents, John P. Johnson see new address attached 1895 428 - 14th Ave S.E. Minn

Family Physician Dr. Jno. H. Sandberg see later address May 19/96 X

Change of address of correspondent of Chas A. Johnson

Change of address of J.P. Johnson, correspondent of Chas. A. Johnson to 1835 - 4th St. North Minneapolis

X May 19/96

Handwr... March 2... Johnson blind

EXAMINATION ON ADMISSION.

Exd. Feb 23/94. by Dr. Herzog. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, fairly quick

MEMORY:

Past Events,

Recent Events, poor

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, in the main, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, poor

Special Subjects, poor on money matters &c

GENERAL DESCRIPTIVE REMARKS:

The patient has very much the appearance of a general paretic. His delusions "of grandeur" are very profound. He is not content with millions but he owns the whole United States. He is a philanthropist on the most magnificent scale -

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Exalted.

Depressed,

DELUSIONS:

Systematized or Not, unsystematized "of grandeur"

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, at times Coherent

Voluble or Reticent, voluble -

Personal and Medical History of Charles A. Johnson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8½ WEIGHT, 146 lbs. NUTRITION, Poor

WOUNDS OR ABNORMALITIES, None noted -

TONGUE, Tremors, fibrillary Coatings, ✓ Promptness Movement, slow; deflects to left

PUPILS, Equality, } Light of both Eyes ~~Size~~, has been previously destroyed.
Response Light, } Accommodation,

SIGHT, ✓

HEARING, Good

COORDINATION, Arms, somewhat impaired

Case No. 3606. Chas. A. Johnson. Vol. 25.

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, a mixture of the Saxonic & Scandinavian.

FACIAL EXPRESSION, Contented.

SENSIBILITY,

HEART, Rapid; feeble; no murmurs

LUNGS, Seems good -

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters, ✓

Personal ar... Johnson

176.

Whole No. 3606.
Residence, 428 - 14th Ave S.E.
Date Admission, 28th December
Admitted by, Dr Kilbourne Hour,
How Sent, John. A. Steele, Jo
Sex, male
Age, 47 years
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, none -
Degree Education, Common School
Profession Religion, Lutheran
Habits, not definitely stat
Nativity, Sweden (Parents also
Physicians Committing, H.H. Leavitt & J.H. Sandberg.
Correspondents, John P. Johnson see new address attached 1/5/96 428 - 14th Ave S.E. Minneapolis
Family Physician Dr. Jno. A. Sandberg see later address, May 19/96 X

C A Johnson
C A Johnson
Handwriting of Charles A. Johnson
March 25/96. Patient nearly blind

Superintendent.

EXAMINATION ON ADMISSION.

Exd. Feb 23/94. by Dr. Herzog. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, fairly quick
MEMORY:
Past Events,
Recent Events, poor
Special Subjects,
PERCEPTIVITY:
Alert or Dull, fairly alert
Correct or Illusive, in the main, Correct
REASONING POWER:
Ordinary Subjects, fair
Own Mental State, poor
Special Subjects, poor on money matters &c

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Exalted.
Depressed,
DELUSIONS:
Systematized or Not, unsystematized "of grandeur"
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, at times Coherent
Voluble or Reticent, voluble -

GENERAL DESCRIPTIVE REMARKS:
The patient has very much the appearance of a genial paretic. His delusions "of grandeur" are very profound. He is not content with millions but he owns the whole United States. He is a philanthropist on the most magnificent scale -

Personal and Medical History of Charles A. Johnson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8½ WEIGHT, 146 lbs. NUTRITION, Poor
WOUNDS OR ABNORMALITIES, None noted -
TONGUE, Tremors, fibrillary Coatings, Promptness Movement, slow; deflects to left
PUPILS, Equality, } Right of both eyes ~~Size~~, has been previously destroyed
Response Light, } Accommodation,
SIGHT,
HEARING, Good
COORDINATION, Arms, somewhat impaired

Case No. 3606. Chas. A. Johnson. Vol. 25.
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, a mixture of the Teutonic & Scandinavian.
FACIAL EXPRESSION, Contented.
SENSIBILITY,
HEART, Rapid; feeble; no murmurs
LUNGS, Seems good -
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Charles A. Johnson

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

176

Whole No. 3606.

Residence, 428 - 14th Ave S.E.

Date Admission, 28th Decembe

Admitted by, Dr Kilbourne Ho

How Sent, John A. Steele,

Sex, male

Age, 47 years

Civil Condition, single

Children, none

Age Youngest Child, —

Occupation, none -

Degree Education, Common Sch

Profession Religion, Lutheran

Habits, not definitely

Nativity, Sweden (Parents also born there)

Physicians Committing, H.H. Leavitt & J.H. Sandberg.

Correspondents, John P. Johnson, see new address 428 - 14th Ave S.E. Moline

Family Physician Dr. Jno. A. Sandberg See later address May 19/96 X

Change of address of correspondent of

Change of address of J.P. Johnson, correspondent

Hand

Marc

EXAMINATION ON ADMISSION.

Exd. Feb 23/94. by Dr. Herzog. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, fairly quick

MEMORY:

Past Events,

Recent Events, poor

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, in the main, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, poor

Special Subjects, poor on money matters &c

GENERAL DESCRIPTIVE REMARKS:

The patient has very much the appearance of a general paretic. His delusions of grandeur are very profound. He is not content with millions but he owns the whole united States. He is a philanthropist on the most magnificent scale -

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Exalted.

Depressed,

DELUSIONS:

Systematized or Not, unsystematized "of grandeur"

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, at times Coherent

Voluble or Reticent, voluble -

Personal and Medical History of Charles A. Johnson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8½ WEIGHT, 146 lbs. NUTRITION, Poor

WOUNDS OR ABNORMALITIES, None noted -

TONGUE, Tremors, fibrillary Coatings, ✓ Promptness Movement, slow; deflects to left

PUPILS, Equality, } Sight of both Eyes ~~Size~~, has been previously destroyed.

Response Light, } Accommodation,

SIGHT, ✓

HEARING, Good

COORDINATION, Arms, somewhat impaired

Legs, gait markedly impaired

TREMORS, Hands, slight Tongue, fibrillary

Facial Muscles, none General, —

REFLEXES, Patellar, equal - to - D. P. scale

Other Reflexes, ankle clonus -

ARTICULATION, Hesitating, a mixture of the Teutonic & Scandinavian.

FACIAL EXPRESSION, Contented.

SENSIBILITY,

HEART, Rapid; feeble; no murmurs

LUNGS, Seems good -

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Long ONSET GRADUAL OR SUDDEN, Gradual

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters, ✓

Personal and Medical History of Charles A. Johnson

LOBECK, VIOLAN & CHAMBERS, DAVENPORT, IOWA

1893

This patient was brought here, in due form, by a Sheriff's officer, with the following history of case. There is no history of consanguinity or heredity. This is the first severe attack, though he has had others; one twenty years ago; duration several weeks; also slight apoplectic attack once; was never in hospital. When first symptoms of this attack were manifested is not stated. Speech, however, was incoherent and mouth was drawn slightly to one side. The disease seems increasing. There are rational intervals of a few minutes, but with no regularity. Derangement is now shown by this incoherent speech; he is also, at times, violent. Is not disposed to injure others. Suicide has not been attempted, but propensity seems active, as he desires to get hold of razors &c. Is not filthy or destructive. No peculiarities of temper &c previously shown. Father used tobacco (probably to excess). Patient has an ocular disease of 25 years standing; also there is a probable injury of head. He has not been restrained or confined until lately, when he has been watched, in the house, for 10 days. Supposed cause of the disease is slight cerebal hemorrhage. He has had no medical treatment, until the last few days and then only sedatives; effects only temporary. On personal exam^n, there is a demented appearance of face, aggravated, of course, by blindness. Patient claims to have an iron mine in Itasca County – which he never had – Talks unreasonably, for a sentence or two, then rattles on incoherently & indefinitely. Appearance & manner slightly different from natural. Knows others, it is learned he did not recognize his own home and brother.

Dec 28 Dec 28/93. On admission, patient is nearly blind and very weak. Was put on B^2 (S.R. Complexion fair; hair brown; eyebrows; condition of skin good no marks, scars, bruises &c noticed. Bodily condition clean.
" 29 Behavior is good). Pulse 82. R 22. T(e) 98.8. Dec 29/93. Restless, getting out of bed & sleeping but 5 hours, last night. AM " 76 " 20 " 98. – Appetite is not very good; bowels, he says, are, as a rule, costive. Is frequently getting out of bed, today; talking a great deal. Eyesight is very poor. Tells of his travels and the different doctors that have treated his eyes. Coughs quite hard, at times. Also complains of pain in head. PM. Pulse 78. R 20. T 98. Dec 30/93. Was restless & disturbed,
" 30 sleeping during the night, only 4 hours. AM. Pulse 90 R 20 T 98^2. Is up & out around, today. Is very cross & stubborn; hard to manage. Says he is going to Redwing, to visit. PM. P 80. R 20. T 98.6.
" 31 Dec 31/93. Slept none, last night; Was restless & noisy all night; pounding with door and talking. Pulse (AM) 86. T(e) refused. Up, around, again today. Appetite good, but bowels are costive. Is very
1894 wild, ugly & unmanageable. Was locked in his room & kept in seclusion 4½ hours. PM. Pulse 82.
Jan 1 Jan 1/94. AM. Pulse 86. PM. Pulse 88. Has been restless, talkative & noisy mostly all the day.
" 2 Appetite is good, but he complains of bowels being constipated. Jan 2/94. Transferred to B^2, today. Has been climbing up on the seats & radiators; has had to be closely watched. Is talking all the time.
" 3 Was more quiet, sleeping 7 hours last night. AM. Pulse 86. Jan 3/94. Slept fairly well (7 hours),
" 4 last night. AM. Pulse 84. Appetite medium. Was violent and trying to get out. Jany 4/93. Slept 8 hours, last night. Gave some trouble when putting him to bed. AM. Pulse 88. Appetite medium.
" 5 Has been troublesome, in bed, part of the day. Jan 5/94. AM. Pulse 8[illegible]. "Wants to go home and get
" 6/7 married." Jan 6/94. AM. Pulse 82. No noticeable change, in condition. Jan 7/94. Has been sleeping 7 to 8 hours each of last 3 nights. AM. Pulse 84. By day, is troublesome, noisy, talking continually.
" 8 Jan 8/94. Was noisy for 3 hours, sleeping but 5 hours, last night. Was given a sleeping dose at bed time. AM. Pulse 86. Appetite poor. Shows delusions. Says he is going to be married soon. Frequently tries to get out

Personal and Medical History of Charles A. Johnson.

1894

Jan 9 Jan 9/94. Slept 8 hours, last night. Has quiet. AM. Pulse 84. Appetite medium. Patient is
" 10 growing more quiet, on the whole, by day; talks freely when questions, but shows manifests delu-
" 11 sions. Jan 10/94. Again, rested & slept well, last night. AM. Pulse 82. Appetite, still, is only medium. Has been quiet all day. Makes no complaints. Jan 11/94. Sleeps well, now. AM. Pulse 80. Appetite fairly good. Somewhat restless, today; talk is incoherent. —

" 23 Jan 23/94. On 4, of the past 10 nights, he has been restless & noisy for from 4 to 7 hours each, and
" 28 has slept very poorly. Is praying, and talking continually. Jan 28/94. Noisy, the greater part of the day. Received some scratches on face during the night from his room-mate (Mr Addleman)
" 31 Jan 31/94. Restless for 5 hours, sleeping but 2 hours, last night. Conduct & behavior, about as usual.

Feb 1/5 Feb 1/94. Wt 136 pds. (Gained 10 pounds, since coming). Pulse 84. Feb 15/94. Slept only 3 hours, last night; was noisy for 9 hours or so. Is deluded. Says "God is going to give him a new body" –
" 18 Feb 18/94. Noisy 6 hours, sleeping but 2 hours, last night. Was visited by a brother, today. —
" 23 Feb 23/94. Appetite good. Shows many delusions. Says "he is a very rich man; owns America and Europe". Does not seem to know where he is – Says "he is in Minneapolis". —
" 24 Feb 24/94. This patient was committed here under the "Law of 1893" recently declared unconstitutional. He was, today, Taken out and Returned under "New Warrant" from Olmsted County. Feb 26/94. Was restless & noisy for 7 hours, last night, sleeping but 1 hour.
" 28 Feb 28/94. At times, noisily behaved, by day; sings and prays very loud. Is of an irritable and "cranky" disposition. Appetite is ravenous. Still full of delusions.

Mar 2/6 Mar 2/94. Wt 139 pds. Pulse 92. Mar 6/94. Has been restless & noisy, for from 5 to 6 hours,
" 18 each of the past few nights, sleeping only 2 or 3 hours, each. Mar 18/94. During past week, patient has been very noisy for from 4 to 8 hours, each night, sleeping only from 1 to 3 or 4 hours on some nights sleeping none at all: has also been noisy, at times & frequently so, by day. Was,
" 22 today, transferred to B^4. Mar 22/94. Struck & scratched another patient (Jos K. Rhodes) on the
" 31 left cheek, today. Mar 31/94. Appetite is good, even ravenous, at times. Bowels are regular. Behavior about the same, from day to day; noisy & restless; singing and talking at top of his voice. Very pugnacious; fights with attendants when asked to go to bed &c. Talks incoherently; has delusions of great wealth &c. Patient is almost totally blind. Is cleanly in his habits. –

Apl 1/5 April 1/94 Wt 139 pds. Pulse 120. April 15/94. Patient has a good appetite; bowels are regular. No cough noticed. Behavior is noisy & very quarrelsome; if he does not get everything his own way, will fight on the slightest provocation, striking anyone coming near him. Is also very noisy at night, shouting & yelling aloud; has to be given hypnotic, nightly. Has delusions of wealth & grandeur, and bores some by loud & constant talking in that regard. Habits are cleanly; no injuries to report.
" 30 April 30/94. No change to report upon his physical or mental condition, since last note thereon.

May 1/4 May 1/94. Wt 145 pds Pulse 66. May 16/94. Slightly lame today; when going out for a walk,
" 31 slipped into a hole in the sidewalk & hurt his left leg some. May 31/94. Leg is now better. – Note of April 15th still holds good. He sometimes noisy; at times violent & difficult to handle.

June 1/30 June 1/94. Wt 145 pds Pulse 84. June 30/94. No special Change to report regarding patient, except that he is not so violent as he was & can be much more easily controlled than formerly. –

July 2/5 July 2/94. Wt 144 pds Pulse 68. July 31/94. Nothing special to report upon, at this date.

(carried to 94)

ROBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA

Friends of John Hansen - Mr Frank Johnson 583 West Main St
59 Hastly St. St Paul 6th Place

Whole No. 3611.
Residence, 666 Wells St. St Paul, Minn
Date Admission, 4th January 1894.
Admitted by, Dr Phelps Hour, 7 PM
How Sent, John. B. Oliver, Jo P. Ramsey County
Sex, Male
Age, 41
Civil Condition, married
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, Common Elementary
Profession Religion, Salvation Army "Lutheran"
Habits, Intemperate, a few years ago.
Nativity, Sweden (Parents also born there).
Physicians Committing, G. J. Stanley & J. M. A. Gravel
Correspondents, (friend) Mrs Anna Larson, 1060 Arcade St Paul
Mr Calle Erikson 666 Wells St " " "
Mr alf Larson " " "

No. for Year, 181.
Insane Relatives, none
Cause Exciting, Religious Monomania
Cause Predisposing, previous attacks.
Form, paranoia
Accompanying Bodily Disorder, possibly some head injury
Suicidal or Not, not
Date of this Attack, probably some months ago
Duration, probably some months.
No. of Attack, 3rd probably (others in '85/86 + 1893)
No. of Admissions, 3rd
Age First Attack, about 33.
Time of Leaving, Feb. 16th '94
Time in Hospital, 1 mo. 12 ds.
Result, Imp.

Crossed off from records 1st, 1894 because illegally committed.

EXAMINATION ON ADMISSION.

Exd by D. Herzog, Jan 5/94. MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, } Good
Recent Events, }
Special Subjects,

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

REASONING POWER:
Ordinary Subjects, Good
Own Mental State, Does not realize his Condition
Special Subjects,

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

DELUSIONS:
Systematized or Not, (See note)
Special Subjects,
Transitory or Not,

HALLUCINATIONS: Denies any

ILLUSIONS:

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

GENERAL DESCRIPTIVE REMARKS:

While he does not seem to have any well-marked delusions & specifically denies any hallucinations, still his whole manner of thinking seems to be delusive as evidenced by his belief in the advisability of his devoting most of his time in converting others & aiding the distressed to the extreme neglect of his own temporal welfare. The fact of his having been arrested 10 different times indicates that the common consensus of opinion is against his peculiar ideas of propriety. The dragging in of religious topics at inopportune moments, the manner with which he avoids his separation from his wife who was admitted to the Hospital at the same time as himself & the peculiar vacillation of his emotional state, combined with his previous history, indicate a state of Chronic mania or possibly religious Monomania

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 3½ WEIGHT, 138½ pd. NUTRITION, Fair
WOUNDS OR ABNORMALITIES, Scar on left eye; was struck by a drunken man, last October.
TONGUE, Tremors, slight; Defects slight; Coatings, slight white Coating; Promptness Movement, ✓
PUPILS, Equality, Equal Size, Normal
Response Light, Normal Accommodation, Normal
SIGHT, Good
HEARING, Good
COORDINATION, Arms, } Seems unimpaired by usual Tests.
Legs, }
TREMORS, Hands, very slight Tongue, Slight
Facial Muscles, None General, None
REFLEXES, Patellar, Equal — O — except a reinforcement.
Other Reflexes,
ARTICULATION, Hesitating, Swedish accent ~~Slurred~~,
FACIAL EXPRESSION, Normal
SENSIBILITY, ✓
HEART, Sound at apex somewhat muffled.
LUNGS, Good — so far as known —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Recent attack ONSET GRADUAL OR SUDDEN, gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, } No history of heredity obtained —
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Nels Johnson #4

EBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA.

1894

Was brought here by Deputy Sheriff W. W. Goss (who, at same time brought patient's wife), with the following history. There is no history of either consanguinity or heredity. This seems to be 3rd attack others occurring in 1885-6 and 1893; the first lasting about 6 months & the last 4 weeks. Was in this (Rochester) Hospital before; (see note below ®). First symptoms manifested, in this attack, same as in his previous ones. Disease seems increasing, but is variable and there are rational intervals. Is now insane on religious subjects; talking always religion; he hears voices; is emotional; crying &c. Patient is neither disposed to injure others, nor suicidal. Previously, showed religious impressions he has been intemperate, but a few years ago. Has had, possibly, some injury to head as he has a scar on the forehead. Supposed cause of the disease is religious Monomania. If he has been under treatment, unknown. On personal examination, there is found a general insanity. Wants to go to Rochester to protect the people from the wicked"; Said "that he hears voices; is crying, talking &c. Appearance and manner, those of an insane person.

Nick® Patient was here the 2nd time, as per Vol 23. page 29 No 3263 from Febys 10/93 to March 9/93. Derangement then shown as subject of religion, and, genually, about as in his previous attack. While last here he also showed some variations in behavior; at first, highly elated & extremely incoherent, in a mild maniacal way; again was complaining, sulky and quiet for a good many days. Towards the last, showed a rather irritable mental state. Was allowed to go only at the urgent request of wife, who promised to take him into the Country.

Jan 4/94 Jan 4/94. On admission, is in fair physical condition. Was put on ½. (S.R. Complexion light; hair dark; eyes blue; condition of skin good. Has a scar over left eye. Bodily condition dirty. Is excited & troublesome). Pulse 74. R 16. Jan 5/94. Slept well, last night. Abt. Pulse 72. R 17. Appetite " 5 good; bowels regular. Is quietly behaved; talks some about religion. When he is inclined to become " 6 quite excited and demonstrative. Jan 6/94. Probably sleeps well, at night. Abt. Pulse 92. R 18. Has been somewhat restless, today. Went about the ward, praying & talking about the Bible. Will get down on " 7 his knees, every little while. Is otherwise, well conducted. Agreeable & willing. Jan 7/94. Abt. Pulse 95. R 17. Is today, somewhat noisy, singing the most of the time. Talking to other patients about religion. " 8 Jan 8/94. Says that he rests well, at night. Abt. Pulse 85. R 16. Has been quiet all day; did some " 9 reading. Is a good worker in the ward. Jan 9/94. Abt. Pulse 84. Appetite good. Bowels regular. " 10 Conduct & behavior about as usual. Jan 10/94. Abt. Pulse 79. Is quiet and well behaved. Spends " 11 most of his time, today, in reading the Bible. Jany 11/94. Abt. Pulse 82. Appetite good. Has had no "excited Spells" for some days. Works willingly in the hall. Does considerable reading, and writes quite a few letters; these are chiefly on his particular theme, religion. —

" 12 Jan 12/94. Abt. Pulse 84. Has been quite noisy today; laughing, singing and reading much aloud.
" 13 Jan 13/94. Abt. " 89. Appears more quiet than usual, today. Still talks religion & the other patients.
" 14/5 Jan 14/94. Abt. " 81. Is about as usual. Jan 15/94. Abt. Pulse 86. Rests & sleeps well, at night. Appetite good. Has had none of his "Spells", the past few days; seems to be getting along nicely.
" 16 Jan 6/94. Abt. Pulse 81. Has been quiet all day - Spent most of his time, today, in reading.
" 17 Jan 17/94. Abt. " 87. Is now quite a well behaved patient and also a good & willing worker. Has had no more "excited Spells" of singing & talking about the Bible, but he reads the Bible a great deal.
" 18 Jan 18/94. Abt. Pulse 84. Patient apparently rests & sleeps well at night. For some days past,

Personal and Medical History of Nels Johnson #4

1894

Jan 18 Cont'd has behaved well and has no "excited" "Spells" Appetite good; bowels regular. Reads a good deal & writes quite a few letters. Does not care to play any games &c. Is clean, tidy & " 31 of good personal habits. Helps, willingly, with the work on the ward. Jan 31/94. Is now quiet and well-behaved. Has had no "excited Spells" for some time. Is fond of reading and reads his Bible a great deal. Works some on the ward.

Febs " 16 Feb 2/94. Wt today, 152 pds. (Has gained 13½ pounds, since Coming). Pulse 88. — Feb 16/94. Has continued about as usual. Quiet, well-behaved. Has had no excited "Spells" of late. Has been anxious to go back to St Paul, and get to work.

Was today allowed to go home.

Crossed off the Records; was illegally committed

Joseph Wilcox

1894 From 328.

Aug 31 Cont'd quite contented here, though he does not yet seem to realize where he is. Quite pleasant in manner & to talk to, though his conversation shows many & various delusions. Habits cleanly.
Sep 3/94 Sep 3/94. Wt 125 pds. Pulse 80. Sep 30/94. No change noticeable, physically or mentally -
Oct 2/94 Oct 1/94. Wt 130 pds. (Is gaining some in flesh). Pulse 72. Oct 31/94. Keeps about the same, month to month.
Nov 1/94 Nov 1/94. Wt 127 " Pulse 71. Nov 11/94. Visited by a friend today. Was quite talkative, in his way.
Dec 3/94 Dec 3/94. Wt 124 " Pulse 72. Dec 31/94. Behaves well. No delusions noted, but he is very forgetful and dull in his manner & actions. Complains of weakness. Appetite fair; bowels regular.
1895 Jan 3/95. Wt 125½ pds. Pulse 80. Jan 31/95. No change to note. Health quite good for him.
Feb 2/95. Wt 123 " Pulse 79. Feb 14/95. Restless & slept only 4 hours, last night. Complains of
" 28 pain in bowels, during night - Feb 28/95. Appetite not good: bowels irregular; Complains, quite frequently of pains in stomach & bowels. Talks freely & rationally, but memory very poor. Behaves well.
March 31/95 March 1/95. Wt 121 pds. Pulse 82. March 31/95. Keeps about the same, from month to month.
April 10/95 April 2/95. Wt 120 " " 84. Is losing some in flesh. April 10/95. Complains of headache and
" 11 pain in bowels. Given medicine. Would not go to bed this evening. April 11/95. Is feeling much better.
" 13/30 April 13/95. Refused to go out walking; complained of feeling weak. April 30/95. Patient seems to be
May 7/95 failing mentally & physically. May 7/95. Wt 119 pds. Pulse 86. May 14/95. Has been troubled
" 31 with diarrhoea, from time to time, of late. May 31/95. Is evidently failing. Appetite is poor. Remains in ward: will not go out walking; says "he feels too weak; Talks quite rationally,
June 1 but memory & reasoning power are very poor. June 1/95. Weight 118 pds. Pulse 88.
" 5/7 June 5/95. Has a slight Cough & complains of soreness in lungs. June 7/95. Is growing weaker.
" 10/17 June 10/95. Transferred to "Infirmary Ward" East. June 17/95. Is on regular & extra Diet.
Patient is quiet & well-behaved. Has no memory at all. Goes out on grounds, every day.
" 30 June 30/95. Sleeps & eats daily. Appetite good. bowels run regular. Has been quite talkative,
July 3 & very observing - Habits neat & clean. — July 3/95. Wt 111 pds. Pulse normal.
" 31 July 31/95. Appetite good. Frequently complains of pain in bowels (probably constipation). Generally cheerful, talkative & contented. Loss of memory almost complete. Goes out on grounds every day. On the whole, no change noted for the month. — (To Transfer Book A. page 165)

Personal and Medical History of Patrick J. Ford.

Whole No. 3613.

Residence, No home; business headquarters in Chicago

Date Admission, 6th January 1894.

Admitted by, Dr. Phelps Hour, 7 PM.

How Sent, Jno H. Steele, Jef P. Hennepin County

Sex, Male

Age, 35

Civil Condition, single

Children, —

Age Youngest Child, —

Occupation, Book Agent

Degree Education, has a good business education.

Profession Religion, Catholic

Habits, Probably intemperate

Nativity, Massachusetts, (parents also born there)

Physicians Committing, J.G. Grant & R.J. Hill.

Correspondents, Mary Ford, East Pepperell, Mass.

Family Physician not known.

No. for Year, 183.

Insane Relatives, None so far as could be learned.

Cause Exciting, not known

Cause Predisposing, probably minor attacks

Form, general paresis

Accompanying Bodily Disorder, none mentioned.

Suicidal or Not, not.

Date of this Attack, probably recent

Duration, probably short

No. of Attack, 1st (but has had frequent attacks of rush of blood to the head)

No. of Admissions, 1st

Age First Attack, about 35.

Time of Leaving, 22nd March 1894

Time in Hospital, 2 months & 16 days.

Result, Died; General Paresis & meningitis

EXAMINATION ON ADMISSION.

Exd by D. Herzog Jany 10/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, } Good

Recent Events, }

Special Subjects, does not remember most of this attack

PERCEPTIVITY:

Alert or Dull, alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, good

Own Mental State, good

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes

Depressed,

DELUSIONS:

Systematized or Not, None known

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None known

ILLUSIONS: None known

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Markedly voluble.

GENERAL DESCRIPTIVE REMARKS:

Since patient's admission to hospital, he has had 2 or 3 attacks, which his attendant describes as epileptic convulsions. In the certificate of physicians, these are mentioned as pushes of blood to the head, which, according to his description are, probably, attacks of "Petit-Mal". The patient has calmed down considerably since admission to the Hospital, and on examination today, was, although in a somewhat exalted frame of mind, in what might be termed a "lucid interval". He has been taking 30 grs. of Brom. Pot. a day since coming here.

Personal and Medical History of Patrick J. Ford.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8 in WEIGHT, 159 lbs NUTRITION, Good

WOUNDS OR ABNORMALITIES, None noted. (see S.R.)

TONGUE, Tremors, very slight Coatings, whitish Promptness Movement, quite prompt

PUPILS, Equality, Equal Size, possibly somewhat contracted

Response Light, Equal & normal Accommodation, Equal & normal

SIGHT, Normal

HEARING, seems good

COORDINATION, Arms, } seems unimpaired, by usual tests

Legs, }

TREMORS, Hands, very slight Tongue, very slight

Facial Muscles, none General, none noted

REFLEXES, Patellar, About 5 – somewhat sluggish –

Other Reflexes,

ARTICULATION, Hesitating, no Slurred, no — quite good

FACIAL EXPRESSION, Quick, nervous look.

SENSIBILITY,

HEART, Sounds are normal

LUNGS, Sounds normal

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 84 – RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, about 1½ years ONSET GRADUAL OR SUDDEN, Sudden

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

Mother or Mat. Relations, Uncle on mother's side, insane – mother of a high nervous disposition –

Father or Pat. Relations, Father living; Claims healthy.

Brothers or Sisters, None living healthy –

Personal and Medical History of Patrick J. Ford

LIBERT, PIOLAR & SCHAMBERG, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy Sheriffs Uhlein and Peterson with the following history of case. There is no history of consanguinity + none of heredity, so far as can be learned. This is 1st attack, but he has had frequent attacks of rush of blood to the head. Never has been in an hospital, so far as can be ascertained. This attack is probably recent; first symptoms occuring in a saloon, where he had be trying to tear his clothing + a towel. The disease is liable to increase. Patient has intervals during which he talks rationally for a short time, then the hallucinations become prominent. Shows hallucinations now; is controlled by some higher power, that controls his thoughts, words + actions." When the officers were arresting him, he fought them. Is not suicidal. Is of destructive habits, however. Nothing learned as to any previous peculiarities. No family history of intemperance brought out. Patient has had severe disease + injury to head, as far as can be learned. Was arrested by an officer for acting strangely, and, as soon as placed in a cell, became violent and had to be strapped; shouted until he was too hoarse to talk. Cause of disease is not known. No specified treatment mentioned. On personal examination, is evidently considerably excited; clothing disordered + torn. Said "that there was insane people around him; that he is controlled by some higher power + compelled to do whatever this Power indicates." Patient had been violent + talked incessantly, most of the night, but was quiet when examiners were present. Appearance and manner those of person considerably excited.

Jan 6 Jan 6/94. On admission, was put on B3. (S.R. Complexion sandy; hair dark; eyes brown; condition of skin good; has a small scratch on leg. Behavior was quarrelsome). No eruptions or ulcers noticed.
" 7 Bodily condition clear. Jan 7/94. Probably slept fairly well last night. Abd. Pulse 90 R 18 T 99. - Appetite good; bowels have moved. Has sound cough. Behaves well. Talks a good deal - Appears to be all right at present, but says he was very noisy + preaching, when arrested. No complaints or injuries to report. -
" 8 Jan 8/94. Was restless for 2 hours, but slept 7 hours, last night. Abd. Pulse 80. T 100.2. Behavior is good.
" 9 Works some in ward. Jan 9/94. Was quite noisy for 2 hours, during the night; slept 7 hours. Abd. Pulse 90. T 99.4. Had a convulsion this morning. Had another, this afternoon: both were very light; only lasting about 1 minute (In these convulsions, he did not cry out, nor fall down - They seem to be "petit-mal". D.H.). Jan 10/94. Restless 2 hours, sleeping 7 hours, last night. Abd. Pulse 78. T 100.4
" 10 Be quiet + well-behaved. Talks a good deal. Works some in ward. Habits are clean and neat.
" 11/12 Jan 11/94. Quiet, sleeping 7 hours, last night. Abd. Pulse 78. T 99.6. Jan 12/94. Again, rested
" 13 and slept fairly well, last night. Abd Pulse 78. T 99.4. Jan 13/94. Slept 6 hours last night; was somewhat restless, 3 hours or so. Was kicked by fellow-patient (Jeremiah Sullivan) while sweeping today,
" 14 and his zygomatic process fractured - Jan 14/94. Slept fairly well, last night. Pulse + T(e) about normal.
" 15/16 Jan 15/94. Slept 7 hours, last night. Was quiet. Had a convulsion this P.M. Jan 16/94. Restless
" 17 for 4 hours, last night. Sleeping but 5 hours. Jan 17/94. Slept well, last night. Is well-behaved, today.
" 18 Jan 18/94. Somewhat restless, sleeping 6 hours, last night. Had another convulsion, today, while playing Cards. Did not cry out or move, but remained perfectly quiet, in his chair, his face turning very pale.
" 19 Did not seem to realize anything for quite a while + acted stupidly. Jan 19/94. Restless, sleeping
" 20 but 6 hours, last night. Jan 20/94. Was restless for 3 hours, sleeping only 6 hours, last night. Complains of too much noise + says he can't sleep". Appetite has been uniformly good + bowels regular. Patient has been quiet + well-behaved. Talks considerably. Plays cards &c. Works well in ward.

Patrick J. Ford.

1894
Jan 26/94. Had one convulsion, during the day. Jan 31/94. One convulsion this A.M.
" 31/94. Appetite good; bowels regular. Is very talkative. Behavior is somewhat cranky + overbearing; seems to think he should be treated better than the rest of the patients. Had 2 convulsions today. Habits are clean. Physical condition seems good. ——— ———

Feby 1 Feb 1/94. Wt 165½ lbs (has gained 6½ lbs, since admission) - Pulse 76. —
" 7 Feb 7/94. Had one convulsion this evening, while working in dining-room: got unruly and stubborn, and had to be put out on the hall; then struck attendant (Olsen) on forehead, raising a lump; had to be held quite a while, before he realized what he was doing: When spoken to, later, about his conduct, says: he does not remember anything of
" 14 what transpired or what he was doing. Feb 14/94. Had a convulsion during the day.
" 22 Feb 22/94. Has been very nervous for the last day or two; complains of pain in chest; is rather cranky + disagreeable, at times; thinks he ought to have special privileges from the other patients; is very talkative and quite frequently bothers the other patients, that he thinks he can manage. Had a fight, yesterday, with a fellow-patient (Joseph Bricke) and received a bite on the arm.
" 25 Feb 25/94. A patient (Anning) tried to get away while out walking. Tried to stop him; got angry + struck many, bruising him in the face. —
" 28 Feby 28/94. Nothing special to report since last notes. ———

Mar 2/6 Mar 1/94. Wt 165½ lbs. Pulse 90. Mar 6/94. Patient appears to be growing worse, every day, of late. When first coming out that he could not go home today, he seemed much worried; put him into a sort of "spell"; could not realize anything: talked incoherently; is ugly + stubborn; inclined to be pugnacious - would not undress at bed time, this evening —
" 7 Mar 7/94. Was noisy + restless, nearly all night; slept only ½ an hour, bothering his roommates. Was taken + put in a single room at C3 - Had to be dressed this morning - Very contrary + wanted to fight. Was placed in alcove on C3. Refused his medicine. (Shows paretic speech and
" 8 walk; mental state that of confusion. D.P.). Mar 8/94. Slept only 4 hours, last night; was noisy + restless for 2 hours or so. Mar 9/94. Patient has
" 10 been very violent and noisy since put on C3; continuously talking; Appetite very poor; has not partaken of any food, since Tuesday (this the 4th day); also refuses his medicine. Is very contrary. Bowels irregular.

Patrick J. Ford

1894
Mar 11 Rested & slept poorly, but 3 hours, during the night. Was put to bed this forenoon & placed
in restraint sheet; was very contrary; would not take off clothes; then, was undressed by nurse.
" 12 Mar 12/94. Slept all night; was taken out of restraint about 2 o'clock, remained quiet
after that. Patient does not take any nourishment. Was very noisy, until yesterday
afternoon, when he called for some water, after which he was quiet & appeared sleeping.
" 13 Mar 13/94. Was restless & noisy for 8 hours, sleeping only about 4 hours, last night.
Drank about one pint of milk, today; has been very noisy restless, all day. Often attempts
" 14 Mar 14/94. Did not sleep any last night; very restless & noisy all night. Could not
be kept in bed. Is quiet this morning, and sleeping. Drank 2 cups of milk this a.m.
Was, today, transferred to C^3, the "Sick Ward." His brother in Chicago, also his
sister in Massachusetts were advised by telegram of his critical condition —
His brother, came in response to this telegram. ——
Patient was put to bed. Talks continually & is very restless. 12.30. Had a
Quite severe "coughing spell". Has taken about 1 quart of eggnog today. Was also
" 15 visited by Rev Mr Rardon & received the Sacrament. Mar 15/94. Was very
wild, during the early part of the morning; continually getting out of bed.
Slept from 10 to 12, and then became quite ugly; had to be held in bed.
Took about a quart of eggnog, during the day. Talked quite rationally, at times.
" 16 Mar 16/94. Bowels have not moved since coming on this ward - Again visited by
his brother, today. Took about 3 pints of eggnog. Has been very restless, all
day & had to be held in bed, almost all the time. 7 PM. Was put in restraint sheet.
" 17 Mar 17/94. 3 AM, was taken out of restraint. Was given an enema of
soap- suds & glycerine, but had no effect. Throat is swollen a great deal:
he has difficulty in swallowing. 11 AM. Bowels had moved freely; passages
thin and of a dark color. 7 PM. Respiration hard. He is perspiring
profusely & appears to be rapidly failing. Visited by his brother. (Patient
" 18 has had Cheyne-Stokes breathing today. D.E). Mar 18/94. Has been very
restless, at times, during the day. Took some little nourishment. —
" 19 Mar 19/94. Restless nearly all day. Took a little nourishment.
" 20 Was again visited by his brother. Mar 20/94. Very restless & talking

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DETAILED HISTORY OF SICKNES
DIA

1894 C 2.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP AM	RESP PM	TEMP AM	TEMP PM
Mar 14	11	5	120	124		26		103

Patrick I

	1894	
	Mar 11	Rested & slept poorly, but 3 hours. [illegible] in restraint sheet; was ev[illegible]
"	12	Mar 12/94. Slept all after that. Patien[illegible] afternoon, v[illegible]
"	13	Mar[illegible] [illegible]ng. [illegible] last night. [illegible]ay often at other [illegible] all night. could not [illegible]rank 2 cups of milk this a[illegible] [illegible]s brother in Chicago, also his [illegible]aw of his critical condition — [illegible].
"	15	[illegible]ks continually & is very restless. 12.30. Has a [illegible]as taken about 1 quart of eggnog today. Was also [illegible]w received the Sacrament. Mar 15/94. Was very wild [illegible] early part of the morning; continually getting out of bed. Slept p[illegible] to 12, and then became quite ugly; had to be held in bed. Took about a quart of eggnog, during the day. Talked quite rationally, at times.
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"	18	restless, at times, during the day. Took some little nourishment. —
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"	20	Was again visited by his brother. Mar 20/94. Very restless talking

Patrick J Ford.

	1894 Cont'd	
	Mar 20	up to 10. AM: then became quiet, with labored breathing, and a rat-tling sound in throat. Has taken but little nourishment today. —
"	21	Mar 21/94. 2.30 PM. Feet and hands are cold; hot sand bag applied. 6 PM. Rapidly failing. Respiration labored. Pulse very weak. —
"	22	Mar 22/94. Patient continued to sink rapidly and Died at 2.25, this morning. — (See attached record of nurse)

Remains were removed by relatives.

— Died —